FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Vashington,	D.C.	20549	

	OMB APPROVAL
- 1	

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Secti	on 30(l	n) of the	e Investmen	t Cor	npany Act	of 1940								
1. Name and Address of Reporting Person* King David S (Last) (First) (Middle) 10200 BELLAIRE BLVD. 2NE-14B					2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
					3. Date of Earliest Transaction (Month/Day/Year) 01/07/2009										Officer (give title below) Pres Completion 8		Other (specify below) & Productio			
(Street) HOUSTON TX 77072				_ 4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(City) (State) (Zip)				-											Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deri	vative	e Se	curiti	ies A	cquired,	Dis	posed (of, or I	Benefi	iciall	/ Owne	d d				
1. Title of Security (Instr. 3)			2. Trans	. Transaction		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Secu Transaction Dispos Code (Instr. 5)		4. Secur Dispose	urities Acquired (A) led Of (D) (Instr. 3, 4) or	5. Amou Securiti Benefic	Amount of curities neficially when Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	V	Amount	unt (A) or (D)		rice		Transaction(s) (Instr. 3 and 4)				
Common	Stock			01/0	7/2009	9			D		3520	1)) \$	20.91	. 10	9,623		D		
		7							quired, D s, optior						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	version Date (Month/Day/Year) e of vative		ed Date, ay/Year)	Code (Inst		on of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amo or Num of Sha	ber						
Option to Buy Common Stock	\$15.42								12/02/2008	3 1	2/02/2018	Commo Stock	ⁿ 48,	200		48,200)	D		
Option to Buy Common Stock	\$15.77								07/19/200:	L 0	7/19/2011	Commo Stock	ⁿ 4,3	347		4,347		D		
Option to Buy Common Stock	\$7.47								08/28/2002	2 0	8/28/2012	Commo Stock	n 4,2	.00		4,200		D		
Option to Buy Common Stock	\$14.43								03/16/2004	1 0	3/16/2014	Commo Stock	n 3,4	78		3,478		D		
Option to Buy Common Stock	\$22.55								04/07/200	5 0	4/07/2015	Commo Stock	ⁿ 6,1	.32		6,132		D		
Option to Buy Common Stock	\$33.02								01/06/2000	5 0	1/02/2016	Commo Stock	ⁿ 5,0)54		5,054		D		
Option to Buy Common Stock	\$29.87								01/03/2007	7 0	1/03/2017	Commo Stock	ⁿ 5,8	19		5,819		D		
Option to Buy Common	\$35.67								02/13/2008	3 0	2/13/2018	Commo Stock	n 7,5	553		7,553		D		

Explanation of Responses:

Remarks:

^{1.} Shares transferred to Halliburton Company for payment for Federal tax withholding obligations on lapse of restrictions on shares issued under the 1993 Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted shares to the Issuer.

<u>Attorney</u>

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.