FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Brown James S					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 V Officer (give title Other (specify											wner			
(Last) (First) (Middle) 1125 17TH STREET SUITE 1900				3. Date of Earliest Transaction (Month/Day/Year) 07/30/2009									helow)	below) President - Western Hemispher					
					4. If a	Ame	endmen	t, Date	of Origina	l Filed	l (Month/D	ay/Ye	ar)	6. I	ndividual or	Joint/Group	Filing	(Check Ap	plicable
(Street) DENVER CO 80202												- 1	X Form	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)												F 6130				
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	es A	cquired	Dis	posed	of, o	r Ben	eficial	ly Owne	d			
Date			2. Transa Date (Month/E			2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispo Code (Instr. 5)		curities Acquired (A) used Of (D) (Instr. 3, 4			Benefici Owned I	ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	t (A) or Pr		Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Stock			07/30)/2009				D		83(1)	D	\$21.0	5 266,9	68.47 ⁽²⁾		D	
		7	able II -						quired, [s, optio						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Transaction Code (Instr. III)		of Deriv Secu Acqu (A) of Dispo of (D) (Instr	of Ex		. Date Exercisable and :xpiration Date Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	ive derivative y Securities	e C S Illy C O	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	0 N	Amount or Number of Shares					
Option to Buy Common Stock	\$15.42								12/02/200	18	2/02/2018	Com	1 2	19,700		49,700		D	
Option to Buy Common Stock	\$35.67								02/13/200	0 8	2/13/2018	Com		10,000		10,000		D	
Option to Buy Common Stock	\$22.55								04/07/200	05 0	4/07/2015	Com		2,193		2,193		D	
Option to Buy Common Stock	\$33.02								01/06/200	0 0	1/06/2016	Com		6,000		6,000		D	
Option to Buy Common	\$29.97								01/03/200	7 0	1/03/2017	Com		13,400		13,400		D	

Explanation of Responses:

- 1. Shares transferred to Halliburton Company for payment for Federal tax withholding obligations on lapse of restrictions on shares issued under the Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted shares to the Issuer.
- 2. Includes 1,285.347 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan for the period ended June 30, 2009.

Remarks:

Stock

Robert L. Hayter, by Power of Attorney

08/03/2009

** 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.