#### HALLIBURTON CO

Form 4

December 08, 2016

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB** 

**OMB APPROVAL** 

Number:

3235-0287

Expires:

January 31, 2005

0.5

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obligations

may continue.

See Instruction

Check this box

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

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Jones Myrtle L

2. Issuer Name and Ticker or Trading

Symbol

HALLIBURTON CO [HAL]

Issuer

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last)

(City)

(First)

(Middle)

(Zip)

3. Date of Earliest Transaction

(Month/Day/Year)

12/06/2016

Director 10% Owner X\_ Officer (give title

below) Senior Vice Pres - Tax

Other (specify below)

PARKWAY EAST, PLAZA 2 - 5412 (Street)

(State)

4. If Amendment, Date Original

F

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

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

HOUSTON, TX 77032

3000 N. SAM HOUSTON

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4)

(A)

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price \$

719 (1) D

17,683.617 D

Common Stock

12/06/2016

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required to respond unless the form displays a currently valid OMB control

(2)

54.17

number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy Common Stock	\$ 38.95					12/02/2015	12/02/2025	Common Stock	8,400	
Option to Buy Common Stock	\$ 40.75					12/03/2014	12/03/2024	Common Stock	8,400	
Option to Buy Common Stock	\$ 50.62					12/04/2013	12/04/2023	Common Stock	5,700	
Option to Buy Common Stock	\$ 39.96					03/04/2013	03/04/2023	Common Stock	6,500	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	D:	100/ 0	Off:	Othon		

Director 10% Owner Officer Other

Jones Myrtle L 3000 N. SAM HOUSTON PARKWAY EAST PLAZA 2 - 5412 HOUSTON, TX 77032

Senior Vice Pres - Tax

## **Signatures**

Robert L. Hayter, by Power of Attorney 12/08/2016

\*\*Signature of Reporting Person Date

Reporting Owners 2

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## **Explanation of Responses:**

- \* 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).
- Shares transferred to Halliburton Company for payment for Federal tax withholding obligations on lapse of restrictions on shares issued (1) 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 315.511 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan for the periods ended March 31, 2016, June 30, 2016 and September 30, 2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.