Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	OF CHAN	IGES IN BEN	IEFICIAL O	WNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL							
OMB Number: 3235-0287							
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Name and Address of Reporting Person* AND TRACE AND TRACTOR					2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
ANDERSON DAVID J												Dire	ector			10% Ov	ner		
(Look) (Eisch) (Middle)			но	HON]								X Office below		give title	e Other (speci below)		pecify		
(Last) (First) (Middle)			3. Da	3. Date of Earliest Transaction (Month/Day/Year)								Senior VP & CFO							
C/O ITT INDUSTRIES INC				11/12/2004															
4 W RED OAK LN																			
				4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														,	m fil	ed by One	Reno	rting Persor	,
WHITE PI	LAINS NY	1	0604													,	•	Ü	
,													Form filed by More than One Reporting Person						
(City)	(Stat	re) (Z	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			action	ction 2A. Deemed 3. 4. Securities Acquired (A)						ed (A) or	or 5. Amount of			of 6. Ownership		7. Nature of			
			Day/Ves	Execution Date			Transaction Disposed Of (D) (Ins			tr. 3, 4 and						Indirect Beneficial			
			(IVIOITITI)	(N		(Month/Day/Year)) 8)				Owne	Owned Following		(I) (Instr. 4)	Ownership			
			Code					v	Amount	(A) oi	Price	Repo Trans		l ion(s)		l'	(Instr. 4)		
						Code	<u> </u>	Amount (A) or (D)		File	(Instr. 3 and 4)		nd 4)						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
			(e.g., p	uts, o	calls,	, warra	nts,	option	ıs, c	onvertib	le secu	rities)						
1. Title of	2.	3. Transaction	3A. Deeme	ed	4.		5. Numl	ber	6. Date E	xerci	sable and	7. Title a	nd Amoun	t 8. Price	of	9. Numbe	r of	10.	11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Dat	Date,	Transa Code (Expiration Date (Month/Day/Year)			of Securi Underlyi		Derivative Security		derivative Securities		Ownership Form:	of Indirect Beneficial
(Instr. 3) Price of (Month/Day/Year)				y/Year)	8)	Securities		Derivative Sec				e Security			Beneficia		Direct (D)	Ownership	
	Derivative Acquired (Instr. 3 Security (A) or							(Instr. 3 a	ınd 4)			Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)				
Disposed Disposed												Reported		(,, (,					
					of (D) (Instr. 3, 4 and 5)								Transaction(s) (Instr. 4)						
				İ									Amoun	:					
													or Numbe	.					
					Code	v	(A)	(D)	Date Exercisa	_{ble}	Expiration Date	Title	of Shares						
Connlamont-1					Joue	_	(-)	(5)					Jonates	+					
Supplemental Savings Plan Interests	(1)	11/12/2004			A ⁽²⁾		29.407		(2)		(2)	Common Stock	29.40	\$36.6	2	255.73	35	D	

Explanation of Responses:

- Instrument converts to common stock on a one-for-one basis.
- 2. Reflects phantom shares of common stock represented by Company contributions to my account under the Executive Supplemental Savings Plan under Rule 16b-3 on 11/12/04.

Gail E. Lehman for David J.

Anderson

11/16/2004

** Signature of Reporting Person

Date

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

- * 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.