FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

STATEMENT	OF CHAI	NGES IN B	ENEFICIAL	OWNERSHIP

OMB APPROVAL										
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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* WEIDENKOPF THOMAS W				<u>H</u>	2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC HON]					(Che	elationship o ck all applica Director	able)	Perso	on(s) to Issu 10% Ow Other (s	/ner		
(Last) HONEYW 101 COLU		,	1iddle)		Date of /09/20		ransa	ection (Mor	nth/D	ay/Year)			below)		Comi	below)	·
(Street) MORRIST (City)	OWN NJ		7962 ip)	4. 1	f Amen	dment, Da	ate of	Original F	iled	(Month/Day	/Year)	6. Incline	Form fil	ed by One	Repoi	(Check App rting Persor One Repor	.
1. Title of Security (Instr. 3) 2. Trans Date			ransaction	Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 5) Disposed Of (D) (Instr. 3, 4			l (A) or	5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Ownership (Instr. 4)					
		y., puts,			uired, Disposed of, , options, convertib 6. Date Exercisable and Expiration Date (Month/Day/Year)				8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of indirect Beneficial Ownership (Instr. 4)				
Supplemental Savings Plan Interests	(1)	12/09/2005		Code A ⁽²⁾	+	(A) 19.387	(D)	Date Exercisal		Expiration Date	Title Common Stock	Number of Shares	\$35.71	276.72	2	D	

Explanation of Responses:

- 1. 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 12/09/05.

Gail E. Lehman for Thomas W.

12/13/2005

Weidenkopf

** 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.