FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
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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* DAVIS D SCOTT | | | | | | 2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC [HON | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|------------|-------------|-----------------|--------|--|--|-----------------------------------|--|---|---------------------|-----------------|---|------------------------------------|---|---|--------------------------------|--|---------------------------------------|--|
| | | | | | | | | | | | | | | | Director | | | 10% Ow | | |
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2006 | | | | | | | | | Officer (giv below) | Officer (give title below) | | Other (s below) | pecify | |
| (Street) | | | | | | 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 O | ne Reportir | ıg Person | | |
| | | Та | ble I - Nor | 1-Deri | ivativ | e Se | ecurities | Acq | juired, D | Disp | osed of | i, or Ben | efici | ally Ov | /ned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/L | | | | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transact Code (Ins 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | nd 5) Securities Beneficially Following F | | Owned eported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) or (D) Price | | rice | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion Date E str. or Exercise (Month/Day/Year) if | | if any | Execution Date, | | tion nstr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisa Expiration Date (Month/Day/Year | | Securities Un | | Under | lying | 8. Price of Derivative Security (Instr. 5) | 9. Numb derivati Securiti Benefic Owned Followin Reporte Transac | ve ies ially ng ed | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | Expiration Date | Title | | unt or ber of es | (Instr | | | | | |
| Deferred Compensation (Phantom Shares) | (1) | 01/03/2006 | | | А | | 1,610.738 | | (2) | | (2) | Common Stock | 1,6 | 10.738 | \$37.25 | 2,260 | 0.306 | D | | |

Explanation of Responses:

1. Instrument converts to common stock on a one-for-one basis.

2. Phantom shares are accrued under the Deferred Compensation Plan for Non-Employee Directors and will be settled in cash following retirement.

| Gail E. Lehman for D. Scott | 01/05/2006 | | | | |
|----------------------------------|------------|--|--|--|--|
| <u>Davis</u> | | | | | |
| ** Signature of Reporting Person | Date | | | | |

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

 \ast 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.