FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OIVID API	PROVAL
OMB Number:	3235-0287
L = -4:	

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 Estimated average burden hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							( ) -			_	<u> </u>									
Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>COTE DAVID M</u>					HON ]									Director		10% Ow		ner		
						HON J									Officer ( below)	give title	Other (sp below)		pecify	
(Last)	(Firs	t) (N	liddle)		3. Date of Earliest Transaction (Month/Day/Year)									Chairman & CEO						
101 COLUMBIA ROAD					10/17/2014											Chamina	ıı a (	GLO		
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)												•		Line)						
MORRIST	OWN NJ	07	7960											X		,		rting Person		
-															Form fil Person	filed by More than One Reporting				
(City)	(City) (State) (Zip)														1 2.55					
		Tabl	e I - Non-I	Deriva	ative	Sec	urities	Acq	uired, Di	isp	osed of	, or Ber	nefici	ially	Owned					
1. Title of Se	curity (Instr.	3)	2	2. Transa	action	2,4	A. Deemed	i	3.	Ť	4. Securiti	es Acquire	d (A) o	r	5. Amoun	t of	6. Ow	nership	7. Nature of	
Dat				Date Month/D	)av/Yea		Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 3, 5) 8)			r. 3, 4 a	4 and Securities					Indirect Beneficial Ownership		
					Juyrreu									Owned Following Reported		(I) (Instr. 4)				
									Code V		Amount	nount (A) or P		ce	Transacti	ransaction(s) Instr. 3 and 4)		'	(Instr. 4)	
						tive Securities Acquired, Disposed of, or Bene							,							
		Ta							ired, Dis options,						wned					
1. Title of	2.	3. Transaction	3A. Deemed	Date, Tr			5. Number		6. Date Exercisable a			7. Title an				9. Numbe		10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Da		Transa Code (							of Securities Underlying		Derivative Security		derivative Securities		Ownership Form:	p of Indirect Beneficial	
(Instr. 3)	str. 3) Price of (Month/Da				8)		Securities Acquired (A) or Disposed of (D) (Instr.		Derivative Sec (Instr. 3 and 4)					urity (Instr. 5)		Beneficially Owned		Direct (D) or Indirect	Ownership	
Derivative Security									(11511. 3 and 4)				nu 4)			Following Reported Transaction(s)		(I) (Instr. 4)	(Instr. 4)	
				L			3, 4 and 5)									(Instr. 4)				
													Amo or	unt						
													Num	ber						
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	of Shar	es						
Supplemental Savings Plan Interests	(1)	10/17/2014			A <sup>(2)</sup>		41.767		(2)	Ī	(2)	Common Stock	41.7	767	\$90.06	22,700.9	949	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 10/17/2014.

Jacqueline Katzel FOR David 10/20/2014 M. Cote

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.