FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |

0.5

hours per response:

| Check this box | if no longer subject to |
|------------------|-------------------------|
| Section 16. Fo | rm 4 or Form 5 |
| obligations ma | y continue. See |
| Instruction 1(h) | Ň |

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* <u>Kramvis Andreas</u> | | | | 2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC HON] | | | | | | (Ch | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (spee | | | | ner | | |
|---|--|--------------------|---|---|---|--|---------|--------|--|---|---|--|---|---|----------|--|---------------------------------------|
| (Last) (First) (Middle) 101 COLUMBIA ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/05/2013 | | | | | | | below) | s/CEO Ho | neyw | below) | | |
| (Street) MORRISTOWN NJ 07960 (City) (State) (Zip) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | Tabl | e I - Non- | -Deriv | ative | Sec | urities | Acq | uired, Dis | sposed of | , or Ben | eficiall | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) | | | | 5. Amour Securitie Beneficia Owned F | s Illy ollowing | Form: (D) or I | rm: Direct or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | Code V | Amount | (A) or (D) | Price | Transacti (Instr. 3 a | on(s) | | | 1150. 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) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Supplemental Savings Plan Interests | (1) | 04/05/2013 | | | A ⁽²⁾ | | 14.071 | | (2) | (2) | Common Stock | 14.071 | \$72.98 | 4,971.15 | 57 | D | |

Explanation of Responses:

- 1. Instrument converts to common stock on a one-for-one basis.
- $2. \ Reflects \ phantom \ shares \ of \ common \ stock \ represented \ by \ Company \ contributions \ to \ my \ account \ under \ the \ Executive \ Supplemental \ Savings \ Plan \ under \ Rule \ 16b-3 \ on \ 04/05/2013.$

<u>Jacqueline Katzel FOR Andreas</u> <u>Kramvis</u> 04/08/2013

** 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.