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 b | stimated average burden | | | | | | | | |

0.5

hours per response:

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* <u>ANDERSON DAVID J</u> | | | | HC | 2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC HON | | | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title 10%) | | | wner |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-----|----------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------|
| (Last) (First) (Middle) C/O ITT INDUSTRIES INC 4 W RED OAK LN | | | 05/1 | 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2005 | | | | | | X Officer (give title Other (specify below) Senior VP & CFO | | | | | |
| (Street) WHITE PLAINS NY 10604 (City) (State) (Zip) | | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | ndividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | saction | Execution Date, | | | 3. Transaction | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5) | | l (A) or | 5. Amoun Securities Beneficies Owned F- Reported Transacti (Instr. 3 a | s Fo Illy (D ollowing (I) | Ownership orm: Direct) or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (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) | 2. Conversion or Exercise Price of Derivative Security | cise (Month/Day/Year) ve | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 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(s) (Instr. 4) | 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) | 05/13/2005 | | A ⁽²⁾ | | 22.479 | | (2) | (2) | Common Stock | 22.479 | \$35.93 | 560.868 | 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 5/13/05.

Gail E. Lehman for David J.

Anderson

05/16/2005

** 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.