## Edgar Filing: HONEYWELL INTERNATIONAL INC - Form 4

HONEYW Form 4 April 02, 20	ELL INTERNATI	ONAL IN	IC								
FORM									OMB /	APPROV	AL
-	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549								3235	-0287
Check t if no lor subject Section Form 4 Form 5	nger <b>STATEN</b> to <b>STATEN</b> 16. or			SECU	RITIE		Estimated burden ho response.	Expires:January 31 200Estimated average burden hours per response0.			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
1. Name and Lieblein G	Person <u>*</u>	2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC [HON]					<ul><li>5. Relationship of Reporting Person(s) to Issuer</li><li>(Check all applicable)</li></ul>				
(Last) (First) (Middle) 101 COLUMBIA ROAD			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2015					XDirector10% Owner Officer (give titleOther (specify below)below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
MORRIS	TOWNSHIP, NJ 0	7962						Form filed by Person	More than One I	Reporting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivat	ive Securiti	ies Acc	quired, Disposed	of, or Benefici	ally Owne	ed
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if		Dispos (Instr.	(A) or sed of (D) 3, 4 and 5) (A) or	S F C F T	5. Amount of Securities Beneficially Dwned Following Reported Fransaction(s) Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Natur Indirect Benefici Ownersl (Instr. 4)	al hip
				Code V	Amou	nt (D) Pr	rice				
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	Per info req	sons who ormation c uired to re	o resp contai espon	indirectly. ond to the colle ined in this form ad unless the fo ly valid OMB co	n are not orm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

number.

## Edgar Filing: HONEYWELL INTERNATIONAL INC - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	<ul> <li>Acquired (A) or</li> <li>Disposed of (D)</li> <li>(Instr. 3, 4, and</li> <li>5)</li> </ul>					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun Numbe Shares
Deferred Compensation (Phantom Shares)	<u>(1)</u>	04/01/2015		A <u>(2)</u>		143.802		(2)	(2)	Common Stock	143.8

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
F	Director	10% Owner	Officer	Other				
Lieblein Grace 101 COLUMBIA ROAD MORRIS TOWNSHIP, NJ 07962	Х							
Signatures								
Jacqueline Katzel FOR Grace Lieblein		04/02/2015						
<u>**Signature of Reporting Person</u>		Date						

## **Explanation of Responses:**

- \* 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).
- (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 upon termination or retirement.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.