FORM 4

U

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									

0.5

Estimated average burden

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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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense

conditio Instructi	ns of Rule 10l on 10.	b5-1(c). See																	
1. Name and Address of Reporting Person* West Kenneth J					<u>H</u>	2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC HON]								5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Ov Officer (give title Other (s				/ner	
(Last) 855 S. M.	ast) (First) (Middle) 55 S. MINT STREET				3. Date of Earliest Transaction (Month/Di 10/28/2025						Day/Year)			Officer (give title Other (specify below) President and CEO, ESS					
(Street) CHARLOTTE NC 28202 (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(0		(Zip)	n-Deri	ivativ	, S	curi	tios Ac	nuirod	Die	nosed o	of or Bo	noficiall	v Owned					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				saction	ction 2A. Deemed Execution Date,			3. Transaction Code (Instr.		4. Securit	ies Acquire Of (D) (Inst	d (A) or	5. Amour Securitie Beneficia Owned F	s illy ollowing	Form:	: Direct I Indirect I str. 4) (7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 10/28/					8/202	2025			M		2,344	A	(1)	4,3	4,364		D		
Common	on Stock 10/28				8/2025				F		1,092	D	\$214.3	3 3,2	3,272		D		
Common Stock														610	.723		I	Held in 401(k) plan	
			Table II -					•		•	osed of, converti		-	Owned					
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date, Transact Code (Ins			ion Derivative		6. Date Exercis Expiration Dat (Month/Day/Ye		е	7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi ct (Instr. 4)	
					Code	de V (A	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	1011(3)			
Restricted Stock	(1)	10/28/2025			M			2,344 ⁽²⁾	(3)		(3)	Common Stock	2,344(2)	\$0	6,891	(4)	D		

Explanation of Responses:

- 1. Instrument converts to common stock on a one-for-one basis.
- 2. Includes the reinvestment of dividend equivalents into 47 additional restricted stock units.
- 3. The Restricted Stock Units were granted under the 2016 Stock Incentive Plan of Honeywell International Inc. and its Affiliates and vest in four equal annual installments, with the first installment vested on 10/28/2025.
- 4. Excludes reinvestment of dividend equivalents during the vesting period.

Remarks:

Richard Kent for Kenneth J. West ** Signature of Reporting Person

10/29/2025

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.