SEC Form 4	
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Instruction 10.

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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
conditions of Rule 10b5-1(c) See

<b>UNITED STATES</b>	SECURITIES AND	EXCHANGE	COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.5								

		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A Transaction Code (Instr. 5) Code V Amount (A) or r			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Table I - No	n-Derivative	Securities Acq	uired, Dis	posed of,	or Ben	eficially	Owned		
(City)	(State)	(Zip)							Form filed by Mo Person	re than One Rep	orting
(Street) CHARLOTTE	NC	28202	4. If A	mendment, Date of	Original Filed	(Month/Day/Y	'ear)	6. Indi Line)	vidual or Joint/Group Form filed by On	e Reporting Pers	on
(Last) 855 S. MINT ST	(First) TREET	(Middle)		e of Earliest Transac 0/2025	ction (Month/	Day/Year)		President and CEO, IA			
1. Name and Addre	UCIAN			uer Name <b>and</b> Ticke NEYWELL II			INC [		ationship of Reportir k all applicable) Director Officer (give title below)	10% 0	Owner (specify

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Code ١v

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 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(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Options (right to buy)	\$209.81	02/19/2025		A		22,700		(1)	02/18/2035	Common Stock	22,700	\$ <b>0</b>	22,700	D	
Restricted Stock Units	(2)	02/19/2025		Α		4,700		(3)	(3)	Common Stock	4,700	\$0	4,700	D	

Explanation of Responses:

1. The Employee Stock Options 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 vesting on 2/19/2026

2. Instrument converts to common stock on a one-for-one basis.

3. The Restricted Stock Units were granted under the 2016 Stock Incentive Plan of Honeywell International Inc. and its Affiliates and will vest 33%, 33% and 34% on each of February 19, 2027, February 19, 2028 and February 19, 2029, respectively.

## Remarks:

Su Ping Lu for Lucian Boldea 02/21/2025

\*\* Signature of Reporting Person Date

(A) or (D)

Price

(Instr. 3 and 4)

Amount

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

 $^{\ast}$  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.