| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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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 | | | | | | |
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| Estimated average burden | | | | | | |
| hours ner resnonse. | 05 | | | | | |

| | | | | | | Scould | 511 50(11) | or the | , | estiment | 20111 | pully Act | 01 1040 | | | | | | | |
|--|---|---------|-------------------|---|---|--|--|--------|------------|---------------------------------------|---|------------------------------------|---------------|---|---|--------------------|--|--|--------------------------------------|---|
| 1. Name and Address of Reporting Person* WRIGHT MICHAEL W | | | | | 2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC | | | | | | | | | (Ch | 5. Relationship of Reporting F (Check all applicable) | | | | | |
| | | | | HC | HON] | | | | | | | | | | X Direc | | | 10% O\ | | |
| (Last) | (F | rst) | (Middle) | | | | | | | | | | | | _ | Office | er (give title /) | | Other (s below) | specity |
| 101 COLUMBIA ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/28/2008 | | | | | | | | | | | - | | , | |
| (Street) | | | | | 4. 1 | f Ame | ndment, | Date | of O | Driginal Fi | led (| Month/Da | ay/Yeaı | r) | 6. li Line | | Joint/Grou | p Filin | g (Check Ap | plicable |
| | STOWN N | J | 07960 | | | | | | | | | | | | | X Form | filed by On | ie Rep | orting Perso | n |
| (City) | (0 | tate) (| (Zip) | | | | | | | | | | | | | Form Perse | | ore tha | n One Repo | rting |
| (City) | (3 | | (Zih) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non- | -Deriv | ative | e Se | curitie | s Ac | cqu | ired, D | isp | osed c | of, or | Ben | eficial | ly Owne | d | | | |
| Date | | | | | | action 2A. Deel Execution Day/Year) (Month/ | | | ₽, | Transaction Dispos Code (Instr. 5) | | 4. Securi Disposed 5) | | | | Benefi | ies cially Following | Form (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | | Code V | ′ | Amount | (/ | A) or D) | Price | Transa | ed ction(s) 8 and 4) | | | (Instr. 4) |
| | | Т | able II - D (e | | | | | | | ed, Dis | | | , | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any Code (| | | saction e (Instr. 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 Amou Secur Under Deriva (Instr. | nt of ities lying ative S | ecurity 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | e s dly g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Dat Exe | te ercisable | Ex Dat | piration te | Title | | lumber | | | | | |

Explanation of Responses:

\$60.59

Non-

Qualified

Options

1. Represents exempt grant of non-qualified stock options under the 2006 Stock Plan for Non-Employee Directors and vest in four equal annual installments, with the first installment vesting on 4/1/2009.

5,000

(1)

| Jacqueline Whorms for | 04/29/2008 |
|----------------------------------|------------|
| Michael W. Wright | 04/29/2000 |
| ** Signature of Reporting Person | Date |

5,000

(1)

5,000

D

Common Stock

04/27/2018

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).

04/28/2008

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.