FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ington, D.C. 20549	OMB APPROVAL
	li e e e e e e e e e e e e e e e e e e e

OMB Number:	3235-0287						
Estimated average bur	den						
houre per reenonce:	0.5						

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* DAVIS D SCOTT					2. Issuer Name and Ticker or Trading Symbol HONEYWELL INTERNATIONAL INC HON								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
													V Director	or 10% Ov		vner			
(Last)	(F	irst)	(Middle)		_	non j									Officer (give title below)		Other (s	specify	
115 TABOR ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/10/2015													
														C. Individual on Initiation on Filtre (Obselv A. 15. 11.					
(Street) MORRIS						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)					
PLAINS NJ 07950														Form filed by One Reporting Person					
														Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
		Tal	ole I - N	on-Der	ivativ	e Se	curi	ties A	cquired	l, D	isposed o	f, or Be	neficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						r) Ex	A. Deemed execution Date, any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Disposed Of		nd 5) Securities Beneficially Owned Followin		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 11/10/20				/2015	015		M		5,000	A	\$43.47	16	,679		D				
Common Stock 11/10/20				/2015	015			S		3,855	D	\$102.07	7(1) 12,824			D			
			Table II								posed of, convertib			Owned					
1. Title of	2.	3. Transaction	3A. Deen		4.		_		6. Date Ex			7. Title ar		8. Price of	9. Number	r of	10.	11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Executio if any (Month/D	,	Date, Transa Code (of I		Expiration (Month/Da	n Dat	e	Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)		Derivative Security (Instr. 5)	derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	s Ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Stock Option (right to	\$43.47	11/10/2015			M			5,000	(2)		04/23/2016 ⁽³⁾	Common Stock	5,000	\$0	0		D		

Explanation of Responses:

- 1. The price reported in this column is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$102.07 to \$102.09, inclusive. The Reporting Person undertakes to provide to Honeywell International Inc., any security holder of Honeywell International Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 2. The Employee Stock Options were granted under the Company's 2006 Stock Plan for Non-Employee Directors, with 2,000 vesting on 4/1/07 and 1,500 vesting each on 4/1/08 and 4/1/09.
- 3. These stock options, if not exercised would have expired in approximately six months.

Jacqueline Katzel for D. Scott

11/12/2015

<u>Davis</u>

** Signature of Reporting Person

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.