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HONEYWELL INTERNATIONAL INC Form 4 November 03, 2014

FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
Washington, D.C. 20549										3235-0287 January 31,		
Check th if no lon subject t	ger STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF										
Subject to Section Form 4 of	16.			SECUR	RITIES		Estimated burden hou response	urs per				
Form 5 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 See Instruction 30(h) of the Investment Company Act of 1940 1(b).												
(Print or Type	Responses)											
1. Name and A Mikkilineni	er Name and	l Ticker or	[.] Tradiı	ng	5. Relationship of Reporting Person(s) to Issuer							
HONE INC [I				YWELL I ION]	INTERN	ATIC	ONAL	(Check all applicable)				
				of Earliest Tr Day/Year) 2014	ransaction			Director 10% Owner X Officer (give title Other (specify below) below) SrVP, Engineering, Ops & IT				
				endment, Da nth/Day/Year	-	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
MORRISTOWN, NJ 07960 — Form filed by More than One Reporting Person												
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	Date, if	3. Transaction Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5 (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

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

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 control number.

 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	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (or Dispose (D) (Instr. 3, 4 and 5)	ed of				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Supplemental Savings Plan Interests	(1)	10/31/2014		A <u>(2)</u>		10.143		(2)	(2)	Common Stock	10.143

Reporting Owners

Reporting Owner Name / Address	Relationships							
r o o o o o o o o o o o o o o o o o o o	Director	10% Owner	Officer	Other				
Mikkilineni Krishna			SrVP,					
101 COLUMBIA ROAD			Engineering,					
MORRISTOWN, NJ 07960			Ops & IT					
Signatures								

Jacqueline Katzel FOR Krishna P. Mikkilineni

11/03/2014

Date

**Signature of Reporting Person

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) Reflects phantom shares of common stock represented by Company contributions to my account under the Executive Supplemental Savings Plan under Rule 16b-3 on 10/31/2014.

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.