**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Honeywell International Political Action Committee 101 Constitution Ave. NW ADDRESS (number and street) Suite 500 West (Check if address is changed) Washington 20001 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address HIPAC@honeywell.com is changed) Optional Second E-Mail Address fecinfo@pass1.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00096156 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mitchell, Whitney, , Mitchell, Whitney, , , 11 07 2025 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF COMMITTEE:			
Candidate Committee:			
(a) This committee is a principal campaign committee. (Complete the candidate information below.)			
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate		
Name of Candidate			
Candidate Office Party Affiliation Sought: House Senate President	State		
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District		
Name of Candidate			
Party Committee:			
(d) This committee is a (National, State or subordinate) committee of the Republican, e	etc.) Party		
Political Action Committee (PAC):			
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:		
X Corporation Corporation w/o Capital Stock Labor Org	ganization		
Membership Organization Trade Association Cooperation	ve		
X In addition, this committee is a Lobbyist/Registrant PAC.			
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
In addition, this committee is a Lobbyist/Registrant PAC.			
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
(g) This committee is an independent expenditure-only political committee (Super PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.			
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	<b>&gt;</b> ).		
In addition, this committee is a Lobbyist/Registrant PAC.			
Joint Fundraising Representative:			
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political		
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
Committees Participating in Joint Fundraiser			
1. C			

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V	Write or Type Committee Name Honevwell Intern	ational Political Action Committee	
6.	•	rganization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
	Honeywell Internation		
	Mailing Address	101 Constitution Ave. NW	
		Suite 500 West	
		Washington DC	20001
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising Repre	esentative Leadership PAC Spons
<ol> <li>Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of books and records.</li> </ol>			
	Mitchell, W	nitney, , ,	
	Full Name		
	Mailing Address	101 Constitution Ave NW	
		Suite 500 West	
		Washington	20001
		CITY ▲ STATE	ZIP CODE ▲
	Title or Position ▼  Custodian of Records		202   271   3872
		Telephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the commissistant treasurer).	mittee; and the name and address of
	Full Name Mitchell, Word Treasurer	nitney, , ,	
	Mailing Address	101 Constitution Ave NW	
		Suite 500 West	
		Washington	C 20001 -   -     -
	Title or Position ▼	CITY ▲ STATE	ZIP CODE ▲
	Treasurer	Telephone number	202  -  271  -  3872

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Full Name of Designated Agent	Avila, Armando, , ,				
Mailing Address	101 Constitution Ave NW				
	Suite 500 West				
	Washington	DC	20001		
	CITY ▲	STATE ▲	ZIP CODE ▲		
Title or Position  Assistant Treasu		number 20	2 - 384 - 6034		
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the commes or maintains funds.	nittee deposits fu	inds, holds accounts, rents		
Name of Bank, D	epository, etc.				
Chain Bridge Bank					
Mailing Address	1445-A Laughlin Avenue				
	McLean	L ∨A	22101		
	CITY ▲	STATE ▲	ZIP CODE ▲		
Name of Bank, D	epository, etc.				
	<u> </u>				
Mailing Address					
	CITY A	STATE ▲	ZIP CODE ▲		

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DCF H Z G7 < 98 I @ 'CF' + H9 A = N5 H = CB

Form/Schedule: F1A Transaction ID:

This is being amended to remove an affiliate organization.

Form/Schedule: Transaction ID: