SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL

OMB Number:	3235-0287
Estimated average bu	urden
hours per response:	0.5

1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) Villeneuve Nadia CARRIER GLOBAL Corp [CARR] 5. Relationship of Reporting Person(s) (Last) (First) (Middle) 13995 PASTEUR BOULEVARD 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person(s) (Street) PALM BEACH 6. Individual or Joint/Group Filing (Che Line) Y 11 Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Che Line) X Form filed by One Reporting Form filed by More than One	Check this box if r Section 16. Form obligations may co Instruction 1(b).	4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 193 or Section 30(h) of the Investment Company Act of 1940		OMB Numbe Estimated av hours per res	verage burden
PALM BEACH GARDENS FL 33418 State St	Villeneuve Na (Last)	adia (First)	(Middle)	2. Issuer Name and Ticker or Trading Symbol <u>CARRIER GLOBAL Corp</u> [CARR] 3. Date of Earliest Transaction (Month/Day/Year)	(Check all applica Director X Officer (below)	ble) give title	10% Owner Other (specify below)
(City) (State) (Zip)	PALM BEACH GARDENS			4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form file	ed by One Repo	orting Person

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	a
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	

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

	(c.g., puts, cars, warrants, options, convertible securities)														
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)				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				
Stock Appreciation Right	\$47.51	02/02/2022		Α		63,535		02/02/2025	02/01/2032	Common Stock	63,535	\$0.0000	63,535 ⁽¹⁾	D	

Explanation of Responses:

1. The reporting person was also awarded 14,385 Performance Share Units (PSUs) under the Carrier Global Corporation 2020 Long-Term Incentive Plan. Each PSU represents a contingent right to receive one share of Carrier Global Corporation common stock. The PSUs vest on the third anniversary of the grant date contingent upon (a) the reporting person's continued employment and (b) Carrier's achievement of pre-established performance targets for earnings per share growth and total shareowner return relative to a subset of industrial companies in the S&P 500 index over a three-year time period.

/s/ William Langston as	
Attorney-in-Fact	

02/04/2022

** Signature of Reporting Person Date

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.