FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

111 L 3 <i>F</i>	AIND E/	CHAIN	GE CO	
/ In:	D C 2054	١		

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

	Check this box if no longer subject to
٦	Section 16. Form 4 or Form 5 obligations may continue. See
J	obligations may continue. See
	Instruction 1(b)

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

1. Name and Address of Reporting Person* GREISCH JOHN J				2. Issuer Name and Ticker or Trading Symbol CARRIER GLOBAL Corp [CARR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
GKEIS	CII JUII.	IN J									-		X	Director			10% Ow	ner
(Last) (First) (Middle) 13995 PASTEUR BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 04/19/2021									Officer (give title below)		Other (spe below)		pecify
(Street) PALM B GARDE		L	33418		4. If Amendment, Date of Original Filed (Month/Day/Year)					6.	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(State)	(Zip)															
			Table I - Non	-Deriva	ative \$	Securitie	s Ac	quired, [Disp	osed (of, or B	eneficiall	y O	wned				
Date				Execution 2A. De Execution (Month		n Date	, Transaction Dis Code (Instr.			ecurities Acquired (A) o posed Of (D) (Instr. 3, 4 a		5)	5. Amount of Securities Beneficially Following Reported		Form:	Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code V Amount (A) or (D)			or Price		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)																	
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)	Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and		6. Date Exercisable ar Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underl Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transaci	ve es ally eg	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount of Number of Shares			(Instr. 4)			
Director DSU	(1)	04/19/2021		A		7,522.2248		(1)		(1)	Common Stock	7,522.22	48	\$43.87	25,513.	7651	D	

Explanation of Responses:

1. The reporting person acquired these stock units under the Carrier Global Corporation Board of Directors Deferred Stock Unit Plan (the Plan) in connection with the reporting person's annual compensation for service as a non-employee director. The Plan provides for payment of a portion or all of the annual compensation in Deferred Stock Units (DSUs). Upon resignation, removal, or retirement from the Board, the DSUs in the director's account under the Plan, including accrued dividend equivalents, are converted into an equal number of shares of Carrier common stock that, at the director's previous election, are distributed either in a lump-sum or in installments.

> /s/ William Langston as Attorney-in-Fact

04/20/2021

** Signature of Reporting Person

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.