## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  Amato Elizabeth B  (Last) (First) (Middle)  10 FARM SPRINGS ROAD					3. D	Issuer Name and Ticker or Trading Symbol     UNITED TECHNOLOGIES CORP /DE/     UTX ]  3. Date of Earliest Transaction (Month/Day/Year)     11/07/2017									EVP & Chief HR Officer			6 Owner er (specify ow) eer			
(Street) FARMINGTON CT 06032  (City) (State) (Zip)						- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X	Forn Forn				
				(Month/Day/Year)			if any (Month/Day/Year)			(Instr.	Amount	(	A) or D)	r Price		Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		(D) or Indire (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
Common Stock 11/07/					/2017	017			G	V	125		D	\$0.	0000	21,368.6919		D			
Common Stock																	14,322		I	By Savings Plan Trustee	
		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  (Instr. 3)  2. Transaction Date (Month/Day/Year) (Month/Day/Year)  2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)  3. Transaction (Date (Instr. 4) (Month/Day/Year) (Mont																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security	on Date e (Month		Execution if any	n Date,	Transa Code (		of Deriv Secu Acqu (A) o Disp of (D (Inst	vative irities ired r osed )	Expirati	on Da	te	Amount of Securities Underlying Derivative Security (Instr.		J	Deri Seci (Inst	vative urity	derivative Securities Beneficially Owned Following Reported Transaction	Ownersi Form: Direct (D or Indire (I) (Instr.	ip of Indirect Beneficial Ownership ct (Instr. 4)	
						Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nu of	nount Imber Iares						

**Explanation of Responses:** 

/s/ Ariel R. David as Attorneyin-Fact

11/17/2017

\*\* 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.