FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES IN | N BENEFICIAL | OWNERSHIP |
|------------------|---------------|--------------|------------------|

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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* FINGER STEPHEN N | | | | UI | 2. Issuer Name and Ticker or Trading Symbol <u>UNITED TECHNOLOGIES CORP /DE/</u> UTX] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | ner | |
|---|-----------|---|----------------|------------|--|--------|---|--|--|---------|---|---|---|---|---|---|--|---|
| (Last) (First) (Middle) UNITED TECHNOLOGIES CORPORATION ONE FINANCIAL PLAZA | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/29/2003 | | | | | | | | X Oliter (give title Other (specify below) President, Sikorsky Aircraft | | | | | |
| (Street) HARTFO | ORD C | Γ | 06101 (Zip) | | 4. 11 | f Amen | ıdmer | nt, Date o | of Origin | al File | ed (Month/D | ay/Year) | 6. Lir | X Form | filed by One | e Reporting Fee than One | Person | |
| (Oity) | | | | on-Deriv | vative | Sec | uriti | ies Ac | auired | l. Di | sposed o | of. or Be | neficia | Ily Owne | 1 | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | ction | 2A. Exe | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a | | l (A) or | 5. Amor Securiti Benefic Owned | int of es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | t o | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reporte Transac (Instr. 3 | tion(s) | | (1 | nstr. 4) | |
| Common Stock | | | 08/29/ | 2003 | | | | M | | 5,000 | A | \$16.65 | 63 5,116 | | D | | | |
| Common Stock | | 08/29/2003 | | | | | F | | 1,246 | D | \$80.2 | 5 3,870 | | D | | | | |
| Common Stock 09 | | 09/03/ | /2003 | | | | S | | 3,754 | D | \$79.7 | 75 1 | 5 116 ⁽¹⁾ | | | | | |
| Common Stock | | | | | | | | | | | | 5,224.464 | | I | S | By Savings Plan Trustee | | |
| | | Т | able II | | | | | | | | posed of converti | • | | y Owned | | | | • |
| Derivative Conversion Date Ex Security or Exercise (Month/Day/Year) if a | | 3A. Deer Execution if any (Month/I | | | | | vative urities uired or oosed o) tr. 3, 4 | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | te | nd 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Owne Form: Direct or Ind (I) (Ins | (D) irect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | 1 | | | | |
| Non- Qualified Stock Option (right to | \$16.6563 | 08/29/2003 | | | M | | | 5,000 | 02/01/19 | 997 | 01/31/2004 | Common Stock | 5,000 | \$0 | 0.0000 |) г | | |

Explanation of Responses:

1. The reporting person also directly owns 2,800 shares of United Technologies Career Restricted common stock and 10,000 shares of Restricted common stock.

Remarks:

By: /s/ Charles F. Hildebrand as Attorney-in-Fact

09/03/2003

** Signature of Reporting Person

Date

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.