FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Wash

| LO AND EXCHANGE COMMISSION | |
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| ington, D.C. 20549 | |

| OMB APPROVAL | | | | | | | | | | | |
|--------------|--------------------------|----------|--|--|--|--|--|--|--|--|--|
| 1 | OMB Number: | 3235-028 | | | | | | | | | |
| ı | Estimated average burden | | | | | | | | | | |

0.5

hours per response

Check this box if no longer subject to Section 16. Form 4 or Form 5 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* <u>SWYGERT H PATRICK</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol UNITED TECHNOLOGIES CORP /DE/ [UTX] | | | | | | | | | ationship of F c all applicab Director | | Person | (s) to Issuer 10% Owi | | |
|---|---|--|---|--|---|--|------|---|------|--|------------|------------------|----------------------------|---|---|---------------------------------------|--|--|--|
| (Last) (First) (Middle) | | | | -[| 0111 | 1 | | | | | | | | Officer (g below) | ive title | | Other (sp below) | ecify | |
| ONE FINANCIAL PLAZA | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/29/2013 | | | | | | | | | | | | | | |
| (Street) HARTFORD CT 06101 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | 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) | City) (State) (Zip) | | | | | | | | | Form file | а ву моге | tnan C | пе керопіп | g Person | | | | | |
| | | | Table I - Non- | Deriva | ative S | Securitie | s Ac | quired, | Disp | osed (| of, or E | enef | icially C | wned | | | | | |
| 1. Title of Security (Instr. 3) | | | 0 | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (I | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | | 5. Amount Securities Beneficially Following Reported | | 6. Owr Form: (D) or (I) (Ins | Direct II Indirect E tr. 4) C | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (<i>A</i> |) or) | Price | Transaction (Instr. 3 and | | | | 115(1.4) | |
| Common Stock | | | | | | | | | | | | | 1,000 | | | D | | | |
| | | | Table II - D | | | ecurities alls, warı | | | | | | | | vned | | | | | |
| 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) | | Derivative | | 6. Date Exe Expiration (Month/Day | Date | Securities Un | | es Und ve Sec | erlying | 8. Price of Derivative Security (Instr. 5) | 9. Numb derivativ Securitie Benefici Owned Followin Reporte | ve ies ially ng ed | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisabl | | cpiration ate | Title | | ount or nber of ires | | Transaci (Instr. 4) | | | | |
| Phantom Stock Unit | (1) | 04/29/2013 | | A | | 3,165.2478 | | (1) | | (1) | Commo | 3,1 | 65.2478 | \$91.62 | 45,517. | .7858 | D | | |

Explanation of Responses:

1. Consists of Phantom Stock Units acquired by the reporting person as his/her annual award and retainer for services as a non-employee director. Upon termination of service on the Board of Directors, all such Phantom Stock Units settle in shares of UTC Common Stock.

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

** Signature of Reporting Person

05/01/2013

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.