FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## 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

Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol UNITED TECHNOLOGIES CORP /DE/ [								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GORELICK JAMIE S					UTX ]								X Directo	r		10% Ov	ner	
(Last) (First) (Middle)													Officer below)	(give title		Other (s below)	pecify	
UNITED TECHNOLOGIES CORPORATION					3. Date of Earliest Transaction (Month/Day/Year)													
ONE FINANCIAL PLAZA				ا	01/03/2005													
ONE FINANCIAL PLAZA					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					, 3 (								Line)					
HARTFORD CT 06101												X Form filed by One Reporting Person						
												Form filed by More than One Reporting Person				ting		
(City)	(S	tate)	(Zip)															
		Tal	ole I - Non-D	erivati	ve Se	curities	Acc	quired, E	Dis	posed o	f, or Ber	neficial	y Owned					
1. Title of	Security (Inst	tr. 3)	2.	Fransactio	on	2A. Deeme	ed .	3.		4. Securit	ies Acquire	d (A) or	5. Amou	nt of	6. Ow	nership 7	. Nature of	
Date					Day/Year) Execution Date, if any (Month/Day/Year)			Transaction Disposed Of (D) (Instr. 3, 4					Beneficially (D) o		Direct I	Indirect Beneficial Ownership		
(молиль				JilliiDayi								Owned F			nstr. 4)			
							Code	v	Amount	(A) or	Price	Transact	ion(s)		'	Instr. 4)		
											(D)		(Instr. 3	and 4)				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
			(e.ç	j., puts	, call	s, warra	ants,	, options	s, c	onvertib	le secu	rities)						
1. Title of	2.	3. Transaction	3A. Deemed	4.		tion Derivative		6. Date Exercisable and 7. Title and				8. Price of	9. Number of derivative Securities		10. Ownership Form:	Beneficial		
Derivative Security	Conversion or Exercise		Execution Date, if any		action (Instr.			Expiration Date Amount of (Month/Day/Year) Securities									Derivative Security	
(Instr. 3) Price of Derivative Security (Month/Day/Year) 8)			r) 8)		Acquired (A) or Disposed		Underlying Derivative Sec					(Instr. 5)	Beneficially Owned Following Reported			Ownership (Instr. 4)		
					of (D) (In:	of (D) (Instr. 3, 4 and 5)		(Instr. 3 and 4)										
				1	0, 4 and 0,						Ι	-	Transaction(s)					
							H					Amount or		(Instr. 4)				
								Date	- [,	Expiration		Number of						
				Code	V	(A)	(D)	Exercisabl		Date	Title	Shares						
Non-																		
Qualified Stock	\$103	01/03/2005		A		3.700 <sup>(1)</sup>	H	01/03/2008	٠,	01/02/2015	Common	3,700	\$0	3,700		D		
Option (right to	\$103	01/03/2003		l A		3,/00(1)		01/03/2000	ٔ [ ٔ	01/02/2015	Stock	3,700	Φυ	3,700		ע		
buy)																		

## **Explanation of Responses:**

1. Consists of 100% non-qualified United Technologies Corporation stock options acquired at the election of the reporting person in lieu of his/her annual retainer for services as a non-employee director.

By: /s/ Charles F. Hildebrand as 01/05/2005 Attorney-in-Fact

\*\* 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.