Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 06/30/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [X] the final return/report;
- [ ] an amended return/report;
- [X] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
DETECTION LOGIC 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2006

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
DETECTION LOGIC FIRE PROTECTION, INC.

7605 N. SAN FERNANDO ROAD
BURBANK, CA 91505

2b Employer Identification Number (EIN)
95-4535485

2c Sponsor's telephone number
818-683-1500

2d Business code (see instructions)
238900

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	04/13/2011	CRISTIAN FLORES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	04/13/2011	CRISTIAN FLORES
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
DETECTION LOGIC FIRE PROTECTION, INC.

7605 N. SAN FERNANDO ROAD
BURBANK, CA 91505

3b Administrator's EIN
95-4535485

3c Administrator's telephone number
818-683-1500

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	402
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	0
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	0
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	0
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	0
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	0
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2E 2F 2J 2K 3D 2G 2T

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	X	**R** (Retirement Plan Information)
(2)		**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)		**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	X	**H** (Financial Information)
(2)		**I** (Financial Information – Small Plan)
(3)		**A** (Insurance Information)
(4)		**C** (Service Provider Information)
(5)		**D** (DFE/Participating Plan Information)
(6)		**G** (Financial Transaction Schedules)

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 06/30/2010

A Name of plan
DETECTION LOGIC 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
DETECTION LOGIC FIRE PROTECTION, INC.

D Employer Identification Number (EIN)
95-4535485

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	41172	0
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1981661	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	2022833	0
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	2022833	0

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	4394	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		4394
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)	264	
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		264
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-56582
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		-51924
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	218028	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		218028
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	3441	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		3441
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		221469
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-273393
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		1749440

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: ROGERS, CLEM & COMPANY (2) EIN: 95-2694521

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		119
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k	X		
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m	X		
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n	X		

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ... [X] **Yes** [ ] **No** **Amount:** 0

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
UNITED TECHNOLOGIES CORPORATION EMPLOYEES SAVINGS PLAN	06-0570975	001

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 06/30/2010

A Name of plan
DETECTION LOGIC 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
DETECTION LOGIC FIRE PROTECTION, INC.

D Employer Identification Number (EIN)
95-4535485

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 75-3182674

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

Rogers, Clem & Company
accountancy corporation

Donald B. Cullen, CPA
Dale E. Duncan, CPA
George R. Applebaum, CPA
Scott M. Biehl, CPA
Andy R. Jones, CPA

1067 PARK VIEW DRIVE • COVINA, CA 91724-3748 • (626) 858-5100 • FAX (626) 332-7012

Independent Auditors' Report

To the Board of Directors
Detection Logic 401(k) Plan

We were engaged to audit the accompanying statement of net assets available for benefits of Detection Logic 401(k) Plan (the "Plan") as of June 30, 2010 and December 31, 2009, and the related statements of changes in net assets available for the six months ended June 30, 2010 and the supplemental schedule I. These financial statements and schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by MG Trust Company, LLC, the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the custodian is complete and accurate.

As further discussed in Note 5, the Plan was merged into United Technologies Corporation Savings Plan effective May 26, 2010.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included on the financial statements and supplemental schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Rogers, Clem & Company

ROGERS, CLEM & COMPANY

April 1, 2011
Covina, California

DETECTION LOGIC 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JUNE 30, 2010 AND DECEMBER 31, 2009

	June 30, 2010	December 31, 2009
ASSETS:		
Registered investment companies at fair value:		
AIM International Small Company Fund	$ -	$ 80,588
AllianceBerstein International Growth Fund	-	177,490
American Funds Growth Fund of America	-	312,630
BlackRock Large Cap Value Fund	-	182,204
BlackRock Small Cap Growth Equity Portfolio	-	3,637
Calvert Short Duration Income Fund	-	37,046
DWS Dreman Small Cap Value Fund	-	83,955
Fidelity Advisor Freedom 2010 Fund	-	3,809
Fidelity Advisor Freedom 2015 Fund	-	4,624
Fidelity Advisor Freedom 2020 Fund	-	6,043
Fidelity Advisor Freedom 2025 Fund	-	6,303
Fidelity Advisor Freedom 2030 Fund	-	15,144
Fidelity Advisor Freedom 2035 Fund	-	442
Fidelity Advisor Freedom 2040 Fund	-	20,274
Fidelity Advisor Freedom Income Fund	-	1,518
Fidelity Advisor Leveraged Company Stock Fund	-	293,854
Fidelity Advisor Real Estate Fund	-	5,672
Fidelity Advisors New Insight Fund	-	41,259
Gartmore Morely Stable Value Fund	-	177,869
Hartford Capital Appreciation Fund	-	155,090
JPMorgan Equity Index Fund	-	11,595
JPMorgan Small Cap Equity Fund	-	120,704
Pimco Real Return Fund	-	88,428
Allianz NFJ International Value	-	66,720
First Eagle Overseas FD A	-	22,263
Janus Balanced S	-	62,500
Total Investments	-	1,981,661
Participant loans	-	41,172
Employee contribution receivable	-	4,395
NET ASSETS AVAILABLE FOR BENEFITS	$ -	$ 2,027,228

See Independent Auditors' Report and accompanying notes which are an integral part of these financial statements

DETECTION LOGIC 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
SIX MONTHS ENDED JUNE 30, 2010

ADDITIONS:	
Interest	$ 264
Total additions	264
DEDUCTIONS:	
Net depreciation in fair value of investments	56,582
Benefits paid to participants	218,028
Trustee and administrative fees	3,442
Total deductions	278,052
DECREASE IN ASSETS AVAILABLE FOR BENEFITS	(277,788)
Transfer of assets from plan	(1,749,440)
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	2,027,228
End of year	$ -

See Independent Auditors' Report and accompanying notes which are an integral part of these financial statements

DETECTION LOGIC 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2010 AND DECEMBER 31, 2009

1. DESCRIPTION OF THE PLAN:

The following description of the Detection Logic 401(k) Plan (the "Plan") provides general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

GENERAL

The Plan is a defined contribution covering all employees of Detection Logic Fire Protection, Inc. (The Company). The Plan was initiated on January 1, 2006. All full-time employees who have completed three consecutive months are eligible. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). On December 18, 2009, the Plan was amended to comply with current tax law changes.

On May 13, 2010 Detection Logic Fire Protection, Inc. announced the termination of the Plan and the intention to transfer existing account balances into successor plans effective May 26, 2010. Participants became eligible to participate in the United Technologies Corporation Savings Plan effective January 1, 2010.

TAX STATUS

The Prototype plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Code (the "Code"). Subsequent to the issuance of the determination letter, the Plan was amended. The plan administrator believes that the Plan is designed and currently being operated in compliance with the applicable requirements of the Code, and therefore, the Plan is qualified and the related trust was tax exempt as of the financial statement date.

CONTRIBUTIONS

Participants may elect, by submitting a written request to the plan administrator, to have their wage compensation reduced by a designated dollar amount or percentage up to the maximum percentage allowable under the limitations of IRC Sections 415, 401(k) and 404. This deferred amount flows directly to the Plan. Participants' contributions may not be more than one hundred percent of their annual compensation. Employer matching contributions and profit sharing are discretionary. Employer's contributions for 2010 and 2009 totaled $0 and $0. Participants may change their rate of contribution monthly and their investment election daily.

1. DESCRIPTION OF THE PLAN: (Continued)

FORFEITURES

Amount forfeited by terminating participants of the Plan are used to offset administrative expenses first and then to offset employer contributions. There were no forfeitures for the six months ended June 30, 2010 and $299 for the year ended December 31, 2009.

PARTICIPANT ACCOUNTS

Each participant's account is credited with the participant's contribution, and allocations of the Company's contributions and Plan earnings. Allocations are based on each participant's earnings or individual investment balance as defined.

The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

VESTING

Participants of the Plan are immediately fully vested in their contributions plus actual earnings thereon. Vesting in the Company's matching and discretionary contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after one year of credited service.

PAYMENT OF BENEFITS

Benefits are recorded when paid. Amounts credited to an individual participant's account are distributed at termination of employment as a lump sum. Distributions may be deferred until the participant reaches the age of 70½ if the value of the distribution is not less than $1,000. However, the Plan agreement stipulates that distributions must commence no later than April 1 of the year following the year in which the participant reaches the age of 70½ or no later than April 1 of the year following the year the participant retires.

In certain hardship situations, as described in the Plan agreement, participants may withdraw part of their account balances while actively employed, but such withdrawals are limited to the amount dictated by the hardship. Furthermore, participants' withdrawals are limited to their vested account balances, and may not make any 401(k) for the six month period following the date of your hardship distribution.

1. DESCRIPTION OF THE PLAN: (Continued)

PARTICIPANT LOANS

Participants may borrow a minimum of $1,000 up to 50% of the vested account balance with a maximum of $50,000. Loan terms shall not exceed five years except when used to purchase a primary residence. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the plan administrator.

2. SUMMARY OF ACCOUNTING POLICIES:

The financial statements of the Plan have been prepared in conformity with accounting principles generally accepted n the United States of America as applied to 401(k) and profit sharing Plans. A summary of the Plan's significant accounting policies consistently applied in the preparation of the accompanying financial statements follows:

INVESTMENT VALUATION AND INCOME RECOGNITION

The Plan's funds are stated at fair value. Except for the outstanding loans to participants, fair value of the funds is determined based on the underlying investments of the related funds as reported by MG Trust Company, LLC based on quoted market prices. Such investments are credited with earnings of the underlying investments and charged for Plan withdrawals and administrative expenses incurred. Outstanding loans are valued at cost, which approximates fair value.

Purchases and sales of these investments are reflected on the trade dates. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

EXPENSES

Certain custodian and administrative expenses are paid by the Plan. Other expenses are paid by the Plan's sponsor. Management fees are operating expenses charged to the Plan for investments in the mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of net appreciation (depreciation) in fair market value of investments for such investments.

2. SUMMARY OF ACCOUNTING POLICIES: (Continued)

PAYMENT OF BENEFITS

Benefits are recorded when paid.

SUBSEQUENT EVENTS

The Plan did not have any other subsequent events through March 1, 2011, which is the date the financial statements were available to be issued, requiring recording or disclosure in the financial statements for the period ended June 30, 2010.

RECENT ACCOUNTING PRONOUNCEMENTS

In June 2009, the Financial Accounting Standards Board ("FASB") issued the FASB Accounting Standards Codification and the Hierarchy of Generally Accepted Accounting Principles, which establishes the FASB Accounting Standards (the "ASC") as the source of authoritative principles recognized by the FASB to be applied by nongovernmental entities in the preparation of the financial statements in conformity with generally accepted accounting principles ("GAAP"). This standard is effective for financial statements issued for interim and annual periods ending after September 15, 2009. The adoption of this standard did not have a material impact on the Plan's financial statements.

USE OF ESTIMATES

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

3. INVESTMENTS:

All investments are held with MG Trust Company, LLC and are pooled in large funds. All investments that represent 5% or more of the fair market value of net Plan assets available for benefits are separately identified.

3. INVESTMENTS: (Continued)

	June 30, 2010	December 31, 2009
Interest in registered investment companies:		
AllianceBernstein International Growth Fund	$ *	$ 177,490
American Funds Growth Fund of America	*	312,630
BlackRock Large Cap Value Fund	*	182,204
Fidelity Advisor Leveraged Company Stock Fund	*	293,854
Gartmore Morely Stable Value Fund	*	177,869
Hartford Capital Appreciation Fund	*	155,090
JPMorgan Small Cap Equity Fund	*	120,704

*Less than 5% of net plan assets.

4. RELATED-PARTY TRANSACTIONS:

During the period ended June 30, 2010 and year ended December 31, 2009, there were no related-party transactions, which are prohibited by ERISA and for which there are no statutory or administrative exemptions.

The Plan investments at year end include shares of mutual funds managed by MG Trust Company, LLC. MG Trust Company, LLC is the custodian as defined by the Plan and, therefore these transactions qualify as party-in interest.

5. PLAN TERMINATION:

On January 1, 2010, the Board of Trustees of United Technology Corporation, as permitted by the Plan document made the decision to merge the Detection Logic 401(k) Plan with the United Technology Corporation 401(k) Savings Plan effective May 26, 2010.

6. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE:

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by the trustee.

6. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE: (Continued)

	June 30, 2010	December 31, 2009
Investments, at fair value:		
Separate accounts	$ -	$ 1,968,436*
Cash	-	12,242*

*Asset reclassified for financial statement purposes.

7. FAIR VALUE MEASUREMENTS:

ASC 820, *Fair Value Measurements and Disclosures,* establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820-10 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

7. FAIR VALUE MEASUREMENTS: (Continued)

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarch is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30 2010 and December 31, 2009.

Common stocks, corporate bonds and U.S. government securities - Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual funds - Valued at the net assets value ("NAV") of shares held by the plan at year end.

Guaranteed investment contract - Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit worthiness of the issuer.

Participant Loans - Values at amortized cost, which approximates fair value.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30, 2010 and December 31, 2009.

7. FAIR VALUE MEASUREMENTS: (Continued)

	Assets at Fair Value as of June 30, 2010			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ -	-	$ -	$ -
Interest in Stable Value Fund	-	-	-	-
Participant Loans	-	-	-	-
Employee Contributions Receivable	-	-	-	-
Total assets at fair value	$ -	-	$ -	$ -

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 1,803,792	-	$ -	$ 1,803,792
Interest in Stable Value Fund	-	-	177,869	177,869
Participant Loans	-	-	41,172	41,172
Employee Contributions Receivable	-	-	4,395	4,395
Total assets at fair value	$ 1,803,792	-	$ 223,436	$ 2,027,228

7. FAIR VALUE MEASUREMENTS: (Continued)

Level 3 Assets	Six Months Ended June 30, 2010		
	Interest in Stable Value Fund	Participant Loans	Employee Contributions Receivable
Balance, beginning of year	$ 177,869	$ 41,172	$ 4,274
Realized gains/(losses)	-	-	-
Unrealized gains/(losses) relating to instruments still held at the reporting date	-	-	-
Purchases, sales, issuances and settlements (net)	(19,003)	(4,686)	(4,274)
Transfers from this plan	(158,866)	(36,486)	-
Balance, end of year	$ -	$ -	$ -

8. RECONCILATION OF FINANCIAL STATEMENTS TO FORM 5500:

The following is a reconciliation of net assets available per financial statements to net assets reported on Form 5500:

	June 30, 2009	December 31, 2009
Net assets available for benefits as reported on 5500	$ -	$ 2,022,833
Employee contributions receivable	-	4,395
Net assets available for benefits	$ -	$ 2,027,228
Decrease in net assets available for benefits	2,027,228	
Less 2009 employee contribution receivable	(4,395)	
Decrease in net assets available for benefits as reported on 5500	$2,022,833	

SUPPLEMENTAL INFORMATION

SCHEDULE I

DETECTION LOGIC 401(K) PLAN
FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EIN 95-45354 85 PLAN #001
JUNE 30, 2010 AND DECEMBER 31, 2009

(a) Party In Interest	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment	(e) Current Value
		NONE	

See Independent Auditors' Report

Schedule H Line 4a

Schedule of Delinquent Participant Contributions

Plan Name: Detection Logic 401(k) Plan

Employer Identification Number (EIN): 95-4535485

Plan Number (PN): 001

Plan Year End: June 30, 2010

Plan Year End	Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
	Check here if Late Participant Loan Repayments are included: ☐	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
12/31/2009	119	0	119	0	0
12/31/2008	0		0		
12/31/2007	0	0	0	0	0
Total	119	0	119	0	0

Note: Lost Earnings were deposited on: April 13, 2010

Schedule H, line 4i
Schedule of Assets (Held At End of Year)

For the plan year beginning **01/01/2010** and ending **06/30/2010**

Name of plan
Detection Logic 401(k) Plan

Employer Identification Number
95-4535485

Three-digit plan number ► **001**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Federated Funds	Automated Cash Management - AC		0
	Calvert Funds	Calvert Short Duration Inc A -		0
	PIMCO Funds	PIMCO Real Return Fund A - PRT		0
	Janus Funds	Janus Adviser Balanced S - JAB		0
	Hartford Funds	Hartford Cap Apprec Fund - ITH		0
	JP Morgan Funds	JP Morgan Equity Index A - OGE		0
	Blackrock Funds	Blackrock Large Cap Value A -		0
	American Funds	American Funds GFA R4 - RGAEX		0
	Fidelity Funds	Fidel Adv New Insights A - FNI		0
	Fidelity Funds	Fid Adv Lev Co Stk A - FLSAX		0
	JP Morgan Funds	JP Morgan Small Cap Equity - V		0
	DWS Funds	DWS Dremin Small Cap Value A -		0
	Blackrock Funds	Blackrock Small Cap Equity Inv		0
	Allianz Funds	Allianz NFJ International Valu		0
	Alliancebern Funds	All Bern International Growth		0
	First Eagle Funds	First Eagle Overseas A - SGOVX		0
	AIM Funds	AIM Intl Small Co - IEGAX		0
	Fidelity Funds	Fidilty Adv Real Estate A - FH		0
	Fidelity Funds	Fidilty Adv Freedom 2010 - FAC		0
	Fidelity Funds	Fidilty Adv Freedom 2015 A - F		0
	Fidelity Funds	Fidilty Adv Freedom 2020 - FDA		0
	Fidelity Funds	Fidilty Adv Freedom 2025 A - F		0
	Fidelity Funds	Fidilty Adv Freedom 2030 - FAF		0
	Fidelity Funds	Fidilty Adv Freedom 2035 A - F		0
	Fidelity Funds	Fidilty Adv Freedom 2040 A - F		0
	Fidelity Funds	Fidilty Adv Freedom 2045 A - F		0
*	Fidelity Funds	Fidilty Adv Freedom 2050 A - F		0
	Fidelity Funds	Fidilty Advis Freedom Income A		0
	Participant Loans	5.25% - 7.00%		0