## Edgar Filing: TEXTRON INC - Form 4

TEXTRON IN Form 4													
November 02, FORM Check this	<b>4</b> UNITED S	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									PPROVAL 3235-0287 January 31,		
if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	Filed purs ue. Section 17(a										Expires: 2005 Estimated average burden hours per response 0.5		
1. Name and Address of Reporting Person <u>*</u> Zuber Maria T			2. Issuer Name <b>and</b> Ticker or Trading Symbol TEXTRON INC [TXT]					g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) MASSACHUSETTS INSTITUTE OF TECHNOLOGY, 77 MASSACHUSETTS AVENUE 3-234			3. Date of Earliest Transaction (Month/Day/Year) 11/01/2016						Officer (give title Other (specify below)				
	Filed(Month/I				lment, Date Original /Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
CAMBRIDG		<b>Z</b> in)							Person				
(City)		Zip)			1-De			ties Ac	quired, Disposed of		-		
	2. Transaction Date (Month/Day/Year)	Executio any		Code (Instr.	8)	4. Securi nAcquired Disposed (Instr. 3,	(A) of of (D 4 and (A) or	9) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common	11/01/2016			Code A	V	Amount 2,000	(D) A	Price \$ 0		D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
FB	Director	10% Owner	Officer	Other			
Zuber Maria T MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVENUE 3-234 CAMBRIDGE, MA 02139	Y X						
Signatures							
/s/ Ann T. Willaman, Attorney-in-Fact	6						
**Signature of Reporting Person Date							

## **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.