

# TEXTRON INC Reported by

**ARNELLE JESSE** 

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 04/04/05 for the Period Ending 03/31/05

Address 40 WESTMINSTER ST

PROVIDENCE, RI 02903

Telephone 4014212800

CIK 0000217346

Symbol TXT

SIC Code 6162 - Mortgage Bankers and Loan Correspondents

Fiscal Year 01/02



## **TEXTRON INC**

#### FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 4/4/2005 For Period Ending 3/31/2005

Address 40 WESTMINSTER ST

PROVIDENCE, Rhode Island 02903

Telephone 401-421-2800
CIK 0000217346
Industry Conglomerates
Sector Conglomerates

Fiscal Year 12/31





[ ] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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#### 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(f) of the Investment Company Act of 1940

Deferred Stock Units	\$0 <sup>(1)</sup>	3/31/2005		A		73.399			(2)	(2)	Common	73.399	\$76.94	16208.652	D		
<b>Deferred Stock Units</b>	\$0 <sup>(1)</sup>	3/31/2005		A		201.694			(2)	(2)	Common	201.694	\$74.37	16135.253	D		
				Code	V	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Date, if	Trans. Code S (Instr. A)		. Number of Derivative securities acquired (A) or Disposed of (D) Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	derivative Securities	Ownership Form of Derivative	Beneficial		
Tab	le II - Dei	rivative	Securitio	es Be	nef	icially Ov	vne	d ( e.	g. , p	outs, call	s, warra	nts, options,	convert	ible secur	ities)		
·			Date	Execution Date, if any			de str. 8)	Ac Dis (In	quired (A) of sposed of (D str. 3, 4 and (A) or nount (D)	Follo (Instr	wing Reported T. 3 and 4)	ransaction(s)			Beneficial Ownership		
1.Title of Security		Table l	[ - Non-I	Deriv		ve Securit	_	Acqı		l, Dispos		Beneficially			6.	7. Nature	
SAN FRANCISCO, CA 94127 (City) (State) (Zip)													X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Street)													6. Individual or Joint/Group Filing (Check Applicable Line)				
400 URBANC		£						3/31									
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)								Officer (give title below) Other (specify				
ARNELLE JI	ESSE					KTRON						<b>X</b> Direc	otor		1004 (	Dumor	
1. Name and Address of Reporting Person *				2.	2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				

#### **Explanation of Responses:**

- (1) Converts to Common Stock on a 1-for-1 basis.
- (2) Payable upon the conclusion of Reporting Person's service on the Textron Inc. Board of Directors.

**Reporting Owners** 

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ARNELLE JESSE							
400 URBANO DRIVE	X						
SAN FRANCISCO, CA 94127							

Signatures

Ann T. Willaman, Attorney-in-Fact

4/4/2005

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 control number.

#### **End of Filing**



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