FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO              | VAL       |  |  |  |  |  |
|------------------------|-----------|--|--|--|--|--|
| OMB Number:            | 3235-0287 |  |  |  |  |  |
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| hours per response:    | 0.5       |  |  |  |  |  |

|        | Check this box if no longer subject to |  |  |  |  |  |  |  |  |  |
|--------|--|--|--|--|--|--|--|--|--|--|
| $\neg$ | Section 16. Form 4 or Form 5           |  |  |  |  |  |  |  |  |  |
| _      | obligations may continue. See          |  |  |  |  |  |  |  |  |  |
|        | Instruction 1(b)                       |  |  |  |  |  |  |  |  |  |

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* SPIVEY WILLIAM       |  |      |             |                                   |        | 2. Issuer Name and Ticker or Trading Symbol RAYTHEON CO/ [ RTN ] |   |            |         |   |                     |  |  |        | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  |  |  |                       |   |  |
|---|--|------|-------------|-----------------------------------|--------|--|---|------------|---------|---|---------------------|--|--|--------|--|--|--|-----------------------|---|--|
|   |  |      |             |                                   |        |  |   |            |         |   |                     |  |  |        | X Di   | rector   |  | 10% C                 | wner  |  |
| (Last) (First) (Middle) 870 WINTER STREET                     |  |      |             |                                   |        | 3. Date of Earliest Transaction (Month/Day/Year) 05/28/2015      |   |            |         |   |                     |  |  |        |  | ficer (give title<br>low)                                    |  | Other (specify below) |   |  |
|   |  |      |             |                                   |        | 4. If Amendment, Date of Original Filed (Month/Day/Year)         |   |            |         |   |                     |  |  |        | 6. Individual or Joint/Group Filing (Check Applicable Line)              |  |  |                       |   |  |
| (Street) WALTHAM MA 02451                                     |  |      |             |                                   |        |  |   |            |         |   |                     |  |  |        | Form filed by One Reporting Person Form filed by More than One Reporting |  |  |                       |   |  |
| (City) (State) (Zip)  |  |      |             |                                   |        |  |   |            |         |   |                     |  |  |        |  | Person   |  |                       |   |  |
|   |  | Tabl | e I - Nor   | n-Deriv                           | ative  | Se   | curitie   | s Ac       | quired, | Dis   | posed o             | f, or                                    | Bene                                       | eficia | ally Ow  | ned  |  |                       |   |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |      |             |                                   |        | ar) l  | 2A. Deemed<br>Execution Date,<br>f any<br>Month/Day/Year) |            | Code    | Transaction Disposed Code (Instr. 5)  |                     | ties Acquired (A)<br>d Of (D) (Instr. 3, |  |        | nd Sec<br>Ber<br>Ow  | mount of<br>urities<br>leficially<br>ned Following<br>lorted | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  |                       | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |  |      |             |                                   |        |  |   |            | Code    | v   | Amount              | ()                                       | A) or<br>D)                                | Price  | Tra  | nsaction(s)<br>tr. 3 and 4)                                  |  |                       | (   |  |
| Common Stock 05/28/   |  |      |             |                                   | 3/2015 | 2015   |   |            | A       |   | 1,340               | (1)                                      | ) A \$                                     |        | 20,015   |  | D  |                       |   |  |
|   |  | Та   | ıble II - I |                                   |        |  |   |            |         |   | sed of,<br>onvertib |  |  |        | / Owne   | ed   |  |                       |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. A. Deemed Execution Date, if any (Month/Day/Year) |      |             | Transaction ODde (Instr. S) SA (( |        | osed<br>)<br>r. 3, 4   | 6. Date E<br>Expiration<br>(Month/D                       | Expiration |         | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Number of Title Shares |                     | ount<br>nber                             | 8. Price of Derivative Security (Instr. 5) |        | Owner<br>Form<br>Direct<br>or Ind<br>(I) (In                             | t (D)<br>lirect  | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                       |   |  |

## Explanation of Responses:

1. Shares of restricted stock that vest on the date of the Issuer's 2016 annual meeting of stockholders.

## Remarks:

Dana Ng, Attorney-in-fact

06/01/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.