Form 4

1. Name and Address of Reporting Person *

Lupone E Robert

(Last) (First) (Middle)

TEXTRON INC., 40 WESTMINSTER STREET

PROVIDENCE, RI 02903

2. Issuer Name and Ticker or Trading Symbol

TEXTRON INC [ TXT ]

3. Date of Earliest Transaction (MM/DD/YYYY)

1/2/2020

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

_____ Director

_____ 10% Owner

_X_ Officer (give title below)  Other (specify below)

EVP, General Counsel & Secy

4. If Amendment, Date Original Filed (MM/DD/YYYY)

6. Individual or Joint/Group Filing (Check Applicable Line)

_ X_ Form filed by One Reporting Person

_ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| Title of Security | Trans. Date | Code | V | Amount | Trans. Code | 4 | Securities Acquired (A) or Disposed of (D) | 5 | Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6 | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7 | Nature of Indirect Beneficial Ownership (Instr. 4) |
|-------------------|-------------|------|---|--------|-------------|---|------------------------------------------|---|-------------------------------------------------|---|-----------------------------------------------|---|

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

| Title of Derivative Security | Conversion or Exercise Price of Derivative Security | Trans. Date | 3A. Deemed Execution Date, if any | 4 | Trans. Code | 5 | Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3 and 4) | 6 | Date Exercisable and Expiration Date | 7 | Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | 8 | Price of Derivative Security (Instr. 5) | 9 | Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10 | Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11 | Nature of Indirect Beneficial Ownership (Instr. 4) |
|-------------------------------|--------------------------------------------------|-------------|----------------------------------|---|-------------|---|-------------------------------------------------|---|-----------------------------------------------|---|-----------------------------------------------|---|-------------------------------------------------|---|-------------------------------------------------|---|

Explanation of Responses:

(1) Each stock unit is valued based upon the value of one (1) share of Textron Inc. Common Stock.

(2) Payable in cash upon the conclusion of Reporting Person's employment with Textron Inc.

(3) Acquired pursuant to the Textron Spillover Savings Plan; total includes stock units acquired in dividend reinvestment transactions not required to be reported.

Reporting Owners

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lupone E Robert</td>
<td>Director 10% Owner Officer Other</td>
</tr>
<tr>
<td>TEXTRON INC. 40 WESTMINSTER STREET PROVIDENCE, RI 02903</td>
<td>EVP, General Counsel &amp; Secy</td>
</tr>
</tbody>
</table>

Signatures

/s/ Ann T. Willaman, Attorney-in-Fact 1/6/2020

**Signature of Reporting Person**

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)(vi).


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.
number.