

TEXTRON INC

Reported by HANCOCK DAIN M

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/05/09 for the Period Ending 12/31/08

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





[] 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

OMB APPROVAL
OMB Number: 3235-0287
Expires: February 28, 2011
Estimated average burden
hours per response... 0.5

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

1. Name and Address of Reporting Person *													5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HANCOCK D	AIN M			Tl	EX	KTRON	IN	[C []	ΓX	T]								
(Last) (First) (Middle)				3.]	3. Date of Earliest Transaction (MM/DD/YYYY)								X _ Director 10% Owner Officer (give title below) Other (specify					
							4	0/01/	200	00		below		r (give title t	pelow) _	Other	(specify	
8881 RANDOM ROAD					12/31/2008													
(Street)													6. Individual or Joint/Group Filing (Check Applicable Line)					
FORT WORT	TH, TX	76179		(77		,				
(City) (State) (Zip)												X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table I	- Non-D	eriva	ıtiv	ve Securit	ies	Acqui	ired	l, Dispos	ed of, o	r Benef	icially	y Owned				
1.Title of Security (Instr. 3)	The state of the s				Trans.	2A. Deemed Execution Date, if	Cod	rans. le str. 8)	Acc	Securities quired (A) of sposed of (D str. 3, 4 and	d (A) or d of (D) , 4 and 5) (Instr. 3 and 4)		orted T				7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							C	ode V	' An	nount (A) or (D) I						(I) (Instr. 4)	(======================================	
Tab	le II - Dei	rivative S	ecuritie	s Ben	ıefi	icially Ov	vne	d (<i>e.g</i>	. , p	outs, call	s, warra	ants, op	tions	, convert	ible secur	rities)	•	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans.	3A. Deemed Execution Date, if	4. Trans	5. Number of Derivative Securities Acquired (A)		f 6. Date Exercisable and Expiration Date or (D)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		of	8. Price of Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount Number Shares			Transaction (s) (Instr. 4)	4)		
Deferred Stock Units	\$0 (1)	12/31/2008		A		3971.963		(2))	(2)	Common Stock	3971.9	963	\$16.05	19201.918	D		
Deferred Stock Units	\$0 (1)	12/31/2008		A		307.98		(2))	(2)	Commor Stock	307.9	98	\$14.34	19509.898	D		

Explanation of Responses:

- (1) Each deferred 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 service on the Textron Inc. Board of Directors.

Remarks

All unit numbers and related prices have been adjusted to reflect Textron Inc.'s two-for-one Common Stock split which occurred on August 24, 2007.

Reporting Owners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
HANCOCK DAIN M 8881 RANDOM ROAD	X							
FORT WORTH, TX 76179								

Signatures

/s/ Ann T. Willaman, Attorney-in-Fact

1/5/2009

** 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.