FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions R	eported.	File	ed pursuant to or Section													
1. Name and Address of Reporting Person* WROE THOMAS JR				2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					Owner		
(Last) 12500 TI	(Fir	,	Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004					(Year)	X Officer (give title Other (specify below) below) Sr. Vice President						
(Street) DALLAS TX 75243				4. If Amend	4. If Amendment, Date of Original Filed (Month/Day/Year)						r)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (2	Zip)									. 3.33.1					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Dispose	5. Amount of Securities Beneficially Owned at end of		es ally	Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership	
								Amour	ıt	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)
Common	Stock										4,729.21 D						
Common	Stock											1 5.261(2) 1 1 1			By Self for Sons		
Common	Stock											1 15 371 05(2) 1 1 1 2			By Trust CODA		
Common	Stock											16,645.81 ⁽³⁾ I By 7			By Trust PS		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Dispo of (D (Instr and 5	nired r osed) c. 3, 4	Expir (Mon	te Exerc ation Da th/Day/Y	ear)	Amount of Securities Underlying Derivative Security (Instrand 4) Amount of Management of Security (Instrand 4)		Derivative Security Benefici Owned Followin Reporte Transac (Instr. 4)		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. Held by custodian for account of minors.
- 2. Estimated shares attributable to TI Employee Cash or Deferred Compensation account as of 12-31-04. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.)
- 3. Estimated shares attributable to TI Universal Profit Sharing account as of 12-31-04. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.)

CYNTHIA H. HAYNES, ATTORNEY IN FACT

02/14/2005

** Signature of Reporting Person Date

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

- * 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.