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							
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to 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* HEACOCK DAVID K							2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN]										Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HEAC	OCK DA	<u>VID IX</u>											_			Directo			10% Ov	· I		
							Date of Earliest Transaction (Month/Day/Year)										Officer (give title below)		Other (s below)	specify		
(Last) (First) (Middle)							09/16/2013									Sr. Vice President						
12500 T	BOULEVA	ARD																				
		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable									
(Street)																Line) X Form filed by One Reporting Person						
DALLAS TX 75243																Form filed by One Reporting Person Form filed by More than One Reporting						
																Persor		d by More than One Reportin		rung		
(City) (State) (Zip)																						
		Tab	le I - No	n-Deriv	/ative	e Se	curit	ies Ad	qui	red, D	Disp	osed c	f, or B	enefi	icially	Owned	l					
1. Title of Security (Instr. 3) 2. Transac											3. 4. Securit									7. Nature		
· · · · /					Day/Yea	//Year) if		Execution Date, if any		Code (Instr. 5)			ed Of (D) (Instr. 3, 4 and			Securitie Benefici	ally	(D) o	or Indirect	of Indirect Beneficial Ownership (Instr. 4)		
						- ((Month/Day/Year)		ar) 8	r) 8)					Owne Repo		ollowing	(I) (Instr. 4)				
									0	Code \	,	Amount	(A) ((D)	r P	rice	Transac (Instr. 3				`		
Common	Stock	6/2013	2013			1	М		2,500	2,500 A \$		32.39	39 171,152			D						
Common Stock 09/16/							2013			S ⁽¹⁾		2,500 D S		\$40.5	.5 168,652		D					
		Т	able II -	Deriva	tive S	Seci	ıritie	s Aco	uire	ed. Dis	spo	sed of	or Bei	nefic	ially (Owned						
		-										onverti										
1. Title of	2.	3. Transaction	3A. Deem	ed	4.		5. N	umber	6. Da	ate Exer	cisa	ble and	7. Title a	nd		3. Price of	9. Number	of	10.	11. Nature		
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Executior if any (Month/Da		Transa	ransaction ode (Instr.		ivative urities uired or posed D) tr. 3, 4	Expi	iration D nth/Day/	ate		Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			Derivative Security (Instr. 5)	derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)		
														Amo	ount							
									Date		<u>-</u> ,	piration		Nun	nber							
					Code	v	(A)	(D)		rcisable		ate	Title	Sha	res							
NQ Stock Option (Right to	\$32.39	09/16/2013			M			2,500		(2)	01	1/14/2014	Common Stock	2,5	500	\$0	0		D			

Explanation of Responses:

- $1. \ Sale\ effected\ pursuant\ to\ a\ Rule\ 10b5-1\ trading\ plan\ entered\ into\ by\ the\ reporting\ person\ on\ 2-7-2012.$
- $2. \ The \ option \ becomes \ exercisable \ in \ four \ equal \ annual \ installments \ beginning \ on \ January \ 14, \ 2005.$

/s/ Daniel M. Drory, Attorney 09/17/2013

In Fact

** 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 Number.