FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | |
|--------------|----------|--|--|--|--|--|--|--|--|
| OMB Number | 3235-028 | | | | | | | | |

37 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* <u>CARP DANIEL A</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN] | | | | | | | (Ch | Relationship eck all appli X Directo | • | | | | |
|--|---|--|---|---|---|---|--------|-------------------------------------|---|---|----------------------|--|---|---|---|---------|--|---------------------------------------|
| (Last) (First) (Middle) 12500 TI BOULEVARD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/21/2006 | | | | | | | | Officer below | r (give title) | | Other (s below) | specify | | |
| (Street) DALLA | | | 75243 (Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | e) X Form | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - Non- | -Derivat | tive S | Securitie | s Ac | quired, | Disp | osed o | of, or B | ene | ficial | ly Owne | d | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 an | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | v | Amount | (A) or (D) | | Price | Transac (Instr. 3 | tion(s) | | | (111511.4) | | | |
| Common Stock | | | | | | | | | | | | | 8,664 | | | D | | |
| 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) | ate, Tra | ansactio | n of E | | Expiration | 6. Date Exercisable and Expiration Date Month/Day/Year) | | | 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 (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Co | ode V | (A) | | Date Exercisable | | xpiration ate | Title | or Nu of | nount mber ares | | | | | |
| Stock | \$1 ⁽¹⁾ | 04/21/2006 | | A | A | 164.8 | | (2) | | (2) | Common | 16 | 54.8 | \$35.4 | 20,577.9 | 96 | D | |

Explanation of Responses:

- 1. Security converts to common stock on a one-for-one basis.
- 2. Stock units credited under the Texas Instruments 2003 Director Compensation Plan, to be settled in common stock of the Issuer following the reporting person's termination of service as a director of the Issuer.

DANIEL M. DRORY, ATTORNEY IN FACT

04/24/2006

** 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.