FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | OVAL | | | | |
|---|------------------------|-----------|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | |
| l | Estimated average burd | en | | | | |
| l | hours per response: | 0.5 | | | | |

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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* SIMMONS RUTH J | | | | | | 2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN] | | | | | | | | | ck all applic | able) | g Pers | ion(s) to Issi 10% Ov | |
|---|--|--|---|---------|---------------|--|---|---------|--|-----|--------------------|---|-------------|--|--|---|-----------------------------------|--|---------------------------------------|
| (Last) 12500 TI | (Last) (First) (Middle) 12500 TI BOULEVARD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/21/2005 | | | | | | | | | _ | (give title | | Other (s below) | I |
| (Street) DALLAS (City) | DALLAS TX 75243 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - Non | -Deriv | ative | e Se | curities | s Ac | quired, | Dis | posed o | of, or E | 3ene | eficiall | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D. | | | | | /Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. 4. Securi Transaction Dispose Code (Instr. 5) | | | | | 5. Amou Securitie Beneficia Owned F Reported | es For ally (D) Following (I) (| | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | Price | Transact (Instr. 3 | ction(s) | | | (111311.4) |
| Common Stock | | | | | | | | | | | | | 8, | ,000 | | 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/Ye | oate, T | Code (Ir | | | | 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 derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | c | Code | v | (A) | (D) | Date Exercisab | | Expiration Date | Title | O N O | lumber | | | | | |
| Stock | \$1 ⁽¹⁾ | 10/21/2005 | | | A | | 193.76 | $ \ $ | (2) | | (2) | Comm | | 93.76 | \$30.11 | 13,075. | 92 | 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**

10/24/2005

** 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.