Instruction 1(b)

## 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

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP

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

Form 3 Holdings Reported.										1.0								
Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ad									
1. Name and Address of Reporting Person* <u>LEVEN STEPHEN H</u>				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							
(Last) 12500 TI	(Fir	,	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2003							]	X Officer (give title Other (specibelow)  SR. VICE PRESIDENT						
(Street)  DALLAS	5 TX	. 7	5243	4. If Amendment, Date of Original Filed (N						Day/Yea	ur)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City) (State) (Zip)									Person									
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any		3. Transaction Code (Instr.							sed 5. Amount of Securities Beneficially			ership Ir n: Direct B	7. Nature of Indirect Beneficial			
			(Month/Day/\	Month/Day/Year)		8)		Amount (		Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
Common	Stock												8,09	5.94	D			
Common	Stock								Ì				2,2	<b>51</b> <sup>(1)</sup>		I E	By Son	
Common	Stock												2,2	<b>51</b> <sup>(1)</sup>		I By Daughter		
Common	Stock												52,6	500 <sup>(2)</sup>	I By Trust			
Common	Stock											1 17 0/15 96(3) 1 1 1				By Trust PS		
Common Stock												16,270.96(4)				By Trust CODA		
	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 Derive Secu Acque (A) of Dispersion	ivative urities urities posed b) tr. 3, 4 5)		Date Exercisable and piration Date onth/Day/Year)  te Expiration ercisable Date		Amo Secu Undo Derir Secu and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of		s. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## Explanation of Responses:

- 1. Beneficial ownership by reporting person disclaimed.
- 2. The reporting person has only a remainder interest in the trust, and disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.
- 3. Estimated shares attributable to TI Universal Profit Sharing account as of 12-31-03. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.)
- 4. Estimated shares attributable to TI Employee Cash or Deferred Compensation Account as of 12-31-03. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.)

<u>CYNTHIA H. HAYNES,</u> <u>ATTORNEY IN FACT</u>

02/02/2004

\*\* 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.