FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| notruction 1/h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Estimated average burden hours per response: 0.5

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>BLINN MARK A</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN] | | | | | | | | | | | eck a | | ip of Reporting plicable) ctor | | son(s) to Iss 10% Ov | | | |
|--|---|--|--|----------------|---|---|---|-----|---------------|---|----------|--------------------|--|----------------|----------|----------------------|-------------------|---|--|--|--|--|--|
| (Last) 12500 T | (Fi | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/18/2016 | | | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | | |
| (Street) DALLA: (City) | _ | | 75243 (Zip) | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line | | , | | | | | | |
| D. D. | | | 2. Trans | 2. Transaction | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. 4. 5 Transaction Dis Code (Instr. 5) | | | curities Acquired (A) | | | or 5. Amou | | Form (D) o | n: Direct or Indirect I nstr. 4) (| 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | С | Code \ | <i>,</i> | Amount | (A (D | () or () | Price | Transac (Instr. 3 | | ion(s) and 4) | | | (1150.4) | | |
| Common | Stock | | | | | | | | | \perp | _ | | | | | | 8, | 010 | | D | | | |
| Common | Stock | | | | | | | | | | | | | | | | 12,0 | 000(1) | | I 1 | By Trust | | |
| Common Stock | | | | | | | | | | | | | | | 3,000(2) | | 00(2) | | I 1 | By Trust | | | |
| | | Т | able II - I | | | | | | | • | • | sed of, onverti | • | | - | Ow | ned | | | | | | |
| | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transa Code (I 8) | | | | Expir | ate Exerc ration D ath/Day/ | ate | | and 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4 | | | | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Co | Code | ode V | (A) | (D) | Date Exerc | cisable | Ex Da | piration ate | Title | OI No Of | umber | | | | | | | | |
| Stock | (3) | 11/18/2016 | 1 | | Δ | | 98.27 | | | (4) | | (4) | Commo | on C | 18 27 | ¢7 | 2.08 | 6 072 06 | (4) | ח | 1 | | |

Explanation of Responses:

- 1. Shares held in Trust for the benefit of family member of which reporting person is a co-trustee. Beneficial ownership by reporting person disclaimed.
- 2. Shares held in Trust for the benefit of family member; reporting person shares investment control. Beneficial ownership by reporting person disclaimed.
- 3. Security converts to common stock on a one-for-one basis.
- 4. Stock units credited under the Texas Instruments 2009 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. End-of-period holdings include stock units acquired pursuant to the dividend reinvestment provision of the Plan.

/s/ Cynthia H. Grimm, Attorney 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.