FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours nor 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* MARCH KEVIN P (Last) (First) (Middle) 12500 TI BOULEVARD					TEXAS INSTRUMENTS INC [TXN]											neck all ap Dire	olicable) ctor		10% Ov	wner
					3. Date of Earliest Transaction (Month/Day/Year) 01/20/2005											^ belo	,		Other (s below) ENT & CF	`
(Street) DALLA: (City)			75243 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(5.5)		·	ole I - Nor	n-Deriv	/ativ	e Se	curities	s Ac	quire	d, Di	isp	osed o	f, or	Ben	eficia	ly Own	ed			
´` ´ c		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any		Code (Instr.							d Secur Benef	cially	Forn (D) c	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							(Month/Day/Year)		Ť	8) Code V		Amount		(A) or (D)	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)			9 (1) (11	
Common Stock				01/20	01/20/2005					1)		25,00	_	A	\$0	<u> </u>	78,604.01		D	
Common	Stock															1,7	1,745.97 ⁽²⁾ I T			By Trust PS
Common	Common Stock															:	37.1(3)		I	By Trust CODA
			Table II -				urities . s, warra									Owned	l		<u>'</u>	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, 1	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea				7. Title and Al of Securities Underlying Derivative Sec (Instr. 3 and 4		es Security	8. Price of Derivative Security (Instr. 5)	e deriva Securi Benefi Owned Follow Report	tive ties cially I ing ted action(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Ex Da	piration ate	Title		Amount or Number of Shares					
NQ Stock Option (right to	\$21.55	01/20/2005			A		80,000		(4)	01	/20/2015	Com Sto		80,000	\$0	80	,000	D	

Explanation of Responses:

- 1. Award of restricted stock units pursuant to 2000 Long Term Incentive Plan.
- 2. Estimated shares attributable to TI Universal Profit Sharing account as of 12-31-04. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.) This statement does not include changes in beneficial ownership of shares held in such account occurring after 12-31-04 that are eligible for deferred reporting on Form 5.
- 3. Estimated shares attributable to TI Employee Cash or Deferred Compensation Account as of 12-31-04. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.) This statement does not include changes in beneficial ownership of shares held in such account occurring after 12-31-04 that are eligible for deferred reporting on Form 5.
- 4. The option becomes exercisable in four equal annual installments beginning on January 20, 2006.

CYNTHIA H. HAYNES, ATTORNEY IN FACT

01/24/2005

** 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.