## 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

Machineton	D C	20540
Vashington,	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

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

Instruction 1(b)

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	n Date Execution I e (Month/Day/Year) if any	Execution Date,	4. Transaction Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	erivative ecurity estr. 5)	derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	of Indirect Beneficial Ownershi (Instr. 4)			
1. Title of	2.	Ta	ble II - Derivat (e.g., p	ive Secur uts, calls,	warr	ants,	opti	ons,	converti	ble se	curities	s)	wned	9. Number	of	10.	11. Nature		
Common Stock												455.91 <sup>(4)</sup>				By Trust PS			
Common	Common Stock												2,976.61 <sup>(3)</sup>				By Trust- -401(k)		
Common	Stock												8,0	00 <sup>(2)</sup>		I	By Trust		
Common	Stock												4,8	00(1)		I	By Son		
Common	Stock												179,3	396.17		D			
				(Month/Day/Year)		8)		Amou	mount (A) or (D) Price		Price	Owned at end Issuer's Fiscal Year (Instr. 3 at 4)		nt end of Fiscal	Indirect (I)		Ownership (Instr. 4)		
1. Title of Security (Instr. 3)  2. Transaction Date			2A. Deemed Execution Date, if any Code (Instr.		ed, Disposed of, or Benefic 4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)								ership	7. Nature of Indirect Beneficial					
(City)	(Sta		Zip)					D:		-4	D6								
	1.2	,											Form Pers	n filed by M on	ore th	an One Re	eporting		
(Street)	S TX		75243	4. II AIIICII	ument	, Date (	or Ong	iiiai i iic	ou (WOHU)/E	ouy/ rea	, I	Line)		i filed by O					
12500 TI BOULEVARD				4 If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Last) (First) (Middle)					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004						Year)		Office below	er (give title v)	9	Other (specify below)			
1. Name and Address of Reporting Person* ADAMS JAMES R					2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [ TXN ]							5. Relationship of Reporting F (Check all applicable) X Director					Owner		
		*		2 Iccupr N	lama s	nd Tic	kar or	Tradino	Symbol		- 1	5 Da	lationchir	of Deport	ina Da	reon(e) to	lecuer		

## **Explanation of Responses:**

- 1. Beneficial ownership by reporting person disclaimed.
- 2. Shares held in trust for the benefit of family members of which reporting person is trustee. Beneficial ownership by reporting person disclaimed.
- 3. Estimated shares attributable to TI 401(k) account as of 12-31-04. (Interests in this account are denominated in units. Consequently, share amount shown is an estimate.)
- 4. 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.)

CYNTHIA H. HAYNES, **ATTORNEY IN FACT** 

02/14/2005

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.