FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

to Sec obligat	this box if no lo tion 16. Form 4 tions may conti tion 1(b).	or Form 5	Estimated average burden										3235-0287 en 0.5				
1. Name and Address of Reporting Person [*] Lizardi Rafael R					2. Issuer Name and Ticker or Trading Symbol <u>TEXAS INSTRUMENTS INC</u> [TXN]							heck all app Direc	blicable)	10% C			
(Last) 12500 T	(Fi I BOULEV	, , , ,	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/05/2020						A below	N)	e President & CFO		specity
(Street) DALLAS TX 75243						mendı	ment, Date o	f Origina	l Filed	I (Month/Da	y/Year)			n filed by Or n filed by Mo	ne Rep	porting Pers	son
(City)	(St		zip) I - Nor	n-Deriva	ative S	ecur	ities Acq	uired,	Disp	posed of	, or Bei	nefici		-			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			Transaction Disposed Of Code (Instr. 5)			Of (D) (Instr. 3, 4 and Benefic Owned			ties Fo cially (D) d Following (I)		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price		ted action(s) 3 and 4)			(Instr. 4)
Common Stock 11/05/						20 G V 400 D \$ 0 81,5		1,571	D								
		Ta					ies Acqu varrants,							d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date,		4. Transaction Code (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of De Securities Se		8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/ Katharine Kane, Attorney 11/06/2020

Amount or Number

of Shares

In Fact

Title

Expiration Date

** 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).

Code v (A) (D)

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.

Date Exercisable