FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* LOWE GREGG A (Last) (First) (Middle) 12500 TI BOULEVARD (Street) DALLAS TX 75243						Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN] 3. Date of Earliest Transaction (Month/Day/Year) 01/19/2006 4. If Amendment, Date of Original Filed (Month/Day/Year)									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) SR. VICE PRESIDENT 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)												Person					
1. Title of Security (Instr. 3) 2. Trans Date					sactio				3. Transa Code (Transaction Disposed Of (D) (Code (Instr. 5)			ired (A) or		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Dwnership	
									Code	v	Amount	(A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock 01						06			A ⁽¹⁾		50,00	50,000		\$0	258,086			D		
Common	Stock														389.	09 ⁽²⁾	I By Trust- -401(k)			
Common Stock														3,039.36(3)		I		By Trust- -PS		
			Table II - I						uired, D , option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Code (I			Derivative		6. Date Ex Expiration (Month/Da	Date		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s dly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	or Nu	nount ımber Shares		(Instr. 4)				
NQ Stock Option (right to buy)	\$32.55	01/19/2006			A		100,000		(4)	01	1/19/2016	Commo Stock	1 10	00,000	\$0	100,00	00	D		

Explanation of Responses:

- $1. \ Award \ of \ restricted \ stock \ units \ pursuant \ to \ 2000 \ Long \ Term \ Incentive \ Plan.$
- 2. Estimated shares attributable to TI 401(k) Account as of 12-31-05. (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 this account occurring after 12-31-05 that are eligible for deferred reporting on Form 5.
- 3. Estimated shares attributable to TI Universal Profit Sharing account as of 12-31-05. (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 12-31-05 that are eligible for deferred reporting on Form 5.
- $4. \ The \ option \ becomes \ exercisable \ in \ four \ equal \ annual \ installments \ beginning \ on \ January \ 19, \ 2007.$

DANIEL M. DRORY, ATTORNEY IN FACT

01/23/2006

** 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.