FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* <u>RITCHIE KEVIN J</u>						2. Issuer Name and Ticker or Trading Symbol  TEXAS INSTRUMENTS INC [ TXN ]									ck all ap	olicable)		ssuer Owner (specify
(Last) (First) (Middle) 12500 TI BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 01/31/2011									belo	w) ``	below President	
(Street) DALLAS TX 75243					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	S. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person			
(City)	(51		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/						on 2A. Deemed Execution Date,			3.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o	Pric	e e	Trans	rted action(s) 3 and 4)		(Instr. 4)
Common Stock 01/31/2						)11			S <sup>(1)</sup>		50,000	D \$34.1		4.1006	2	56,785	D	
Common Stock															3,0	050.43 <sup>(2)</sup>	I	By Trust- -401(k)
Common Stock															5,	196.5 <sup>(3)</sup>	I	By Trust PS
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Security or Exercise (Month/Day/Year) if any			med on Date, Transa Code (I Day/Year)				6. Date Exerc Expiration Da (Month/Day/Y		ate (ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of rivative curity str. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	of Share	s				

## **Explanation of Responses:**

- 1. Sales effected pursuant to a Rule 10b5-1 trading plan entered into by the reporting person on 11-10-2010. The price in Table 1 is a weighted average sale price. The sales were at prices ranging from \$33.9850 to \$34.2700. The Issuer undertakes to provide upon request a detailed breakout of the sale prices and the number of shares sold at each price.
- 2. Estimated shares attributable to TI 401(k) Account as of 12-31-2010. (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 12-31-2010 that are eligible for deferred reporting on Form 5.
- 3. Estimated shares attributable to TI Universal Profit Sharing Account as of 12-31-2010. (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 12-31-2010 that are eligible for deferred reporting on Form 5.

/s/ Daniel M. Drory, Attorney In Fact

02/01/2011

\*\* 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.