FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| gton, D.C. 20549 | OMB APPROVA |
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| OMB Number: | 3235-0287 | | | | | | |
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| 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* MACMILLAN STEPHEN P | | | | | 2. Issuer Name and Ticker or Trading Symbol TEXAS INSTRUMENTS INC [TXN] | | | | | | | | | | ck all applic | • | | on(s) to Issi 10% Ov | |
|---|--|--|---|---------|---|---|--------|-------------------------------|--|-----------|--------------------|---|----------------|--|---|--|-----------------------------------|---|---------------------------------------|
| (Last) (First) (Middle) 12500 TI BOULEVARD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/19/2011 | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify |
| (Street) DALLA: (City) | | tate) | 75243 (Zip) | ı-Deriv | | If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benefi | | | | | | | | | Form fi Form fi Persor | idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | action | action 2A. Deemed Execution Dat | | | 3. 4. Se Transaction Dispo | | 4. Securi | ties Acqui | red (| A) or | 5. Amou Securitie Beneficia Owned F Reported | nt of 6. Ov s Form ally (D) o ollowing (I) (In | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | | | | | | | | Code | v | Amount | (A) (D) | or | Price | Transaction(s) (Instr. 3 and 4) | | | D | () | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Yea | Date, T | 4. Transactio Code (Instr | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4) | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | c | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Nu of | ımber | | | | | |
| Stock Units | \$1 ⁽¹⁾ | 08/19/2011 | | | A | | 131.29 | | (2) | | (2) | Common | 13 | 31.29 | \$25.39 | 5,157.81 | (2) | D | |

Explanation of Responses:

- 1. Security converts to common stock on a one-for-one basis.
- 2. Stock units credited under the Texas Instruments 2009 Director Compensation Plan, to be settled in common stock of the Issuer following the reporting person's termination of service as a director of the Issuer. End-of-period holdings include stock units acquired pursuant to the dividend reinvestment provision of the Plan.

/s/ Cynthia H. Grimm, **Attorney In Fact**

08/23/2011

** 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.