FORM	4
------	---

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Response	es)		1									
1. Name and Address of Reporting Person [*] STERLING MICHELLE M			2. Issuer Name a QUALCOMM			0,	mbol	:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
5775 MOREHOU	(First) SE DR.	(Middle)	3. Date of Earlies 05/15/2019	t Transacti	on (N	Month/Day	/Year	X_Officer (give title below) Other (specify below) EVP, Human Resources				
SAN DIEGO, CA	4. If Amendment,	, Date Orig	inal	Filed(Mont	ı/Day/Y	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Т	able I - No	n-Do	erivative	Securi	ties Acqui	ired, Disposed of, or Beneficially Owned			
(Instr. 3) Date 1			2A. Deemed 3. Transaction Execution Date, if Code any (Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. 7. Nature Ownership Form: Beneficia		
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) Owner or Indirect (Instr (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		05/15/2019		S		5,560	D	\$ 86.4373 (1)	25,599	I	by Trust (2)	

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.			6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	Number		and Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	f		(Month/Day	/Year)	Under	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D)eriva	tive			Secur	ities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	ecuri	ties			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Α	cquii	red			4)			Following	Direct (D)	
					(/	A) or							Reported	or Indirect	
					D	Dispos	sed						Transaction(s)	(I)	
					0	f (D)							(Instr. 4)	(Instr. 4)	
					· ·	Instr.									
					4, and 5)										
											Amount				
								Date	Evairation		or				
								Exercisable	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code V	/ (A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
STERLING MICHELLE M 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714			EVP, Human Resources					

Signatures

By: David Zuckerman, Attorney-in-Fact For: Michelle M. Sterling 05/15/2019 **Signature of Reporting Person Date

Explanation of Responses:

SEC 1474 (9-02)

- * 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).
- (1) The sale prices for this transaction ranged from \$86.36 to \$86.48. The filer hereby agrees to provide, upon request, full information regarding the number of shares sold at each separate price.
- (2) Securities held by Michelle Marie Sterling, TTEE of the Michelle Marie Sterling Trust DTD 11/26/2008.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.