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

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

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

ses)														
1. Name and Address of Reporting Person * POLEK ERIN L				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) 5775 MOREHOUSE DR.			3. Date of Earliest Transaction (Month/Day/Year) 02/03/2020							X Officer (give title below) Other (specify below) SVP & Chief Accounting Officer				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
												. one reporting .		
(State)	(Zip)		T	able I	- Non	-Der	ivative S	Securities	Acqui	ired, Disp	osed of, or l	Beneficially (Owned	
	2. Transaction Date (Month/Day/Year)	any		Code (Instr. 8)				of (D)	Beneficially Owned Following Reported Transaction(s)		Following (s)	Ownership Form: of Be	Beneficial	
		(Month/E	Day/Year)		ode	V	Amoun	(A) or t (D)	Price	(Instr. 3 a	and 4)	` '		Ownership (Instr. 4)
	02/03/2020			S	(1)		39			0 (2)			D	
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2 Transacti		` ' '	, calls, w		ts, op					itle and	& Price of	0 Number o	f 10	11. Natur
Date (Month/Day	Execution Day (Year) any	ate, if Tra	te, if Transaction Code (Instr. 8)		Number an		nd Expiration Date		Amo Undo Secu	ount of erlying urities		Derivative Securities Beneficially Owned Following Reported	Ownersh Form of Derivating Security Direct (I or Indirects)	of Indirect Beneficia Ownershi (Instr. 4)
								Expiration		Amount				
A cois	(First) USE DR. (Street) A 92121-1714 (State) a separate line and a separate line an	(Street) A 92121-1714 (State) 2. Transaction Date (Month/Day/Year) 02/03/2020 a separate line for each class of security and the security	QUAL (First) (Middle) 3. Date of 02/03/2 (Street) 4. If Am A 92121-1714 (State) (Zip) 2A. Deer Execution any (Month/Day/Year) 02/03/2020 a separate line for each class of securities benefits benefits (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year) 1. Transaction Date (Month/Day/Year)	QUALCOMM 3. Date of Earlies 02/03/2020 (Street) 4. If Amendment, (State) 2. Transaction Date (Month/Day/Year) 2. Transaction Date, if any (Month/Day/Year) 02/03/2020 Table II - Derivative Securities beneficially of Execution Date, if any (Month/Day/Year) 3. Transaction Date (e.g., puts, calls, we call the composite of t	QUALCOMM INC (First) (Middle) 3. Date of Earliest Trans 02/03/2020 4. 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Transaction Date (Month/Day/Year) Q2/ A Deemed Execution Date, if any (Month/Day/Year) Q2/ Q3/2020 Q2/ Q3/2020 Q2/ Q3/2020 Q2/ Q3/2020 Q2/ Q3/2020 Q2/ Q3/2020 Q3/	QUALCOMM INC/DE [QCOM] Check all applic Director X Officer (give tilte below) SVP & Chief Account SVP & Chief Account	QUALCOMM INC/DE [QCOM] QUALCOMM INC/DE [QCOM] Check all applicable) Objector Oz/03/2020 Check all applicable) Oz/03/2020 Oz/03/2020

		Relationships							
Reporting	Owner Name / Address	Director	10% Owner	Officer	Other				
	CRIN L REHOUSE DR. GO, CA 92121-1714			SVP & Chief Accounting Officer					

Signatures

By: David Zuckerman, Attorney-in-Fact For: Erin L. Polek	02/03/2020
**Signature of Reporting Person	Date

Explanation of Responses:

* 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 transaction was conducted under a Rule 10b5-1 trading plan.
- (2) Includes 39 shares acquired under the Company's Employee Stock Purchase Plan on January 31, 2020.

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.