FORM 4

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

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

10% Owner Other (specify below)

5. Relationship of Reporting Person(s) to Issuer

____ Director
X Officer (give title below)

(Check all applicable)

President, QCT

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

5775 MOREHOUSE DR.

1. Name and Address of Reporting Person *

(Middle)

(Print or Type Responses)

JHA SANJAY K

(Last)

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

2. Issuer Name and Ticker or Trading Symbol

3. Date of Earliest Transaction (Month/Day/Year)

QUALCOMM INC/DE [QCOM]

12/31/2003

(Street) SAN DIEGO, CA 92121-1714				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					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of So (Instr. 3)	ecurity	1	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		(A) (Inst	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Amount (A) or (D) Price		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
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)																
	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	5. N of Der Sec Acc (A) Dis of (6. Number 6. Date Exerc		Exercisable 7. Title of Under the contract o		s and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (I or Indire	ve Ownership (Instr. 4)		
				Code	V (A	A) (D	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares					
Phantom Stock Unit (1)	\$ 1	12/31/2003		A	1,2	80	C	2)	(3)	Commo Stock	1 1 280	\$ 52.66	6,035.73	3 I	by Grantor Trust (1)	

Signatures

JHA SANJAY K

Reporting Owners

Reporting Owner Name / Address

5775 MOREHOUSE DR.

SAN DIEGO, CA 92121-1714

By: Noreen E. Burns, Attorney-in-Fact For: Sanjay K. Jha		01/02/2004		
**Signature of Reporting Person		Date		

10%

Owner

Director

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).

Relationships

Officer

President, QCT

Other

- (1) The common stock issued under the terms of the Company's Executive Retirement Matching Contribution Plan, a tax conditioned plan, is exempt under Rule 16b-3. The shares are held in a grantor trust and stock is the only permissable form of distribution under the Plan.
- The rights awarded under the Company's Executive Retirement Matching Contribution Plan will be eligible for distribution upon termination and vest according to the following (2) schedule: 100% at age 65 with acceleration provisions (1) at the rate of 25% per year for each subsequent year of participation, (2) after the individual reaches age 61, or (3) if they have more than 10 years of service.
- (3) The rights awarded under the Company's Executive Retirement Matching Contribution Plan will be eligible for distribution upon termination.

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.