FORM	4
------	---

Check this box if no
longer subject to
Section 16. Form 4 or
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 Responses)										
1. Name and Address of Rep COFFMAN ADELIA	2. Issuer Name QUALCOM			0,	nbol	:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
(Last) (Fin 5775 MOREHOUSE D	· / · · · /	3. Date of Earlie 09/13/2004	3. Date of Earliest Transaction (Month/Day/Year) 09/13/2004					Officer (give title below)	Other (specify b	below)
^{(Str} SAN DIEGO, CA 9212	4. If Amendmen	nt, Date Orig	inal l	Filed(Month	/Day/Yea	ar)	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) (St	ate) (Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transactic Date (Month/Day	Execution Date,	f Code (Instr. 8)	ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership
			Code	v	Amount	or (D)	Price		(I) (Instr. 4)	
Common Stock	09/13/200	4	S <mark>(1)</mark>		10,000	D	\$ 39.852	393,000	Ι	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

SEC 1474 (9-02)

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	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Num	Number and Expiration Date A		Amo	unt of	Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		of	(Month/Day/Year) U		Unde	erlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	vative	ative		Securities (Inst		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secu				(Instr. 3 and				Security:	(Instr. 4)
	Security					Acqu				4)			0	Direct (D)	
						(A) o							1	or Indirect	
						Disposed							Transaction(s)	< / <	
						· · ·	of (D)					(Instr. 4)	(Instr. 4)		
						·	nstr. 3,								
						4, and	d 5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
COFFMAN ADELIA A 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	Х						

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Adelia A. Coffman	09/14/2004
***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 disposition of shares was conducted under a 10b5-1 Plan, as defined under the Securities Exchange Act of 1934, as amended.
- (2) Securities held by Ron D. Coffman & Adelia A. Coffman, Trustees of the Coffman Family Trust dtd. 12/16/93.

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.