### FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

(Print or Typ	e Responses	)																
1. Name and Address of Reporting Person*  JACOBS IRWIN M				2. Issuer Name <b>and</b> Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]									_x	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director				
(Last) (First) (Middle) 5775 MOREHOUSE DR.				3. Date of Earliest Transaction (Month/Day/Year) 03/14/2005									_X	X Officer (give title below) Other (specify below)  Chairman & CEO				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							r)	_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
		2121-1714												roini med by M	ore man One Ke	porting reison		
(City	")	(State)	(Zip)				Tab	le I - N	Non-D	erivati	ve Se	curities	Acquired	, Disposed o	f, or Benefi	cially Owned		
(Instr. 3) Date			2. Transaction Date (Month/Day/Year	Executi (ear) any		eemed tion Date, if h/Day/Year)		ransact e r. 8)	ion	(A) or	curities Acquired or Disposed of (D)		(D) Ow Tra	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			5. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
						С	ode	V	Amou		A) or (D) I	Price			(	or Indirect I) Instr. 4)	(Instr. 4)	
Common	Stock		03/14/2005				]	М		40,00	00 A	\$ 2.	.83 29	,002,095				by Trust
Common	Stock		03/14/2005				S	(2)		47,00	00 D	\$ 3	7.55 28	,955,095		-		by Trust
Common	Stock												13	6,078		-		By GRAT
Common Stock												13	6,078				by Spouse	
Reminder: F	Report on a se	eparate line for each	class of securities be					1	Perso this fo	orm a	re no alid C	t requir OMB co		pond unle nber.		n contained n displays a		1474 (9-02)
	1		1 able 11									securitie						
1. Title of Derivative Security (Instr. 3)	Conversion Date Exor Exercise (Month/Day/Year) an			Code Securiti			erivative rities ired (A) sposed ) . 3, 4,	Expir (Mon	ation l	tion Date h/Day/Year) S			7. Title a of Under Securitie (Instr. 3	s		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form o Derivat Securit Direct ( or Indir	f Benefic Owners (y: (Instr. 4
				Code	v	(A)	(D)	Date Exerc	cisable		Expir Date		Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4	+)
Non- Qualified Stock Option (right to	\$ 2.83	03/14/2005		М		4	40,000	07/1	2/199	97 <sup>(3)</sup>	07/1	1/2006	Commo		\$ 0	1,124,000	) D	

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	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
JACOBS IRWIN M 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	X		Chairman & CEO				

#### **Signatures**

By: Lisa V. Murzic, Attorney-in-Fact For: Irwin M. Jacobs
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**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) Securities held by Irwin M. Jacobs & Joan Klein Jacobs as Trustees of the Irwin Mark Jacobs & Joan Klein Jacobs Family Trust UTA dtd 6/2/80, as amended 6/30/92.
- (2) The disposition of shares was conducted under a 10b5-1 Plan, as defined under the Securities Exchange Act of 1934, as amended.
- (3) Employee stock options granted under the Company's 1991 Stock Option Plan. The options vest in five equal annual installments beginning on July 12, 1997.

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.