FORM 4

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

OMB APPR	OVAL
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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

1 Massa -															
Name and Address of Reporting Person Johnson Margaret 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) 01/09/2006							X Officer (give title below) Other (specify below) President, QIS					
(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				
SAN DIEGO, CA 92121-1714															
(City	·)	(State)	(Zip)			Table I	- Non-De	rivative	Securiti	es Acquir	ed, Disposed	of, or Bene	ficially Own	ed	
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		of (D)		,		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						Cod	le V	Amount	(A) or (D)	Price	,		or Indirect (Instr. 4) I) Instr. 4)		
Common	Stock		01/09/2006			M		2,000	A	\$ 17.47	3,340			D	
Common	Stock		01/09/2006			S ⁽¹	7	2,000	D	\$ 47.42	42 1,340			D	
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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	Code	e Securi , calls, w 5. N ion of Der Securi Acq (A) Disp of (I	ties Acq arrants fumber ivative urities uired or posed D)	Perso in thi displ uired, Di	s form a ays a cu sposed o converti exercisab n Date	are not urrently f, or Ben ible secur le and	required valid OM eficially (rities)	to respond MB control in Dwned and Amount rlying es	unless the	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	f 10. Owners Form of Derivat Security Direct (or Indires) (I)	11. Nation of Indirection of Section 11. Nation of Indirection of Indirection of Indirection (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transacti Code	e Securi , calls, w 5. N ion of Der Securi Acq (A) Disp of (I	ties Acq arrants fumber ivative urities uired or posed D) tr. 3, 4,	Perso in thi displ uired, Dia , options, 6. Date E Expiration	Expi	are not urrently f, or Ben ible secul le and	required valid ON eficially (rities) 7. Title a of Unde Securities	to respond MB control in Dwned and Amount rlying es	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Owners Form of Derivat Security Direct (or Indir	11. Nation of Indirection of Section 11. Nation of Indirection of Indirection of Indirection (Instr. 4

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Johnson Margaret L 5775 MOREHOUSE DR.			President, QIS				
SAN DIEGO, CA 92121-1714							

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Margaret L. Johnson	n	01/11/2006
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) The options vest 10% on the six month anniversary of the date of grant and the remaining balance vests monthly thereafter, adjusted for any leaves of absence and previously exercised options prior to becoming an affiliate. The option is fully vested five years after the date of grant, adjusted for any leaves of absence.

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.