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

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 Ty	pe Response	s)													
Name and Address of Reporting Person* JACOBS JEFFREY A				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) President, Global Development				
(Last) (First) (Middle) 5775 MOREHOUSE DR.				3. Date of Earliest Transaction (Month/Day/Year) 06/06/2007											
(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)	т	ahla I	- Nor	1_Dat	rivativa S	Socuritie	as Acqui	rad Diene	need of or I	Ronoficially	Owned	
1.Title of Security 2. Transaction (Instr. 3) Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it	3. Transactic Code (Instr. 8)			tion 4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)					ies Following	6. Ownership Form:	7. Nature of Indirect Beneficial
			(Month/Day/Year)		ode	V	Amount	(A) or (D)	Price	(Instr. 3 a	r. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		06/06/2007		S	(1)		10,000	D	\$ 42.51	615,347		I	by Trust		
Common Stock										147,584			D		
Common Stock										50,000		Ι	By GRAT		
Common Stock										812		Ι	FBO children		
Common Stock										50,000			I	by GRAT S	
Reminder:	Report on a s	separate line fo	or each class of secun				Pers cont the t	sons wh tained in	o responsible this formula this	orm are a currer	not requ ntly valid		formation spond unle trol numbe	ess	1474 (9-02)
		1		Derivative Securi [e.g., puts, calls, w							ly Owned				
1. Title of Derivative Security (Instr. 3)	2. 3. Transactio Conversion or Exercise Price of Derivative Security 3. Transactio (Month/Day/		Year) Execution Da	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Undo Secu	ttle and ount of erlying irities r. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat Securit Direct or India	ive Ownershi y: (Instr. 4) (D) rect	
				Code V	(A)	(D)	Date	e rcisable	Expirati Date	on Title	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
JACOBS JEFFREY A 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714			President, Global Development					

Signatures

By: Lisa V. Murzic, Attorney-in-Fact For: Jeffrey A. Jacobs	06/07/2007
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 Jeffrey A. Jacobs and Deni Jacobs Trustees for the Jeff & Deni Jacobs Family Trust dtd. 5/3/01.
- (3) Securities held by Deni Jacobs, Trustee of the Deni Jacobs's Annuity Trust dated June 7, 2006.

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.