FORM	4
------	---

Г

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 0.5 hours per response ..

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))								i		
1. Name and Address of Lauer Len J	2. Issuer Name an QUALCOMM I			0.	51	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) 5775 MOREHOUSI	(First) E DR.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2008					X_Officer (give title below) Other (specify below) Chief Operating Officer			
SAN DIEGO, CA 9	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Year		2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)		*			0 1	Ownership of Indirec	7. Nature of Indirect Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	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

SEC 1474 (9-02)

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 Derivative	2. Conversion	3. Transaction Date	3A. Deemed Execution Date, if			imber 6. Date Exe and Expirat					8. Price of Derivative	9. Number of Derivative	10. Ownership	11. Nature of Indirect	
Security		(Month/Day/Year)		Code)	Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3	ive ies ed ed	e (Month/Day/Year)		Year) Securities		Security (Instr. 5) Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	V	and 5) (A)	(D)	Exercisable	Expiration Date	1 itie	Amount or Number of Shares				
Phantom Stock Unit (1)	\$ 1	12/31/2008		А		3,331		<u>(2)</u>	<u>(3)</u>	Common Stock	3,331	\$ 34.67	6,175.533		by Grantor Trust ⁽¹⁾

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Lauer Len J 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714			Chief Operating Officer						

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Leonard J. Lauer	01/05/2009		
**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 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.