## FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
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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

Name and Address of Reporting Person   ABERLE DEREK K			Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]      Date of Earliest Transaction (Month/Day/Year) 08/28/2009  4. If Amendment, Date Original Filed(Month/Day/Year)						5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below)  Executive Vice President  6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by More than One Reporting Person  Form filed by More than One Reporting Person					
(Last) (First) (Middle) 5775 MOREHOUSE DR. (Street)															
		2121-1714										ore unan one	reporting reason		
(City	)	(State)	(Zip)			Table I	- Non-Der	ivative S	Securiti	es Acquire	d, Disposed	of, or Bene	eficially Own	ed	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr.	(	4. Securities Acquired (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Or	Owned Follo Transaction(s		ed [	6. Ownership Form:	Beneficial	
				(Month/D	ay/ Y ear)	Cod	le V	Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) Ownersl or Indirect (Instr. 4) (I) (Instr. 4)	
Common	Stock		08/28/2009			M		2,000	A	\$ 37.99 2,	2,454			D	
Common Stock 08/28/2009			08/28/2009			S(1	1 2	2,000 I	D	\$ 48   454	54		1	D	
			T-LL- H	Donis 41	Soc'	ing A -	in this displa	form a ys a cu	re not rrently	required to valid OMI	collection to respond B control i	unless the		520	(> 02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transacti Code	5. Notion of Deri Secu Acque (A) of Disp of (I (Inst	vative urities uired or cosed O) r. 3, 4,	in this displa	form a ys a cu posed of, onvertible ercisable Date	re not prently , or Benole secure and	required to valid OMI eficially Or rities)	wned  and Amount lying	unless the	9. Number o	f 10. Owners Form of Derivati Security Direct ( or Indire	11. Nation of Indirection Benefic Owners: (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transacti Code	5. No of Deri Secu Acqu (A) o Disp of (I	vative urities uired or cosed O) r. 3, 4,	in this displa uired, Disp, options, community of the Expiration	form a ys a cu posed of, onvertil ercisable Date ay/Year)	re not a rrently, or Ben ole secu	required to valid OMI eficially Orities)  7. Title are of Underly Securities	wned  and Amount lying	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners Form of Derivati Security Direct ( or Indirects)	11. Nation of Indirection Benefic Owners: (Instr. 4

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
ABERLE DEREK K 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714			Executive Vice President		

#### **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Derek K. Aberle	08/31/2009
**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 transaction 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. The option is fully vested five years after the date of grant.

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.