<b>FORM</b>	4
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(Drint or Tyres Desmanaes)

#### 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

(Thit of Type Responses)								•		
1. Name and Address of Reporting Person CRUICKSHANK DONALD G	2. Issuer Name <b>and</b> Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) XDirector10% Owner			
(Last) (First) 5775 MOREHOUSE DR.		3. Date of Earliest Transaction (Month/Day/Year) 03/02/2010					Officer (give title below)O	ther (specify bel	ow)	
(Street) SAN DIEGO, CA 92121-1714	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)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		2A. Deemed	3. Transaction		4. Securities Acquired		uired	5. Amount of Securities Beneficially	6.	7. Nature
(Instr. 3)	Date	Execution Date, if	Code		(A) or Disposed of (D)		of $(D)$	Owned Following Reported	Ownership	of Indirect
	(Month/Day/Year)		(Instr. 8)		(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial
		(Month/Day/Year)						(Instr. 3 and 4)		Ownership
									or Indirect	(Instr. 4)
			<b>C</b> 1			(A) or	л ·		(I)	
			Code	V	Amount	(D)	Price		(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 form displays a currently valid OMB control number.

SEC 1474 (9-02)

### 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	4. Transact				6. Date Exercisable and Expiration Date		7. Title and Amount of Underlying		8. Price of Derivative		10. Ownership	11. Nature of Indirect
		(Month/Day/Year)		Code			•						•	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	)	Securiti		· · · ·		(Instr. 3 and 4)		· /		Derivative	
	Derivative					Acquire	ed							2	(Instr. 4)
	Security					(A) or Dispose	d						0	Direct (D) or Indirect	
						of (D)	a						Transaction(s)		
						(Instr. 3	, 4,							(Instr. 4)	
						and 5)							, ,		
											Amount				
								Date	Expiration		or				
								Exercisable	Date		Number				
				Code	v	(A)	(D)				of Shares				
-				coue	v	(21)	(D)				Shares				
Restricted		02/02/2010				5 0 7 0		<u>(2)</u>	(2)	Common	5 9 7 9	¢ 0	5 9 5 9	P	
Stock	<u>(1)</u>	03/02/2010		Α		5,273		(4)	(2)	Stock	5,273	\$ 0	5,273	D	
Unit															

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
CRUICKSHANK DONALD G 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	Х						

## **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Donald G. Cruickshank	03/04/2010	
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) Each restricted stock unit represents a right to receive one share of the Company's common stock.

Restricted Stock Units are 100% vested on the earlier of (1) April 11, 2011, (2) death, (3) disability, or (4) a change in control. The units will be settled in shares of the Company's (2) common stock or cash in accordance with the grant agreement on the earlier of (1) April 11, 2011, (2) separation from service, (3) death, (4) disability, or (5) a change in control.

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.