## FORM 4

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

| OMB APPR           | OVAL      |
|--------------------|-----------|
| 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

|  | pe Responses  | /  |  |   |   |   |   |   |   |   |  |  |   |   |
|--|---|--|--|---|---|---|---|---|---|---|--|--|---|---|
| 1. Name and Address of Reporting Person * SCOWCROFT BRENT        |   |  | 2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM] |   |   |   |   |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner   |   |  |  |   |   |
| 5775 MO  | REHOUS  | (First)<br>E DR.                         |  | 3. Date of Earliest Transaction (Month/Day/Year) 03/02/2010 |   |   | _   | Officer (g  | ive title below)  | Oth   | er (specify below                          | <i>i</i> )   |   |   |
| (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 PersonForm filed by More than One Reporting Person |   |  |  |   |   |
| (City  |   | (State)                                  | (Zip)  |   | 7                                       | able I  | Non-Deriv   | ative Securit   | ies Acquire   | ed, Dispose   | d of, or Ben                               | eficially Ow   | ied   |   |
| 1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y |   |  | 2A. Deemed<br>Execution Date, in any<br>(Month/Day/Yea             |   |   |   |   | d of (D) Owned Follo  |   | (s)   |  | Ownership of Form:   | 7. Nature of Indirect Beneficial Ownership  |   |
|  |   |  |  | (   |   | Cod   | e V A   | mount (A) o   |   | or Indirect (I)                                       |  |  |   |   |
| Reminder: 1  | , , , , , , , , , , , , , , , , , , ,                     |  |  |   |   |   |   |   |   |   | n of inform                                |  |   | 174 (9-02)  |
| Reminder: I  |   |  |  |   |   |   | contain<br>form di  | ed in this fo<br>splays a cu<br>sed of, or Be                                       | orm are no<br>rrently val   | ot required<br>lid OMB c                              | d to respoi                                | nd unless th   |   | 174 (9-02)  |
| 1. Title of Derivative Security (Instr. 3)                       | 2.<br>Conversion  | 3. Transaction<br>Date<br>(Month/Day/Yea | 3A. Deemed<br>Execution Date,                                      | 4. Transaci<br>Code   | 5. Notion of Den Sec (A) Dis of (Ins    | Jumber ivative urities quired or posed D) etr. 3, 4,    | contain<br>form di-<br>uired, Dispo<br>options, co<br>6. Date Ex<br>and Expira<br>(Month/Da | ed in this for splays a cursed of, or Be envertible security errors able tion Date  | orm are no<br>rrently val   | ot required<br>lid OMB c<br>Owned<br>d Amount<br>ying | 8. Price of Derivative Security (Instr. 5) | nd unless th   | f 10.<br>Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | 11. Natur<br>of Indired<br>Beneficia<br>Ownersh<br>(Instr. 4) |
| 1. Title of<br>Derivative<br>Security                            | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative | Date                                     | 3A. Deemed<br>Execution Date, i                                    | 4. Transaci<br>Code   | 5. Notion of Der According (A) Dis of ( | Jumber ivative urities quired or posed D) str. 3, 4, 5) | contain form di nired, Dispo options, co 6. Date Ex and Expira (Month/Da                    | ed in this for splays a cu sed of, or Be nvertible sec ercisable tion Date ny/Year) | rently valurities) 7. Title and of Underly Securities (Instr. 3 and 1985)   | ot required<br>lid OMB c<br>Owned<br>d Amount<br>ying | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(: | F 10.<br>Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | 11. Natur<br>of Indired<br>Beneficia<br>Ownersh<br>(Instr. 4) |

### **Reporting Owners**

|   | Relationships |              |         |       |  |  |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address                                    | Director      | 10%<br>Owner | Officer | Other |  |  |
| SCOWCROFT BRENT<br>5775 MOREHOUSE DR.<br>SAN DIEGO, CA 92121-1714 | X             |              |         |       |  |  |

#### **Signatures**

| By: Noreen E. Burns, Attorney-in-Fact For: Brent Scowcroft | 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 deferred stock unit represents a right to receive one share of the Company's common stock.
- Deferred Stock Units are 100% vested on the earlier of (1) the one-year anniversary of the grant date, (2) the date of the next annual meeting of stockholders of the Company that (2) occurs after the grant date, (3) death, (4) disability, or (5) a change in control. The units will be settled in shares of the Company's common stock or cash in accordance with the grant agreement on the earlier of (1) three years from the date of grant, (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.