FORM 4

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

OMB APPR	OVAL
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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

	pe Responses										n 1				
Name and Address of Reporting Person * ALEXANDER STILES BARBARA			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						
(Last) (First) (Middle) 5775 MOREHOUSE DR.			' '	3. Date of Earliest Transaction (Month/Day/Year) 03/08/2011						Officer (gi	ve title below)	Oti	ner (specify belo	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) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu				ies Acquire	d, Dispose	d of, or Ber	neficially Ow	ned			
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		if Co	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)				ted	Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				(World D	uy, 1 c.		Code	V Am	(A) o	or	0 (1		or Indirect (Instr. 4) (Instr. 4)		
Reminder: I	Report on a s								d in this fo	orm are no	t required	d to respo	nd unless tl		474 (9-02)
Reminder: I	Report on a s							containe form dis	d in this fo plays a cu ed of, or Be	orm are no rrently vali	t required id OMB c	d to respo	nd unless tl		474 (7-02)
1. Title of	2. Conversion	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, is	4. f Transac Code	tion o E S A (() C ()	warrai . Numl	ber ive es ed	containe form dis	ed in this for plays a cultiple of, or Be vertible section of the play of the	orm are no rrently vali	t required id OMB co owned	8. Price of Derivative Security (Instr. 5)	nd unless tl	f 10. Ownersh Form of Derivativ Security: Direct (E or Indirec	11. Nature of Indire Beneficie (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, is	4. f Transac Code	tion o E S A (() C ()	. Numl f f Derivating the control of	ber ive ees ed ed ed e, 4,	containe form dis red, Dispos ptions, con 6. Date Exe and Expirat	ed of, or Be vertible sec reisable ion Date t/Year)	rently validentically Ourities) 7. Title and of Underly: Securities (Instr. 3 and	t required id OMB co owned	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownersh Form of Derivativ Security: Direct (E or Indirects)	11. Nature of Indire Beneficie (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ALEXANDER STILES BARBARA						
5775 MOREHOUSE DR.	X					
SAN DIEGO, CA 92121-1714						

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Barbara T. Alexander	03/09/2011
**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.