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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
hours por rosponso	0.5					

longer subject to Section 16. Form 4 or Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may 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 Typ	e Responses)															
1. Name and Address of Reporting Person *- JACOBS PAUL E				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]								x	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director10% Owner				
(Last) (First) (Middle) 5775 MOREHOUSE DR.				3. Date of Earliest Transaction (Month/Day/Year) 11/02/2011								_x	X Officer (give title below) Other (specify below) Chairman & CEO				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year))	_X	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SAN DIEGO, CA 92121-1714												_	Form filed by More than One Reporting Person				
(City	<i>i</i>)	(State)	(Zip)				Table	I - Non	-Deriv	vative So	ecuriti	es Acquirec	l, Disposed of,	or Benefic	ially Owned		
1.Title of Security 2. Transaction Date (Month/Day/Year)				Date, if	(Instr. 8)	4. Securities Acquire Disposed of (D) (Instr. 3, 4 and 5)		D) .		Owned Followi Transaction(s)			Form:	7. Nature of Indirect Beneficial			
			(Month/Day/Year)		Code	v	Am	ount	(A) or (D)	Price	(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	ommon Stock 11/02/2011						М			00.00	` ,		151,744.00			I	by Trust
Common	Stock		11/02/2011				S ⁽²⁾		18,0	00.00		\$ 51.0943 ⁴	3 433,744.00			I	by Trust
Common	Stock											5	502,399.00			[By GRAT
Common	Stock											5	502,399.00			I	by GRAT S
Reminder: I	Report on a se	eparate line for each	class of securities be	eneficial	ly ow	vned di	rectly or inc	Pers	sons form	are no	t requ		llection of in spond unless mber.			in SEC	1474 (9-02)
			Table 1									ficially Owi	ıed				
1. Title of Derivative Security (Instr. 3)	or Exercise (Month/Day/Year) any		Execution Date, if	4. 5. Nu Transaction Deriv Code Secur (Instr. 8) Acqu Dispo		5. Nur Deriva Securi Acqui Dispo (Instr.	nber of ative	Expiration Date Ur		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported	Owners Form of Derivat Security Direct (or Indir	Benefici Ownersl (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis		Expirati Date	on	Title	Amount or Number of Shares		Transaction (Instr. 4)	(Instr. 4)

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
JACOBS PAUL E 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	X		Chairman & CEO				

Signatures

By: Lisa Murzic, Attorney-in-Fact For: Paul E. Jacobs	11/03/2011
**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) Securities held by Paul E. Jacobs and Stacy Jacobs Trustees for the Paul & Stacy Jacobs Family Trust dtd. 5/3/00.
- (2) The transaction was conducted under a 10b5-1 Plan, as defined under the Securities Exchange Act of 1934, as amended.
- (3) The sale prices for this transaction ranged from \$51.08 to \$51.10. The filer hereby agrees to provide, upon request, full information regarding the number of shares sold at each separate price.
- (4) Securities held by Harlan A. Jacobs, Trustee of The Paul E. Jacobs Grantor Retained Annuity Trust (GRAT).
- (5) Securities held by Harlan A. Jacobs, Trustee of The Stacy R. Jacobs Grantor Retained Annuity Trust (GRAT).
- (6) 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.