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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person* ALEXANDER STILES BARBARA				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]							mbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
5775 MC) DREHOUS	(First) E DR.	((Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2012					Office	er (give title belo	ow)	Other (specify	below)				
(Street) SAN DIEGO, CA 92121-1714				4. If Amendment, Date Original Filed(Month/Day/Year)							n/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)			Ta	ble I	- Non	-Deri	ivative S	Securities	s Acqu	ıired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		nth/Day/Year)				if Code (Instr. 8)		(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Benefici			
					(Moi	nth/Day/	y ear)		ode	V	Amour	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirec (I) (Instr. 4)	
Common	Stock		12/3	31/2012					A		202.0 (1)	7 A	\$ 0	3,024.1:	581 (2)		D	
Common	Stock													8,429.00			I	by Tru
Reminder:	Report on a s	separate line fo	or each	Class of securi	D eriva	ative Sec	uriti	ies Ac	quire	Personta conta the fo	ons whained in	no respo n this fo splays a	rm ar curre neficia	e not requently valid	OMB con	formation spond unlo trol numbe	ess	C 1474 (9-0
	I.			,	<i>e.g.</i> , p							tible secu				l	2 4 2	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transactio Date (Month/Day/	Year)	3A. Deemed Execution Dat any (Month/Day/Y		Code	tion	5. Numbor Of Deriv Secur Acqu (A) or Dispo of (D (Instr 4, and	ative ities ired r osed) . 3,	and Expiration Date (Month/Day/Year) A U S		Am Uno Sec	Fitle and count of derlying curities str. 3 and		9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	tive Own ty: (Instr (D) rect	
						Code	V	(A)	(D)	Date Exerc		Expiration Date	n Titl	Amount or Number of Shares				

Reporting Owners

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

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Barbara T. Alexander	01/02/2013
-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).
- 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 (1) that 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.
- (2) The total shares beneficially owned include dividend equivalent shares and are subject to the same vesting requirements as the Deferred Stock Units.
- (3) Securities held by Barbara Alexander Stiles Trustee for the Barbara Alexander Stiles Family Trust dtd. 8/12/99.

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.