## FORM 4

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

OMB APPRO	VAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response	0.4						

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 Typ	e Responses	)																
1. Name and Address of Reporting Person* GROB MATTHEW S				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 5775 MOREHOUSE DR.				3. Date of Earliest Transaction (Month/Day/Year) 06/03/2013								X Officer (give title below) Other (specify below)  EVP & Chief Technology Officer						
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
SAN DIEGO, CA 92121-1714  (City) (State) (Zip)			Table I. Non-Darivativa Securities Acquir							ired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (Instr. 8)					<u> </u>		Securities Beneficially ring Reported		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial				
			(iviolidi/Day/Ye		i cai	Code	V Am		nount (A) or (D)		Price	(msu. 3 diiu +)			or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		06/03/2013				M		5,300	0.00	A	\$ 37.99	5,300				I	by Trust
Common Stock 06/03/201			06/03/2013			S <sup>(2)</sup>		5,300.00		D	\$ 63.43	0			I	by Trust		
Common	Common Stock												9,90	2			D	
			Table II				rities Acqui	in th a cu red, D	is fori rrently isposed	m are y valid	not re d OMB r Benef	equired contro	l to re ol nur	spond u nber.		on contain form displ		1474 (9-02)
1 Tid 6	2.	3. Transaction	3A. Deemed	( <i>e.g.</i> , pu			warrants, o					1 /		At	0 D.:£	9. Number	of 10.	11 N-t
Derivative Security	Conversion or Exercise Price of Derivative Security	Date Execution Date, if	f Transaction Deriv Code Secur (Instr. 8) Acqui or Dis (D)				6. Date Exerci Expiration Dat (Month/Day/Y		Oate /Year)		of Un Secur	le and Amount derlying ities . 3 and 4)			Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivat Securit Direct of or India (s) (I)	Beneficia ive Ownersh (y: (Instr. 4) D) ect	
				Code	V	(A)	(D)	Date Exerc	isable	Expira Date	ation	Title		Amount or Number of Shares		(Instr. 4)	(Instr. 4	,)
Non- Qualified Stock Option (right to buy)	\$ 37.99	06/03/2013		М			5,300.00	(	3)	10/20	5/2016	Com	_	5,300	\$ 0	34,966	D	

### **Reporting Owners**

		Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
GROB MATTHEW S 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	1		EVP & Chief Technology Officer						

# **Signatures**

By: Jane Borneman, Attorney-in-Fact For: Matthew S. Grob	06/05/2013
-*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).
- (1) Securities held by Matthew Grob and Dawn Grob Trustees for the Matthew and Dawn Grob Trust dtd. 8/26/1999.
- (2) The transaction was conducted under a 10b5-1 Plan, as defined under the Securities Exchange Act of 1934, as amended.
- (3) The options vest 10% on the six month anniversary of the date of grant and the remaining balance vests monthly thereafter, adjusted for any previously exercised options prior to becoming an affiliate. 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.