FORM	4
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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).

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

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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

(Thin of Type Response	(5)										
1. Name and Address of Reporting Person [*] JACOBS PAUL E			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		
5775 MOREHOUS	(First) SE DR.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2014					XOfficer (give title below) Other (specify below) Chairman & CEO Other (specify below)			
SAN DIEGO, CA	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				
(City)	(State)	(Zip)		Table I - N	on-D	erivative	Securiti	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)	(Instr. 8)	tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial
		Code		v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		01/02/2014		М		300.00	А	\$ 37.29	524,152	Ι	by Trust (1)
Common Stock		01/02/2014		S ⁽²⁾		300.00	D	\$ 73.71	523,852	Ι	by Trust (1)
Common Stock									28,854	D	
Common Stock									422,904	I	By GRAT (3)
Common Stock									422,904	Ι	by GRAT S (4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)		Code	5. Number 6. D Saction of Derivative Securities (Mo		6. Date Exercisable and Expiration Date		1		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Non- Qualified Stock Option (right to buy)	\$ 37.29	01/02/2014		М			300.00	<u>(5)</u>	11/11/2017	Common Stock	300	\$ 0	106,262	Ι	by Spouse

Reporting Owners

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

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Paul E. Jacobs	01/06/2014
** Signature of Penorting 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) Securities held by Harlan A. Jacobs, Trustee of The Paul E. Jacobs Grantor Retained Annuity Trust (GRAT).
- (4) Securities held by Harlan A. Jacobs, Trustee of The Stacy R. Jacobs Grantor Retained Annuity Trust (GRAT).
- (5) 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.