## FORM 4

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

OMB APPROVAL						
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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 Type	e Responses)																
1. Name and Address of Reporting Person* CRUICKSHANK DONALD G				2. Issuer Name <b>and</b> Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 5775 MOREHOUSE DR.				3. Date of Earliest Transaction (Month/Day/Year) 04/10/2015								=	Officer (give titl	le below)	Other	(specify below	7)
(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 Person Form filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							ecurit	ies Acquir	red, Disposed of, or Beneficially Owned				
(Instr. 3)		2. Transaction Date (Month/Day/Year)		tion D	ate, if	(Instr. 8)	tion	4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5)			Owned Following Transaction(s)		,	6. Ownership Form:	Beneficial		
			(Month/Day		y ear)	Code	V	Amo		(A) or (D)		(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common S	Stock		04/10/2015				М		2,700	0.00	A	\$ 0	10,900			I	by Pension Plan (1)
Common Stock 04/10/2015		04/10/2015			F		405.0	00 ]	D	\$ 68.81	10,495			I	by Pension Plan (1)		
Common S	Stock		04/10/2015				D		1,270	0.00	D	\$ 68.81	9,225			I	by Pension Plan (1)
Reminder: R	eport on a sep	parate line for each c	lass of securities ber	neficially	y owne	ed dire	ctly or indir	Pers	form a	re no	t req		ollection of in espond unless umber.			in SEC	1474 (9-02)
			Table I				ities Acquir varrants, oj						vned				
1. Title of Derivative Security (Instr. 3)	Conversion	e (Month/Day/Year)	Execution Date, if	Transaction De Code Sec (Instr. 8) Ac		Derivat Securiti Acquire Dispose		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		(Instr. 5) B O Fe	Derivative Securities Beneficially Owned Following	Owners Form of Derivat Security Direct (	Ownershi (Instr. 4)	
				Code	V (.	A)	(D)	Date Exerc	cisable	Expira Date	ation	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indir (I) (Instr. 4	
Restricted Stock Unit	(2)	04/10/2015		M		2,	700.6206		(3)	C	<u>3)</u>	Common Stock	2,700.6206	\$ 0	2,751	D	

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
CRUICKSHANK DONALD G 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	X						

### **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Donald G. Cruickshank	04/13/2015
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 in a pension plan for the benefit of the reporting person.
- (2) Each restricted stock unit represents a right to receive one share of the Company's common stock.
- (3) Restricted Stock Units are 100% vested on the earlier of (1) April 10, 2015, (2) death, (3) disability, or (4) 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) April 10, 2015, (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.