| FORM | 4 |
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(Print or Type Responses)

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

| 1. Name and Address of VINCIQUERRA A | 2. Issuer Name and QUALCOMM II | | | · · | 1 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
|---|---|--|--------------------------------------|---------------|-------|--|-----------|--------|---|--|-------------------------|--|
| (Last) 5775 MOREHOUS | (First) E DR. | | 3. Date of Earliest Tr 07/21/2015 | ransaction (1 | Mont | h/Day/Ye | ar) | | Officer (give title below) Officer (give title below) | ther (specify bel | ow) | |
| SAN DIEGO, CA 9 | (Street) 4. If Amendment, N DIEGO, CA 92121-1714 | | | | 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) | ſ | able I - No | n-De | rivative S | Securitie | s Acqu | iired, Disposed of, or Beneficially Ow | ned | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | Execution Date, if | (Instr. 8) | | 4. Securi (A) or D (Instr. 3, | isposed o | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) | Beneficial Ownership | |
| | | | | Code | V | Amount | (D) | Price | | (Instr. 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) | | | | | | | | | | | | | | |
|---------------------------|--|--------------------------|-----------|------|---|----------|--|-------------|--|-----------------|--|--|---|------------|--|
| Security | Conversion | Date (Month/Day/Year) | · · · · · | Code | Transaction Derivative Code Securities | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities | | Derivative Security (Instr. 5) | Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form of Derivative Security: Direct (D) or Indirect (I) | Beneficial | |
| | | | | Code | v | (A) | | Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | (Instr. 4) | |
| Deferred Stock Unit | <u>(1)</u> | 07/21/2015 | | А | | 1,797.00 | | (2) | <u>(2)</u> | Common Stock | 1,797 | \$ 0 | 1,797 | D | |

Reporting Owners

| | Relationships | | | | | | |
|---|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| VINCIQUERRA ANTHONY J 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714 | Х | | | | | | |

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Anthony J. Vinciquerra

Signature of Reporting Person

07/23/2015 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) Each deferred stock unit represents a right to receive one share of the Company's common stock.
- 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 that occurs (2) 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) March 9, 2018, (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.