## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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* STERLING MICHELLE M						2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]							5	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) 03/14/2016								X Officer (give title below) Other (specify below)  EVP, Human Resources						
(Street) SAN DIEGO, CA 92121-1714				4. If	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						quir	ired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		Execut any	xecution Date, if		Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			(A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D)		Beneficial Ownership	
								Code	V	Amount	(A) or (D)	Prio	ce			or Indirect (Instr. 4 (I) (Instr. 4)		instr. 4)	
Common Stock		03/14/	/2016				S <sup>(1)</sup>		6,948.0 ( <u>2</u> )	0D	\$ 52.15	563	0			Ι		y Trust	
				Table II					t uired	he form di I, Disposed	splays	s a cur Benefic	ren tially	tly valid	OMB con	spond unle trol numbe			
(Instr. 3)	Conversion or Exercise Price of	3. Transact Date (Month/Da	Execu y/Year) any	any	d Date, if	4. Transaction Code (Instr. 8)		5.		ions, convertible secur 6. Date Exercisable and Expiration Date (Month/Day/Year)		e A U S- (I	7. Title ar Amount o Underlyir Securities (Instr. 3 a		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownershi Form of Derivative Security: Direct (D or Indirec (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)
						Code	V	(A) (				ntion T		Amount or Number of Shares					
(Instr. 3)	Price of Derivative				y/Year)			Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date Expiration Date		S (I	ecur (nstr.)	Amount or Number of	-	Owned Following Reported Transaction	y I S I on(s) (	Derivative Security: Direct (D or Indirect (I)	Owne (Instr

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
STERLING MICHELLE M 5775 MOREHOUSE DR.			EVP, Human Resources					
SAN DIEGO, CA 92121-1714			L v1, Human Resources					

## **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Michelle M. Sterling	03/15/2016
**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) The transaction was conducted under a Rule 10b5-1 trading plan.
- (2) Includes 194 shares acquired under the Company's Employee Stock Purchase Plan on January 31, 2016.
- (3) The sale prices for this transaction ranged from \$51.76 to \$52.38. The filer hereby agrees to provide, upon request, full information regarding the number of shares sold at each separate price.
- (4) Securities held by Michelle Marie Sterling, TTEE of the Michelle Marie Sterling Trust DTD 11/26/2008.

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.