# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

1. Name and Address of Reporting Person* ALEXANDER STILES BARBARA				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]							mbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 5775 MOREHOUSE DR.				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2016							y/Year)							
(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						ired, Disposed of, or Beneficially Owned								
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)				(Instr. 8)		(A) or Disposed of		of (D)	Beneficia Reported	lly Owned F Transaction	of Securities y Owned Following ransaction(s)		7. Nature of Indirect Beneficial			
				(Month	/Day/Y	(ear)		ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	C		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		12/31/2016				A	A		191 😃	<u>)</u> A	\$ 0	2,466.4	753		D		
Common Stock										28,151			I	by Trust				
			Table II - 1					quire	containe fo	ained in orm dis	n this for splays a	m are curre eficial	e not requ ntly valid	OMB con	ormation spond unle trol numbe	ss	C 1474 (9-02)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	3A. Deemed Execution Da	te, if 4.	ansacti	ion I	5.	er ative ties red sed 3, 5)	6. Da and I (Mor	nte Exer Expirationth/Day/	cisable on Date /Year)  Expiration	7. T Amo Und Secu (Ins: 4)	Amount or Number of	Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	Owners (Instr. 4) (D) rect	

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ALEXANDER STILES BARBARA 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	X					

#### **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Barbara T. Alexander	01/03/2017
**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) Represents Deferred Stock Units (DSUs) issued in lieu of payment of cash retainer fees. DSUs are 100% vested on grant date. The units will be settled in shares of the Company's common stock three years from the date of grant.
- (2) Securities held by Barbara Alexander Stiles Trustee for the Barbara Alexander Stiles Family Trust dtd. 8/12/99.

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.