# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

(	pe Responses	/												
Name and Address of Reporting Person*  LIVERMORE ANN M				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director 10% Owner				
,	(Last) (First) (Middle) 775 MOREHOUSE DR.			3. Date of Earliest Transaction (Month/Day/Year) 03/07/2017					-	Officer (gi	ive title below)	Oth	er (specify below	v)
(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 PersonForm filed by More than One Reporting Person				
	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						ied							
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if		(.	a) or Disposed of (D)		5. Amount of Securities B Owned Following Report Transaction(s) (Instr. 3 and 4)		ted (	Ownership of Form:	7. Nature of Indirect Beneficial Ownership	
				(Wolling De	ayr i cai	Co	le V A	mount (A) o		(mou, 5 and 7)		(	or Indirect (I) I) Instr. 4)	
Reminder: 1	Keport on a s							s who responed in this fo						174 (9-02)
Reminder: I	Report on a s						contain form d uired, Disp	ed in this fo splays a cu osed of, or Be	orm are no rrently val	ot required lid OMB c	d to respoi	nd unless th		174 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	3A. Deemed Execution Date, i	4. Transact	5. 1 tion of De:    Sec   Acc   (A)   Dis   of (In:	Number vivative surities quired or posed D) str. 3, 4	contain form d uired, Disp, options, co 6. Date Es and Expir (Month/D	ned in this for splays a cu osed of, or Be invertible sec tercisable ation Date	orm are no rrently val	ot required lid OMB co Owned d Amount ying	8. Price of Derivative Security (Instr. 5)	nd unless th	f 10. Ownershi Form of Derivative Security: Direct (D) or Indirec	11. Natur p of Indire Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date, i	4. Transact	5. Notion of Dec Sec (A) Dis of (	Number ivative urities quired or posed D) str. 3, 4	contain form d  uired, Disp, options, cc  6. Date E and Expir (Month/D	ed in this for splays a cu osed of, or Be nvertible sec tercisable ation Date aay/Year)	rently value of Underly Securities	ot required lid OMB co Owned d Amount ying	8. Price of Derivative Security (Instr. 5)	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownershi Form of Derivative Security: Direct (D' or Indirec	11. Nature of Indire Beneficity Ownersh (Instr. 4)

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LIVERMORE ANN M 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714	X					

#### **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Ann M. Livermore	03/09/2017
**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) Each Deferred Stock Unit represents a right to receive one share of the Company's common stock.
- (2) Deferred Stock Units are 100% vested on the grant date. The units will be settled in shares of the Company's common stock (and partially in cash if election is made within 60 days of the date of grant) in accordance with the grant agreement on the earlier of (1) third anniversary of the date of grant, (2) death, (3) disability, or (4) 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.