#### QUALCOMM INC/DE

Form 4 May 21, 2008

## FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

1(b).

Form 5 obligations may continue.

See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \* JACOBS IRWIN M

(Zip)

(First) (Middle) (Last)

5775 MOREHOUSE DR.

(Street)

(City)

SAN DIEGO, CA 92121-1714

(State)

2. Issuer Name and Ticker or Trading Symbol

QUALCOMM INC/DE [QCOM]

3. Date of Earliest Transaction (Month/Day/Year)

05/19/2008

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

\_X\_\_ Director 10% Owner X\_ Officer (give title Other (specify below)

Chairman of the Board

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or (Instr. 3) Code Disposed of (D) (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)

Code V Amount (D) Price

(A)

Securities Owned

Beneficially Following Reported Transaction(s)

6. Ownership 7. Nature of Form: Direct (D) or Indirect Beneficial (T) (Instr. 4)

Indirect Ownership (Instr. 4)

(Instr. 3 and 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. 5. Number Transaction Derivative Securities Code

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount Underlying Securitie (Instr. 3 and 4)

#### Edgar Filing: QUALCOMM INC/DE - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	(A) o Dispo	or osed of r. 3, 4,				
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour Number Shares
Non-Qualified Stock Option (right to buy)	\$ 3.51	05/19/2008		M		6,545	<u>(1)</u>	07/16/2008	Common Stock	6,54
Non-Qualified Stock Option (right to buy)	\$ 3.51	05/19/2008		M		1,155	<u>(1)</u>	07/16/2008	Common Stock	1,15
Non-Qualified Stock Option (right to buy)	\$ 3.51						<u>(1)</u>	07/16/2008	Common Stock	869,9
Non-Qualified Stock Option (right to buy)	\$ 3.51						(1)	07/16/2008	Common Stock	65,8

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JACOBS IRWIN M							
5775 MOREHOUSE DR.	X		Chairman of the Board				
SAN DIEGO, CA 92121-1714							

### **Signatures**

By: Noreen E. Burns, Attorney-in-Fact For: Irwin M. Jacobs 05/21/2008

\*\*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) Employee stock options granted under the Company's 1991 Stock Option Plan. The options vest in five equal annual installments beginning on July 17, 1999.
- (2) Stock options held by Nicholas S. Oliva, Trustee of the Joan Klein Jacobs' Grantor Retained Annuity Trust.

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.

Reporting Owners 2