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

QUALCOM	IM INC/DE										
Form 4	< <b>2</b> 000										
December 1											
FORM		STATES	SECHE	DITIES A	ND FY		NCEC	OMMISSION		PPROVAL	
	UNITED	SIAILS		shington.			NGE C		OMB Number:	3235-0287	
Check the	his box		vv as	sington	, <b>D.C. 2</b> 0	547				January 31,	
if no longer STATEMENT OF CHANG				GES IN	GES IN BENEFICIAL OWNERSHIP O				Expires:	2005	
subject t Section							Estimated average burden hours per				
	Form 4 or						response	0.5			
Form 5							•	e Act of 1934,			
obligatio may con	Section 170			•	•			1935 or Section	1		
See Inst		30(h)	of the In	vestment	Compan	y Ac	t of 194	-0			
1(b).											
(Print or Type	Responses)										
· • • • •											
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and Ticker or Trading 5. Rela					•	. Relationship of Reporting Person(s) to					
Johnson Margaret L Symb				ymbol				Issuer			
			QUALO	COMM II	NC/DE [	QCO	M]	(Check all applicable)			
(Last)	(First) (.	Middle)	3. Date of	f Earliest T	ransaction			(Chied)	a un applicable	·)	
× ×				Month/Day/Year)				Director	Owner		
5775 MOR	EHOUSE DR.		12/15/2	008				XOfficer (give below)	below)	er (specify	
								Pro	esident, QIS		
			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mor	ed(Month/Day/Year)				Applicable Line) _X_Form filed by One Reporting Person			
	CA 02121 17	1.4						_X_ Form filed by C Form filed by M	1 0		
SAN DIEG	O, CA 92121-17	14						Person		1 0	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deer	ned	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Executio any	n Date, if		on(A) or D	-		Securities	Ownership	Indirect	
(Instr. 3)		Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned	Form: Direct (D) or	Beneficial Ownership		
		(11101111)1	<i>suj, 10ul)</i>	(1115411-0)				Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price	(			
Common Stock	12/15/2008			M <u>(1)</u>	200	А	\$ 22.23	18,651	D		

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 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)

### **Reporting Owners**

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	ransactionof ode Derivative		Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	/ (A)	) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-Qualified Stock Option (right to buy)	\$ 22.23	12/15/2008		М		200	(2)	11/27/2013	Common Stock	200

## **Reporting Owners**

Reporting Owner Name / Address				
I O	Director	10% Owner	Officer	Other
Johnson Margaret L 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714			President, QIS	
Signatures				
By: Noreen E. Burns, Attorney- Johnson	-in-Fact F	for: Margare	t L.	12/15/2008
<u>**</u> Signature of Rep	orting Person	n		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 10b5-1 Plan, as defined under the Securities Exchange Act of 1934, as amended.
- Employee stock options granted under the Company's 2001 Stock Option Plan. The options vest 10% on the six month anniversary of the(2) date of grant and the remaining balance vests monthly thereafter, adjusted for any previously exercised options prior to becoming an affiliate. The option is fully vested five years after the date of grant.

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.