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

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Form 4									
November							0145.4		
FORM		STATES	SECU	DITIES	AND EXCHANGE	COMMISSION	т	PPROVAL	
	UNITED	SIAILS			, D.C. 20549		Number:	3235-0287	
	Check this box if no longer STRATED (EDVID OF CHADICES IN DEDVIDED OF							January 31,	
subject		AENT O	F CHAI		<b>BENEFICIAL OV</b>	WNERSHIP OF	Expires: Estimated	2005 average	
Section Form 4	ion 16. SECURITIES							urs per	
Form 5		rsuant to S	Section	16(a) of th	ne Securities Excha	nge Act of 1934	response	. 0.5	
obligati	ons Section 17(				ding Company Act		on		
may co See Inst	nunue.			•	t Company Act of 1				
1(b).									
(Print or Type	Responses)								
(I fint of Type	(Responses)								
1. Name and	Address of Reporting	Person <sup>*</sup>	2. Issu	er Name <b>an</b>	d Ticker or Trading	5. Relationship of	of Reporting Per	rson(s) to	
SULLIVAN DANIEL L Symbol					-	Issuer			
				COMM I	NC/DE [QCOM]	(Check all application		e)	
(Last) (First) (Middle)			3. Date of Earliest Transaction			(ent	en un applicaci		
				Day/Year)		Director     10% Owner       X Officer (give title     Other (specify below)			
			11/10/2	2006					
						Executive	VP, Human Re	sources	
			4. If Am	endment, D	ate Original	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
			Filed(Mo	onth/Day/Yea	r)				
SAN DIEC	CO CA 02121 17	14					More than One R		
SAN DIEC	GO, CA 92121-17	14				Person			
(City)	(State)	(Zip)	Tat	ole I - Non-	Derivative Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	Execution Date, if		3. 4. Securities		5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)				nAcquired (A) or		Form: Direct	Indirect	
		any (Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)		•	(D) or Indirect (I)	Ownership	
		(	J)	(	(	Following	(Instr. 4)	(Instr. 4)	
					(A)	Reported			
					or	Transaction(s) (Instr. 3 and 4)			
				Code V	Amount (D) Price	(mou. 5 and +)			

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amou
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Secur
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8		Acquired (A Disposed o (Instr. 3, 4, 5)	f (D)				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am Nui Sha
Non-Qualified Stock Option (right to buy)	\$ 34.83	11/10/2006		А		175,000		<u>(1)</u>	11/09/2016	Common Stock	17

## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
SULLIVAN DANIEL L 5775 MOREHOUSE DR. SAN DIEGO, CA 92121-1714			Executive VP, Human Resources	
Signatures				

# By: Noreen E. Burns, Attorney-in-Fact For: Daniel L. Sullivan

\*\*Signature of Reporting Person

Date

11/14/2006

## **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 options vest 10% on the six month anniversary of the date of grant and the remaining balance vests monthly thereafter. 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.