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

| QUALCOM<br>Form 4<br>June 07, 200  |   |               |   |   |                           |   |  |  |                          |  |  |  |  |
|--|---|---------------|---|---|---------------------------|---|--|--|--------------------------|--|--|--|--|
| FORM   |   | STATES        |   |   |                           |   | COMMISSIO  | -  | PPROVAL                  |  |  |  |  |
| if no long<br>subject to<br>Section 1<br>Form 4 o<br>Form 5<br>obligatio<br>may cont | Washington, D.C. 20549Check this box<br>if no longer<br>subject to<br>Section 16.Form 4 or<br>Form 5<br>obligations<br>may continue.<br>See InstructionForm 5<br>obligations<br>may continue.<br>See InstructionSee Instruction |               |   |   |                           |   |  | Expires:<br>Estimated<br>burden hou<br>response                      | urs per                  |  |  |  |  |
| (Print or Type I   | Responses)  |               |   |   |                           |   |  |  |                          |  |  |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>CRUICKSHANK DONALD G             |   |               | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol     |   |                           |   | 5. Relationship of Reporting Person(s) to Issuer   |  |                          |  |  |  |  |
| (Last)   | (First) (   | Middle)       | QUALCOMM INC/DE [QCOM]<br>3. Date of Earliest Transaction |   |                           |   | (Cho   | eck all applicabl  | k all applicable)        |  |  |  |  |
| 5775 MOREHOUSE DR.   |   |               | (Month/Day/Year)<br>06/03/2005                            |   |                           |   | X_ Director 10% Owner<br>Officer (give title Other (specify<br>below) below)                                       |  |                          |  |  |  |  |
| SAN DIEG   | 4. If Amendment, Date Original Filed(Month/Day/Year)  |               |   | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul> |                           |   |  |  |                          |  |  |  |  |
| (City)   | (State)   | (Zip)         | Tab   | le I - Non-J  | Derivative                | Securities A  | cquired, Disposed  | of, or Beneficia   | llv Owned                |  |  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year)   |               | ed<br>Date, if  | 3.<br>Transactio<br>Code<br>(Instr. 8)  | 4. Securit                | ies<br>(A) or<br>of (D)                                 | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect |  |  |  |  |
| Reminder: Rep  | oort on a separate line   | e for each cl | ass of sec  | urities bene  | Perso<br>inforn<br>requir | ns who rest<br>nation cont<br>ed to resp<br>sys a curre | or indirectly.<br>spond to the colle<br>lained in this forn<br>ond unless the fo<br>ntly valid OMB co              | n are not<br>rm  | SEC 1474<br>(9-02)       |  |  |  |  |

# 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 Amour |
|-------------|-------------|---------------------|--------------------|------------|--------------|-------------------------|--------------------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | orDerivative | Expiration Date         | Underlying Securit |
| Security    | or Exercise |                     | any                | Code       | Securities   | (Month/Day/Year)        | (Instr. 3 and 4)   |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Acquired (A) |                         |                    |

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|   | Derivative<br>Security |            |      |   | or Dispose<br>(D)<br>(Instr. 3, 4<br>and 5) |     |                     |                    |                 |                           |
|---|------------------------|------------|------|---|---|-----|---------------------|--------------------|-----------------|---------------------------|
|   |                        |            | Code | v | (A)   | (D) | Date<br>Exercisable | Expiration<br>Date | Title           | Amo<br>or<br>Num<br>of Sł |
| Non-Qualified<br>Stock Option<br>(right to buy) | \$ 38.25               | 06/03/2005 | А    |   | 40,000                                      |     | <u>(1)</u>          | 06/02/2015         | Common<br>Stock | 40,0                      |

### **Reporting Owners**

| Reporting Owner Name / Address   |            |           |         |       |  |
|--|------------|-----------|---------|-------|--|
| reporting of the runner tradeos  | Director   | 10% Owner | Officer | Other |  |
| CRUICKSHANK DONALD G<br>5775 MOREHOUSE DR.<br>SAN DIEGO, CA 92121-1714 | Х          |           |         |       |  |
| Signatures   |            |           |         |       |  |
| By: Noreen E. Burns, Attorney-i  | 06/06/2005 |           |         |       |  |

Cruickshank

\*\*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) The options vest 20% on the one year 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.