

(Print or Type Responses)

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

OMB APPROVAL

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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

Form 5 obligations may Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment continue. See

Instruction 1(h)

Company Act of 1940

1. Name and Address of Reporting Perso SODHANI ARVIND		2. Issuer Name an INTEL CORP [Tradir	ng Symbo	l				
INTEL CORPORATION, 2200 N COLLEGE BLVD.	(TOOTON)	3. Date of Earliest 7 10/28/2013	Transaction (Mont	h/Day/Yea	ar)			ther (specify belo	ow)
SANTA CLARA, CA 95054		4. If Amendment, Γ	Oate Original	Filed	(Month/Day	/Year)		6. Individual or Joint/Group Filing(Check _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person		e)
(City) (State)	(Zip)		Table I	- Non	-Derivati	ve Secu	rities Acq	uired, Disposed of, or Beneficially Own	ed	
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transact Code (Instr. 8)	ion	4. Securi or Dispo (Instr. 3,	sed of (I 4 and 5)))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)	
Common Stock	10/28/2013		S		5,730	D	\$ 24.38	100,000	D	
Common Stock	10/28/2013		M		86,295	A	\$ 21.085	186,295	D	
Common Stock	10/28/2013		S		86,295	D	\$ 24.45	100,000	D	
Common Stock								39.967	I	By Employee Benefit Plan Trust
Reminder: Report on a separate line for e	ach class of securities ben	eficially owned dire	ctly or indire	ectly						
recommed. Report on a separate fille for c	den class of securities ben	oned unc	cay or man	Pers	form are	e not re	quired to	e collection of information containe o respond unless the form displays number.		C 1474 (9-02)
	Table I	I - Derivative Secu	-		-		•	Owned		

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1. Title of	2.	3. Transaction	3A. Deemed	4.		5. N	umber of	6. Date Exercisab	le and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	Deri	vative	Expiration Date		of Underlyii	ng	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Secu	ırities	(Month/Day/Year	·)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acq	uired (A)			(Instr. 3 and	4)	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or D	isposed						Owned	Security:	(Instr. 4)
	Security					of (I	D)						Following	Direct (D)	
						(Inst	r. 3, 4,						Reported	or Indirect	
						and	5)						Transaction(s)	(I)	
											Amount		(Instr. 4)	(Instr. 4)	
											or				
								Date Exercisable	Expiration	Title	Number				
								Date Exercisable	Date	Title	of				
				Code	v	(A)	(D)				Shares				
						()	(-)								
Employee															
Stock										Common					
Option	\$ 21.085	10/28/2013		M			86,295	01/24/2012(1)	01/24/2018	Common Stock	86,295	\$ 0	86,295	D	
(Right to										Stock					
Buy)															
2,															

Reporting Owners

Reporting Owner Name / Address			Relationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
SODHANI ARVIND INTEL CORPORATION 2200 MISSION COLLEGE BLVD. SANTA CLARA, CA 95054			EXEC. VP; PRES. INTEL CAPITAL	

Signatures

/s/ Wendy Yemington, attorney-in-fact	10/29/2013
**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 option vests in four equal annual installments beginning on the first anniversary of the grant date.

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.