FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)										
1. Name and Address of Reporting Person $\stackrel{*}{-}$ Yeary Frank D	2. Issuer Name and Ticker or Trading Symbol INTEL CORP [INTC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
C/O FDY, CAMBERVIEW PARTNI LLC, 650 CALIFORNIA ST, 31ST I	3. Date of Earliest Transaction (Month/Day/Year) 09/29/2017							her (specify belo	ow)	
(Street) SAN FRANCISCO, CA 94108	4. If Amendment, Date Original Filed(Month/Day/Year)						Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
Title of Security 2. Transaction Date (Month/Day/Year		Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
		(Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	

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 $$\operatorname{SEC}\ 1474\ (9\text{-}02)$$ 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	3A. Deemed	4.		5. Number	of	6. Date Exer	cisable	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	1 Derivative		and Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities (Month/Day/Year)		/Year)	Securities		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acquired (A)			(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or Dispose	d of						Owned	Security:	(Instr. 4)
	Security					(D)							Following	Direct (D)	
						(Instr. 3, 4,	,						Reported	or Indirect	
						and 5)							Transaction(s)	(I)	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration		or				
								Exercisable		Title	Number				
				Code	V	(A)	(D)				of Shares				
Phantom Stock Units	<u>(1)</u> .	09/29/2017		A		919.117		<u>(2)</u> .	.(2).	Common Stock	919.117	\$ 38.08	2,809.015 (<u>3</u>).	D	

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Yeary Frank D C/O FDY, CAMBERVIEW PARTNERS, LLC 650 CALIFORNIA ST, 31ST FL SAN FRANCISCO, CA 94108	X						

Signatures

/s/ Brian Petirs, attorney-in-fact	10/03/2017			
**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) Conversion rate is 1-for-1.
- (2) Date Exercisable and Expiration Date are the reporting person's retirement date, which is currently unknown.
- (3) Includes 14.563 shares acquired via dividend reinvestment in September 2017.

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.