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

(Fillit of Type Kespolise	28)										
1. Name and Address of Yeary Frank D	of Reporting Pe	rson *	2. Issuer Name : INTEL CORP		or T	rading Syı	nbol		5. Relationship of Reporting Person (Check all applie X Director		r
C/O INTEL CORF		2200 MISSION	3. Date of Earlies 10/01/2019	t Transactio	on (N	Ionth/Day	/Year)			Other (specify b	pelow)
SANTA CLARA,	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	7	Гable I - N	on-D	erivative	Secur	ities Acqui	red, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)			2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Instr. 8)	v	4. Securi (A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Common Stock		10/01/2019		S		1,809 (1)	D	\$ 50.9164 (2).	64,458	I	By Family Trust
Common Stock		10/01/2019		S		700 (1)	D	\$ 51.875 (3)	63,758		By Family Trust
Reminder: Report on a	separate line fo	or each class of secur	rities beneficially ov	vned direct	lv or	indirectly					

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Persons who respond to the collection of information

Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		of Deriv Secur Acqu (A) o Dispo of (D (Instr	rative rities ired rosed) . 3,	6. Date Exer and Expirati (Month/Day	on Date /Year)	Amor Unde Secur	unt of rlying	Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	V	(A)	,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

Poposting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director 10% Own		Officer	Other	
Yeary Frank D C/O INTEL CORPORATION 2200 MISSION COLLEGE BLVD SANTA CLARA, CA 95054	X				

Signatures

/s/ Brian Petirs, attorney-in-fact	10/03/2019
**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) This transaction was made pursuant to trading instructions adopted by the reporting person's family trust on May 10, 2019, that are intended to comply with Rule 10b5-1(c). This transaction was executed in multiple trades at prices ranging from \$50.52 to \$51.25. The price reported above reflects the weighted average sale price. The reporting
- (2) person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
 - This transaction was executed in multiple trades at prices ranging from \$51.56 to \$52.18. The price reported above reflects the weighted average sale price. The reporting
- (3) person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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.