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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

obligations may continue. See Instruction 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 of Type Responses)												
1. Name and Address of Rep SHAW JANE E	I	2. Issuer Name and INTEL CORP [IN		ading	Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
1 LARCH DRIVE	(First)		3. Date of Earliest Tra 12/31/2003	insaction (M	onth/	Day/Year)				ther (specify belo	ow)	
ATHERTON, CA 9402	4	4. If Amendment, Dat	e Original F	iled(M	fonth/Day/Ye	ear)	6. 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 - 1	Non-I	Derivative	Securiti	uired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)	on	4. Securi (A) or Di (Instr. 3,	•		Owned Following Reported Transaction(s)	Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
COMMON									148,512	I	FAMILY TRUST ⁽¹⁾ .	

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.

SEC 1474 (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	3A. Deemed	4.		5.		Date Exercisab	le and Expiration	7. Title and A	mount of	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	Numb	oer	Date		Underlying Se	curities	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)	(Instr. 3 and 4))	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Deriv	ative					(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities						Owned	Security:	(Instr. 4)
	Security					Acqu	ired						Following	Direct (D)	i
						(A) or	r						Reported	or Indirect	i
						Dispo	sed						Transaction(s)	(I)	i
						of (D))						(Instr. 4)	(Instr. 4)	i
						(Instr.	. 3,								i
						4, and	15)								
											Amount				
											or				i
								Date Exercisable	Expiration Date		Number				i
											of				i
				Code	V	(A)	(D)				Shares				i
DI (. ,									
Phantom								(2)	(2)	~~~					i
Share	\$ 0 (2).	12/31/2003		Α		470		08/08/1988(3)	08/08/1988(2)	COM.STK	470	\$31.89	8,303	D	i
Units															

Reporting Owners

Deporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SHAW JANE E 1 LARCH DRIVE ATHERTON, CA 94027	X							

Signatures

JANE E. SHAW 01/05/2004

"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) Includes 16.807 shares acquired under the Intel Corporation Dividend Reinvestment Plan between September and December 2003.
- (2) Conversion rate is 1-for-1. New SEC software requires a dollar amount; use zeros per SEC.

(3) Date Exercisable and Expiration Date are the reporting officer's retirement date which is currently unknown. New SEC software requires a date; use 8/8/1988 for both dates per SEC.

Remarks:

Dr. Shaw holds 155,000 options with the right to buy Intel Corporation common stock.

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.