# FORM 4

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b)

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

OMB APPROVAL
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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

(Time of Type Responses)												
1. Name and Address of Reporting Person - GELSINGER PATRICK P			2. Issuer Name and Ticker or Trading Symbol INTEL CORP [INTC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _X_Officer (give title below) SR VICE PRES DIG ENT GRP			
(Last) (First) (Middle) INTEL CORPORATION, 2200 MISSION COLLEGE BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 04/21/2006									
			4. If Amendment, Date Original Filed(Month/Day/Year) 04/25/2006						6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Ferson Form filed by More than One Reporting Person			
(City)	(State) (Zi	))	Table I - Non-Derivative Securities Acqu						aired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)		2. Transaction Da (Month/Day/Year		3. Transaction (Instr. 8)	Code	Disposed of (D)			(Instr. 3 and 4) Fo Di or		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)		
COMMON		04/21/2006		М		150,000	А	\$ 11.93	402,551	D		
COMMON		04/21/2006		S		150,000	D	\$ 19.07	253,468	D		
COMMON									77,477	I	Joint Tenant Self and Spouse	
COMMON									4,869	I	By Trust for Daughter	
COMMON									5,035	Ι	By Trust for Son	
COMMON									6,269	Ι	By Trust for Son	
COMMON									6,409	Ι	By Trust for Son	
COMMON									1,168	I	By Employee Benefit Plan Trust	

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.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative	2. Conversion or	3. Transaction Date	3A. Deemed	4. Transaction C	Code	le 5. Number of Derivative		6. Date Exercisable and		7. Title and Amount of Underlying		8. Price of	9. Number of	10.	11. Nature
Security	Exercise Price of	(Month/Day/Year)	Execution Date, if	(Instr. 8)		Securities Acquired (A) or		Expiration Date		Securities		Derivative	Derivative	Ownership	of Indirect
(Instr. 3)	Derivative		any			Disposed of (D)		(Month/Day/Year)		(Instr. 3 and 4)		Security	Securities	Form of	Beneficial
	Security		(Month/Day/Year)			(Instr. 3, 4, and 5)						(Instr. 5)	Beneficially	Derivative	Ownership
												Owned	Security:	(Instr. 4)	
													Following	Direct (D)	
								Date	Expiration				Reported	or Indirect	
								Exercisable Date		Title	Amount or Number of Shares		Transaction(s)	(I)	
				Code	V	(A)	(D)	Exercisable	Date				(Instr. 4)	(Instr. 4)	

## **Reporting Owners**

Reporting Owner Name / Address		Relationships								
		Director	10% Owner	Officer	Other					
	GELSINGER PATRICK P INTEL CORPORATION 2200 MISSION COLLEGE BLVD. SANTA CLARA, CA 95054			SR VICE PRES DIG ENT GRP						

## Signatures

PATRICK P. GELSINGER	09/21/2007	
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).

#### **Remarks:**

The codes in Table I, column 4, reflected in this person's original Form 4 were incorrect.

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.