FORM 4	
Check this box if no	ī

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

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

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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

(Print or Type Respon	ses)													
1. Name and Address SWAN ROBERT	of Reporting Person <sup>*</sup> HOLMES	1	2. Issuer Name and NTEL CORP [I]		ading	s Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner						
2200 MISSION C	COLLEGE BLVD.		<ol> <li>Date of Earliest Tr 02/05/2019</li> </ol>	ansaction (N	fonth/	Day/Year	)		X_Officer (give title below)Other (specify below) CEO					
SANTA CLARA	(Street) , CA 95054	2	4. If Amendment, Date Original Filed(Month/Day/Year)       6. Individual or Joint/Group Filing(Check Ap         _X_Form filed by One Reporting Person											
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security		2. Transaction	2A. Deemed	3. Transacti	ion	4. Securi	ties Acqu	ired	5. Amount of Securities Beneficially	6.	7. Nature			
(Instr. 3)		Date	Execution Date, if Code		(A) or Disposed of (D)		(D)	Owned Following Reported	Ownership	of Indirect				
		(Month/Day/Year)	any	(Instr. 8)		(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial			
			(Month/Day/Year)	Year)					(Instr. 3 and 4)	Direct (D)	Ownership			
										or Indirect	(Instr. 4)			
							(A) or			(I)				
				Code	V	Amount	(D)	Price		(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 in SEC 1474 (9-02) 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.	, pu	ts, calls, warr	ants	, options, coi	nvertible se	curities)					
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number of	f	6. Date Exer	rcisable	7. Title and	Amount of	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac	tion	Derivative		and Expirati	on Date	Underlying	Securities	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(Month/Day	/Year)	(Instr. 3 and	4)	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	)	Acquired (A)	) or					(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Disposed of	(D)						Owned	Security:	(Instr. 4)
	Security					(Instr. 3, 4, a	nd						Following	Direct (D)	
						5)							Reported	or Indirect	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
Phantom Stock Units	(1).	02/05/2019		А		6,225.015		<u>(2)</u>	<u>(2)</u>	Common Stock	6,225.015	\$ 50.01	15,990.362	D	

## **Reporting Owners**

Demosting Original Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SWAN ROBERT HOLMES 2200 MISSION COLLEGE BLVD. SANTA CLARA, CA 95054	Х		CEO					

### Signatures

/s/ Brian Petirs, attorney-in-fact 02/

02/06/2019 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) Each phantom stock unit represents the right to receive the cash value of one share of Intel common stock.
- (2) Phantom stock units are acquired under the Intel Sheltered Employee Retirement Plan Plus and are payable in cash following termination of the reporting person's employment. The reporting person may transfer the phantom stock units into an alternative investment account under the plan.

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.