INTEL CORP Form 4 April 25, 2005

FORM 4

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

OMB 3235-0287 Number:

burden hours per

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

response...

5. Relationship of Reporting Person(s) to

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

GELSINGE	Symbol	Symbol INTEL CORP [INTC]			(Check all applicable) Director 10% Owner X Officer (give title Other (specify below)		
(Last) INTEL COR MISSION C	(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 04/21/2005					
SANTA CL.		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
(City)	p) Table	I - Non-De	rivative Securities Acq	Person [uired, Disposed of	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)

Code V Amount (D) Price

77,477 Ι Tenant Self and Spouse Trust for Ι 6,669 Daughter Trust for 6,835

D

Joint

252,551 (1)

COMMON

COMMON

COMMON

COMMON

Son

COMMON

Trust for 8,069 I Son

Edgar Filing: INTEL CORP - Form 4

COMMON	8,209	I	Trust for Son
COMMON	1,152	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.

SEC 1474

(9-02)

 $\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Code	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Y	5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shar	
Employee Option (right to buy)	\$ 23.16	04/21/2005	A	31,250	04/21/2006	04/21/2012	COM.STK	31,25	
Employee Option (right to buy)	\$ 23.16	04/21/2005	A	31,250	04/21/2007	04/21/2012	COM.STK	31,25	
Employee Option (right to buy)	\$ 23.16	04/21/2005	A	31,250	04/21/2008	04/21/2012	COM.STK	31,25	
Employee Option (right to buy)	\$ 23.16	04/21/2005	A	31,250	04/21/2009	04/21/2012	COM.STK	31,25	

Reporting Owners

Reporting Owner Name / Address Relationships

Reporting Owners 2

Edgar Filing: INTEL CORP - Form 4

Director 10% Owner Officer Other

GELSINGER PATRICK P INTEL CORPORATION 2200 MISSION COLLEGE BLVD. SANTA CLARA, CA 95052

SENIOR VICE PRESIDENT

Signatures

PATRICK P. 04/22/2005 GELSINGER

**Signature of Reporting Date
Person

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 1,031 shares acquired under the Intel Corporation Stock Participation Plan during February, 2005.
- (2) Not a required reportable field..

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.

Signatures 3