BRYANT ANDY D Form 4/A

August 08, 2011

FORM 4

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue. See Instruction

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

burden hours per response...

5. Relationship of Reporting Person(s) to

1,600

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

BRYANT ANDY D				2. Issuer Name and Ticker or Trading Symbol				ıng	Issuer				
				INTEL	INTEL CORP [INTC]					(Check all applicable)			
(Last) (First) (Middle)				3. Date of	f Earliest T	ransaction			(Chest an application)				
INTEL CORPORATION, 2200					(Month/Day/Year) 07/25/2011				_X_ Director 10% Owner X Officer (give title Other (specify below)				
MISSION COLLEGE BLVD.				0112312011									
(Street)				4. If Amo	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
					Filed(Month/Day/Year)				Applicable Line)				
SANTA CLARA, CA 95054				07/27/2011					_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Tit Secu (Inst	rity	2. Transaction (Month/Day/Yo	emed on Date, if Day/Year)	Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				5. Amount of Securities Ownership Beneficially Form: Direct Owned (D) or Following Indirect (I) Reported (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)				
Con Stoo	nmon ck	07/25/2011			F	2,205 (1) (2)	D	\$ 23.04	273,698	D			
Con	nmon ck								1,000	I	By Daughter		
Con	nmon ck								2,807.106	I	By Employee Benefit Plan Trust		
Con	nmon								1 600	Ī	By Son		

By Son

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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)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans

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

	 Title of 	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration D	ate	Amou	nt of	Derivative	
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	
		Derivative				Securities			(Instr.	3 and 4)		
		Security				Acquired						
		·				(A) or						
						Disposed						
						of (D)						
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date	Expiration		or		
							Exercisable	Date		Number		
										of		
					Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BRYANT ANDY D INTEL CORPORATION 2200 MISSION COLLEGE BLVD. SANTA CLARA, CA 95054

X

Vice Chmn, Exec VP, TMES, CAO

Signatures

/s/ Wendy Yemington, attorney-in-fact 08/08/2011

**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) Shares withheld for payment of tax liability.
- (2) This amended Form 4 is filed to correct the number of shares withheld for payment of tax liability.

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.

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