# FORM 4

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

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

(Print or Type Responses)

#### 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

1. Name and Address of Reporting Person * ANDERSON JAMES ROBERT			2. Issuer Name and Ticker or Trading Symbol ADVANCED MICRO DEVICES INC [AMD]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X_ Officer (give title below) SVP & GM, CG  6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
ONE AMD PLACE (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/24/2017											
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)											
SUNNYVALE, CA 94085  (City) (State) (Zip)														
` •					Table I - Non-Derivative Securities Acqu					T T				
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	(A) or Disposed o (Instr. 3, 4 and 5)		of (D) Benefic Reporte		ount of Securities cially Owned Following ted Transaction(s) 3 and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
				(Wonth Day/ Tear)	Code	V	Amount	(A) or (D)	Price	(msu. 3	anu +)		or Indirect (Instr. 4) (I) (Instr. 4)	
Common	Stock		03/24/2017		S <u>(1)</u>	2	20,000	D :	\$ 14.05 (2)	340,33	34		D	
uncour, or r	indirectly.			ities beneficially ov		conta	ined in	this fo	rm are	not req	ection of in	spond unles	s	1474 (9-02
	muncetry.			Derivative Securi	ties Acqui	conta the fo red, Dis	ined in rm dis sposed o	this fo plays a of, or Be	rm are curre neficia	not req ntly valid	uired to re d OMB cor	formation spond unles itrol number.	s	1474 (9-02
		3 Transaction		Derivative Securi (e.g., puts, calls, v	ties Acqui	the fo red, Dis	ined in rm dis sposed o conver	this fo plays a of, or Be tible sec	rm are curre neficia urities	e not req ntly valid ally Owne	uired to re d OMB cor	spond unles	s	, ,
1. Title of		3. Transaction Date (Month/Day/\footnote{1}	3A. Deemed Execution Dat Year)	Derivative Securi (e.g., puts, calls, v 4. e, if Transaction 1 Code (ear) (Instr. 8)	ties Acqui	the fored, Dispetions, 6. Date and Ex	ined in rm dis sposed o	of, or Be tible sec	neficia urities 7. Tit Amo Unde Secur	e not req ntly valid ally Owned ) alle and unt of erlying	uired to re d OMB cor	spond unles	s	11. Naturof Indire Beneficia Ownersh (Instr. 4)

## **Reporting Owners**

D (1 0 N /411	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ANDERSON JAMES ROBERT ONE AMD PLACE SUNNYVALE, CA 94085			SVP & GM, CG				

### **Signatures**

/s/ James Robert Anderson	03/27/2017
**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) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 18, 2016.
- The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$13.845 to \$14.17 per share, inclusive. The (2) reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

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.