Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations may

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may 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 Respons	es)												
1. Name and Address HERB ROBERT I		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 10% Owner					
ADVANCED MIC PLACE	(First) CRO DEVICES, INC.	ONTEAND	. Date of Earliest Tra 0/31/2003	ansaction (M	onth/l	Day/Year)		X_Officer (give title below)Other (specify below) Ex VP, Chf Sales & Mkt Officer					
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) SUNNYVALE, CA 94088-3453								6. Individual or Joint/Group Filing(Check Applicable Line) _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. Title of Security		2. Transaction	2A. Deemed 3. Transaction 4. Securities Acquired					ired	5. Amount of Securities Beneficially	6.	7. Nature		
(Instr. 3)		Date	Execution Date, if Code		(A) or Disposed of (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)					(Instr. 3 and 4)		Ownership			
									1	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

	( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	er	6. Date Exercisab	le and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac	tion	of Deriva	tive	Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securitie	s	(Month/Day/Year	.)	Securities Security		Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	)	Acquired			(Instr. 3 and 4) (Instr. 5)		Beneficially	Derivative	Ownership		
	Derivative					(A) or							Owned	Security:	(Instr. 4)
	Security					Disposed	of						0	Direct (D)	
						(D)								or Indirect	
						(Instr. 3,	4,						Transaction(s)		
						and 5)							(Instr. 4)	(Instr. 4)	
											Amount				
									Expiration		or				
								Date Exercisable	Date	Title	Number				
									Date		of				
				Code	V	(A)	(D)				Shares				
Employee										0					
Stock	\$15.2	10/31/2003		А		19,791		12/31/2004(1)	10/31/2013	Common Stock	19,791	(2)	19,791	D	
Option						.,,,,		12/31/2004		Stock	.,	<u> </u>	.,,,,		

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director 10% Owner		Officer	Other				
HERB ROBERT R ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453			Ex VP, Chf Sales & Mkt Officer					

### Signatures

Hollis O'Brien by power of attorney

11/04/2003

# **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) Grant of option to buy 19,791 shares of common stock to vest as follows: 33 1/3% on 5/1/04 then monthly through 12/31/04.

(2) Option grant

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.