FORM 4
Check this box if no
longer subject to
Section 16 Form 4 or

longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(Drint or Type D

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

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SEC 1474 (9-02)

### 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 I MCCOY THOMAS M	2. Issuer Name and ADVANCED MI				[AMD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) ADVANCED MICRO DEVI AMD PLACE	(Middle) CES, INC., ONE	3. Date of Earliest Tr 12/15/2008	ansaction (M	1onth/	/Day/Year	.)	X_Officer (give title below) Other (specify below) EVP, Legal, Corp & Pub Affairs				
(Street) SUNNYVALE, CA 94088-34	4. If Amendment, Da	te Original I	Filed(N	Month/Day/Y	(ear)	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. Transacti	ion	4. Securi	ties Acqu	ired	5. Amount of Securities Beneficially	6.	7. Nature	
(Instr. 3)	Execution Date, if	Date, if Code			isposed of	f (D)	Owned Following Reported	Ownership	of Indirect		
	ar) any	(Instr. 8)		(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial		
		(Month/Day/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 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. Number of		6. Date Exercisable and		7. Title and Amount of		8. Price of 9. Num	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Derivative		Expiration 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)						(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or Disposed of							Owned	Security:	(Instr. 4)
	Security					(D)							Following	Direct (D)	
					(Instr. 3, 4,							Reported	or Indirect		
						and 5)							Transaction(s)	· /	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration	Title	or				
								Exercisable	Date	The	Number				
				Code	V	(A)	(D)				of Shares				
Stock Option Grant	\$ 2.21	12/15/2008		А		150,000		<u>(1)</u>	12/15/2015	Common Stock	150,000	\$ 0	150,000	D	

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
MCCOY THOMAS M ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453			EVP, Legal, Corp & Pub Affairs					

## Signatures

Faina Medzonsky By Power of Attorney

Signature of Reporting Person

12/16/2008 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) This option vests 50% on 12/15/2009 then 50% on 12/15/2010.

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.