FORM /
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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).

## 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

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 Response	es)											
1. Name and Address of RIVET ROBERT.	2. Issuer Name and ADVANCED M			0 5		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
ADVANCED MIC AMD PLACE	3. Date of Earliest T 02/15/2009	ransaction (N	Montł	n/Day/Yea	r)	X_Officer (give title below)Other (specify below) EVP, CFO, Chf Ops & Admin Off						
SUNNYVALE, CA	(Street) A 94088-3453		4. If Amendment, Da	ate 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 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			5. Amount of Securities Beneficially	6.	7. Nature	
(Instr. 3)	tr. 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)	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 SEC 1474 (9-02) 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. Numb	er	6. Date Exer	cisable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of Derivative		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(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						Security:	(Instr. 4)		
	Security					Disposed of						0	Direct (D)		
						(D)							*	or Indirect	
						(Instr. 3, 4,							Transaction(s)	< / s	
						and 5)							(Instr. 4)	(Instr. 4)	
											Amount				
								Date	Expiration		or				
								Exercisable	*		Number				
				~ .					Dute		of				
				Code	V	(A)	(D)				Shares				
Stock										C					
Option	\$ 2.42	02/15/2009		А		55,000		(1)	02/15/2016	Common Stock	55,000	\$ 0	55,000	D	
Grant						,		_		Stock	,				

# **Reporting Owners**

	Relationships								
Reporting Owner Name / Address		10% Owner	Officer	Other					
RIVET ROBERT J ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453			EVP, CFO, Chf Ops & Admin Off						

## **Signatures**

Robert J. Rivet \*\*\*Signature of Reporting Person 02/18/2009 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 33 1/3% on 5/15/2009 then 8.33% quarterly for the next two years.

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.