FORM 4	•
Check this box if no	)

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 Perpenses)

### 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

(Fint of Type Responses	)											
1. Name and Address of WOLIN HARRY A	2. Issuer Name and ADVANCED MI		•	0 5		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
ADVANCED MICI AMD PLACE	(First) RO DEVICES, IN	C ONE	3. Date of Earliest Tr 11/15/2007	ansaction (N	Aonth	/Day/Yea	r)		Officer (give title below) Other (specify below)     SVP, General Counsel			
<sup>(Street)</sup> SUNNYVALE, CA 94088-3453			4. If Amendment, Da	te Original I	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 - N	on-D	erivative	Securitie	es Acqu	uired, Disposed of, or Beneficially Own	ed		
1.Title of Security 2. Transaction			2A. Deemed	3. Transaction		4. Securities Acquired			5. Amount of Securities Beneficially	6.	7. Nature	
(Instr. 3) Date			Execution Date, if	Code		^			Owned Following Reported	Ownership	of Indirect	
(Month/Day/Yea			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

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year)		Code	)	of Deriva Securitie Acquired (A) or Disposed (D)	5. Number 6. Date Exercisable and 5. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount of Underlying Securities		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned	Derivative Security: Direct (D) or Indirect	Beneficial	
				Code	V	,	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(	(	
Employee Stock Option	\$ 12.7	11/15/2007		А		10,000		<u>(1)</u>	11/15/2014	Common Stock	10,000	\$ 0	10,000	D	

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WOLIN HARRY A ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453				SVP, General Counsel			

### Signatures

P. Katy Wells By Power of Attorney 11/16/2007

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) This option vests 33 1/3% on 5/15/2008 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.