FORM 4
--------

(D · / T

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

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

### 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 Responses)											
1. Name and Address of Hester Phillip D	2. Issuer Name and ADVANCED M			<b>e</b> ,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) ADVANCED MICR AMD PLACE	CO DEVICES, IN	3. Date of Earliest Tr 08/22/2007	ransaction (I	Montl	h/Day/Yea	ır)	Officer (give title below) <u>X</u> Other (specify below) Senior VP, Chf Technology Off				
SUNNYVALE, CA		4. If Amendment, Da	te 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 (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)	tion	(Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		08/22/2007		М		125	А	\$0	7,351	D	
Common Stock		08/22/2007		F		33	D	\$ 12.01	7,318	D	

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 SEC 1474 (9-02) 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	2.	3. Transaction	3A. Deemed	4.	4. 5.		6. Date Exercisable and		7. Title and Amount		8. Price of	9. Number of	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transac	tion	on Number		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	)	Derivative				(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Securities							Owned	Security:	(Instr. 4)
	Security					Acqu							Following	Direct (D)	
						(A) (							· · · · · ·	or Indirect	
						Disp							Transaction(s)	· · /	
						of (E (Inst	· · · · ·						(Instr. 4)	(Instr. 4)	
						4, an									
						, ui	u 0)								
											Amount				
								Date	Expiration	Title	or Number				
								Exercisable	Date	The	of				
				Code	v	(A)	(D)				Shares				
				2.540		()	(2)								
Restricted		00/00/0007					105	00/00/0007	05/04/2012	Common	105	¢ 0	1.075	D	
Stock	\$ 0	08/22/2007		М			125	08/22/2007	05/04/2013	Stock	125	\$ 0	1,375	D	
Units															

## **Reporting Owners**

		Relationships							
	Reporting Owner Name / Address		10% Owner	Officer	Other				
1	Hester Phillip D ADVANCED MICRO DEVICES, INC. DNE AMD PLACE SUNNYVALE, CA 94088-3453				Senior VP, Chf Technology Off				

### **Signatures**

Faina Medzonsky By Power of Attorney 08/23/2007 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).

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.