

(Print or Type Responses)

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

| OMB APPROVAL | | | | |
|--------------------------|--|--|--|--|
| OMB Number: 3235-0104 | | | | |
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| nours per response | | | | |

INITIAL STATEMENT OF 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 Person *- EBERHART PAULETT | | Statem | 2. Date of Event Requiring Statement (Month/Day/Year) 04/29/2004 | | | 3. Issuer Name and Ticker or Trading Symbol ADVANCED MICRO DEVICES INC [AMD] | | | | |
|---|---------------------------|---------------------|--|--|-------------------------|--|--|--|--|--|
| ADVANCED MICRO DEVICES, INC., ONE AMD PLACE | | | | | Issuer (Check | (Check all applicable) | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| SUNNYVALE, | (Street) CA 94088-3453 | | | | | | 6. Individ | dual or Joint/Group Filing(Check Line) iled by One Reporting Person led by More than One Reporting Person | | |
| (City) | (State) | (Zip) | Table I - Non-Derivative Securities Beneficially Owned | | | | | | | |
| 1. Title of Security (Instr. 4) | | | В | Amount of eneficially nstr. 4) | Owned | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indire (Instr. 5) | ect Beneficial Ownership | | |
| Common Stock | | | 0 | | | D | | | | |
| Reminder: Report o | Persons wh unless the | form displays a c | collection our | of information of the office o | ation contained in tl | | | | | |
| 1. Title of Derivativ (Instr. 4) | e Security | 2. Date Exand Expir | ation Date | 3. Title and Amount of Securit Underlying Derivative Securit (Instr. 4) | | | 5. Ownership Form of Derivative Security: Direct | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | Date Exercisab | Expiration Date | Title All | mount or Number of ares | or Number of Security (D) (I) (Ins | | ct | | |
| - | | | | | | | | | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|---------|-------|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other |
| EBERHART PAULETT ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453 | X | | | |

Signatures

| Paulett Eberhart | 04/30/2004 | | |
|---------------------------------|------------|--|--|
| **Signature of Reporting Person | Date | | |

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.