FORM 4

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

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment continue. *See*Company Act of 1940

(Print or Type Responses)											
1. Name and Address of Reporting Person * TOPFER MORTON L	2. Issuer Name and Ticker or Trading Symbol ADVANCED MICRO DEVICES INC [AMD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
ADVANCED MICRO DEVICES, INC PLACE	ONIE AND	3. Date of Earliest Transaction (Month/Day/Year) 12/15/2005						Officer (give title below) Oth	er (specify below	v)	
(Street) SUNNYVALE, CA 94088-3453	2	4. If Amendment, Date 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)	Execution Date, if Code ((A) or Disposed of (D) (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)	

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(e.g., puts, cans, warrants, options, convertible securities)															
1. Title of	-		3A. Deemed	4.				6. Date Exercisab		7. Title and			9. Number of		11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac	tion	Derivativ	Derivative Expiration Date		of Underlying		Derivative		Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		Securities	S	(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired	(A)			(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or Dispos	sed						Owned	Security:	(Instr. 4)
	Security					of (D)							Following	Direct (D)	
						(Instr. 3,	4,						Reported	or Indirect	
						and 5)							Transaction(s)	(I)	
											Amount		(Instr. 4)	(Instr. 4)	
								Date Exercisable	Expiration Date	Title	or Number				
									Date		of				
				Code	V	(A)	(D)				Shares				
Stock Option Award	\$ 27.9	12/15/2005		A		12,500		04/30/2008(1).	12/15/2015	Common Stock	12,500	\$ 0	12,500	D	
Stock Option Award	\$ 27.9	12/15/2005		A		6,250		04/30/2008(2).	12/15/2015	Common Stock	6,250	\$ 0	6,250	D	

Reporting Owners

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

Signatures

Morton L. Topfer	12/16/2005
**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) Grant of option to buy 12,500 shares to vest as follows: 33 1/3% on 04/30/2006 then remaining shares vest monthly through 04/30/2008.

(2) Grant of option to buy 6,250 shares to vest as follows: 33 1/3% on 04/30/2006 then remaining shares vest monthly through 04/30/2008.

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.