

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

OMB APPROVAL

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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).

### 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 Ty	pe Response	5)													
1. Name and Address of Reporting Person *- RUIZ HECTOR			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 DirectorX Officer (give title below) Officer (specify below) Chairman of the BOD						
ADVANCED MICRO DEVICES, INC., ONE AMD PLACE			3. Date of Earliest Transaction (Month/Day/Year) 11/15/2008												
(Street) SUNNYVALE, CA 94088-3453			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						
(C	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					ties Acquire	uired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yea	Execution Execut	A. Deemed secution Date, y fonth/Day/Yea		3. Trar Code (Instr.	(	A. Securities Acc A) or Disposed Instr. 3, 4 and 5	of (D) Owned Follo		/		6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	de V	Amount (A) or	r Price			(I) (Instr. 4)	(IIIsu. 4)	
Reminder:	Report on a	separate line for each	n class of securities b	eneficia	ally o	wned direc	tly or		. –						
Reminder:	Report on a	separate line for each		II - Deri	ivativ	ve Securiti	es Acc	Persor in this a curre quired, Disp	ns who responder form are not ently valid OM	required to IB control in	respond number.				1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	Table  3A. Deemed Execution Date, if	II - Deri (e.g. 4. Transac Code	ivative, put	ve Securiti	es Accorrant r of (A) ed of	Persor in this a curre quired, Disp	form are not ently valid OM posed of, or Ber convertible securcisable and Date	required to IB control in	orespond number. wned  Amount	8. Price of			11. Nature of Indirect Beneficial Ownership (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table  3A. Deemed Execution Date, if any	II - Deri (e.g. 4. Transac Code	ivative, put	ve Securitis, calls, was 5. Number Derivative Securities Acquired or Dispose (D) (Instr. 3, 4	r of (A) ed of	Person in this a curre quired, Disperson of the Exercise Expiration I	form are not ently valid OM cosed of, or Bei convertible securisable and Date //Year)	required to IB control in neficially Overities)  7. Title and of Underlying Securities	orespond number. wned  Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Reporting Owners**

Depositing Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
RUIZ HECTOR ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453	X		Chairman of the BOD			

# **Signatures**

Faina Medzonsky By Power of Attorney	11/18/2008
**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 5/15/2009 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.