## FORM 4

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

| OMB APPROV             | /AL       |
|------------------------|-----------|
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| nours per response     | 0.5       |

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 Type Respo  | onses) |  |  |   |  |                |  |   |        |  |  |   | 1  |                              |  |  |                                       |  |
|---|--------|--|--|---|--|----------------|--|---|--------|--|--|---|--|------------------------------|--|--|---------------------------------------|--|
| 1. Name and Address of Reporting Person *- WOLIN HARRY A  |        |  |  |   | 2. Issuer Name and Ticker or Trading Symbol ADVANCED MICRO DEVICES INC [AMD] |                |  |   |        |  |  |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director _X_ Officer (give title below) Other (specify below)  SVP, General Counsel |                              |  |  |                                       |  |
| (Last) (First) (Middle)<br>ADVANCED MICRO DEVICES, INC., ONE<br>AMD PLACE                           |        |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2010 |  |                |  |   |        |  |  |   |  |                              |  |  |                                       |  |
| (Street)  |        |  |  | 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 |  |                              |  |  |                                       |  |
| SUNNYVALE, CA 94088-3453 (City) (State) (Zip)   |        |  | Table I - Non-Derivative Securities Acqui                      |   |  |                |  |   |        |  |  |   |  |                              |  |  |                                       |  |
| 1.Title of Security<br>(Instr. 3)   |        | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>r) any<br>(Month/Day/Year) |   | Code<br>(Instr. 8)   |                |  | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |        |  | 5. Amount of Securities Beneficially<br>Owned Following Reported<br>Transaction(s)<br>(Instr. 3 and 4) |   | ed   |                              | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership  |  |                                       |  |
|   |        |  |  |   |  | C              | ode  | V   | Amount | (A) or (D)                                   | Price  | or Indirect (I) (Instr. 4)  |  | (Instr. 4)                   |  |  |                                       |  |
| Common Stock  |        |  | 05/22/2010   |   |  |                | M  |   | 219    | A  | \$ 0   | 83,3  | 83,372   |                              | D  |  |                                       |  |
| Common Stock  |        |  | 05/22/2010   |   |  |                |  | F   |        | 57   | D  | \$<br>8.4   | 83,3   | 315                          |  |  | D                                     |  |
| 1. Title of Derivative Security 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year) |        |  | 3A. Deemed<br>Execution Date, if                               | (e.g., puts, calls, v<br>4. 5.<br>Transaction Code of       |  |                | ities Acquired, Disposed of warrants, options, converting 6. Date Exercisable a Expiration Date (Month/Day/Year)  rative cities ired rosed |   |        | ible securities) and 7. Title of Und Securit |  | ly Owned le and Amount derlying   |  |                              | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |        |  |  |   |  | (Instr. 4, and |  | Date<br>Exerci  | isable | Expire Date                                  | ation  | Title   |  | Amount<br>or<br>Number<br>of |  |  |                                       |  |
|   |        |  |  | Code  | V  | (A)            | (D)  |   |        |  |  |   |  | Shares                       |  |  |                                       |  |
| Restricted<br>Stock \$<br>Units   | 0      | 05/22/2010                                 |  | M   |  |                | 219  | 05/22   | 2/201  | 05/0   | 4/2013   | Comr  |  | 219                          | \$ 0   | 0  | D                                     |  |
| Reporting   | Owi    | ners                                       |  |   |  |                |  |   |        |  |  |   |  |                              |  |  |                                       |  |

| Danielia - Oroman Nama / Addusa  | Relationships |           |                      |       |  |  |  |  |
|--|---------------|-----------|----------------------|-------|--|--|--|--|
| Reporting Owner Name / Address   |               | 10% Owner | Officer              | Other |  |  |  |  |
| WOLIN HARRY A<br>ADVANCED MICRO DEVICES, INC.<br>ONE AMD PLACE<br>SUNNYVALE, CA 94088-3453 |               |           | SVP, General Counsel |       |  |  |  |  |

## **Signatures**

| Faina Medzonsky               | 05/25/2010 |
|-------------------------------|------------|
| 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.