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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).

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

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

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 Reporting Person – GHILARDI EMILIO	1	2. Issuer Name and ADVANCED MI			/ /	[AMD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
ADVANCED MICRO DEVICES, INC., AMD PLACE	ONE	3. Date of Earliest Transaction (Month/Day/Year) 08/15/2009						XOfficer (give title below) Other (specify below) SVP, Chief Sales Officer				
(Street) SUNNYVALE, CA 94088-3453	4	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 2. 7	Transaction	2A. Deemed	3. Transacti	ion	4. Securit	ties Acqu	ired	5. Amount of Securities Beneficially	6.	7. Nature		
(Instr. 3) Da	ate	Execution Date, if	Code		(A) or Disposed of (D)			Owned Following Reported	Ownership	of Indirect		
(M	fonth/Day/Year)	r) any (Instr. 8)			(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial		
		(Month/Day/Year))					(Instr. 3 and 4)	Direct (D)	Ownership		
									or Indirect	(Instr. 4)		
						(A) or			(I)			
			Code	V	Amount	(D)	Price		(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.

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number of		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	Derivative		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(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 Disposed of							Owned	Security:	(Instr. 4)
	Security					(D)							Following	Direct (D)	
						(Instr. 3, 4,							Reported	or Indirect	
						and 5)							Transaction(s)	(I)	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration		or				
								Exercisable	<u>^</u>	Title	Number				
				Code	v	(A)	(D)				of Shares				
Stock										Common					
Option	\$ 3.69	08/15/2009		Α		56,250		(1)	08/15/2016	Common	56,250	\$ 0	56,250	D	
Grant										Stock					
RSU										Common					
Award	\$ 0 ⁽²⁾	08/15/2009		Α		112,500		(<u>3</u>)	08/15/2016	Stock	112,500	\$ 0	112,500	D	
1 in al a										DIOUK					

Reporting Owners

Banauting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
GHILARDI EMILIO ADVANCED MICRO DEVICES, INC. ONE AMD PLACE SUNNYVALE, CA 94088-3453			SVP, Chief Sales Officer					

Signatures

Emilio Ghilardi

08/18/2009 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 5/15/2010 then 8.33 % quarterly for the next two years.

(2) Each restricted stock unit respresents a contingent right to receive one share of common stock.

(3) This award vests 33 1/3% on 8/9/2010 then 33 1/3% annually 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.