## Edgar Filing: ADVANCED MICRO DEVICES INC - Form 4

ADVANCED MICRO DEVICES INC Form 4 January 17, 2014 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Papermaster Mark D Issuer Symbol ADVANCED MICRO DEVICES (Check all applicable) INC [AMD] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_Officer (give title Other (specify (Month/Day/Year) below) below) ADVANCED MICRO DEVICES. 01/15/2014 SVP & Chief Technology Officer INC., ONE AMD PLACE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting SUNNYVALE, CA 94088-3453 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired 7. Nature of 1.Title of 2. Transaction Date 2A. Deemed 3. 5. Amount of 6. Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities Ownership Indirect (Instr. 3) anv Code (Instr. 3, 4 and 5) Beneficially Form: Direct Beneficial (Month/Day/Year) (Instr. 8) Owned (D) or Ownership Indirect (I) (Instr. 4) Following Reported (Instr. 4) (A) Transaction(s) or (Instr. 3 and 4) Price Code V (D) Amount Common \$0 01/15/2014 Μ 102,725 Α 237,311 D Stock Common 01/15/2014 F 39.575 197,736 D D 4 47 Stock

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number of<br>iorDerivative<br>Securities<br>Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4, and<br>5) |         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) |                          |
|---|---|---|---|--|--|---------|--|--------------------|---|--------------------------|
|   |   |   |   | Code V                                 | (A)  | (D)     | Date<br>Exercisable  | Expiration<br>Date | Title   | Amoun<br>Numbe<br>Shares |
| Restricted<br>Stock<br>Units                        | \$ 0  | 01/15/2014                              |   | М                                      |  | 102,725 | 01/15/2014   | 01/15/2020         | Common<br>Stock   | 102,7                    |

## **Reporting Owners**

| Reporting Owner Name / Address   |            | Relationships |                                |         |       |  |  |
|--|------------|---------------|--------------------------------|---------|-------|--|--|
|  |            | Director      | 10% Owner                      | Officer | Other |  |  |
| Papermaster Mark D<br>ADVANCED MICRO DI<br>ONE AMD PLACE<br>SUNNYVALE, CA 9408 |            |               | SVP & Chief Technology Officer |         |       |  |  |
| Signatures   |            |               |                                |         |       |  |  |
| Mark   |            |               |                                |         |       |  |  |
| Papermaster  | 01/16/2014 |               |                                |         |       |  |  |
| <u>**</u> Signature of<br>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.