FORM	4
Charlethia harri	£

(Check this box if no
(neck this box ii no
1	onger subject to
S	Section 16. Form 4 or
F	Form 5 obligations may
с	continue. See
Ι	nstruction 1(b).

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

OMB APPROV	/AL
OMB Number:	3235-0287
Estimated average burg	den
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	3)										
1. Name and Address of Papermaster Mark			2. Issuer Name and ADVANCED MI				AMD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director			
2485 AUGUSTINE	E DRIVE		3. Date of Earliest Tr 05/14/2021	ansaction (N	/Ionth	/Day/Year)	1				
SANTA CLARA, C	(Street) CA 95054	2	4. If Amendment, Da	te Original I	Filed(1	Month/Day/Ye	ear)	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	3. Transact Code (Instr. 8)	ion	(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		05/14/2021		М		55,000 (1)	А	\$ 1.84	1,264,795	D	
Common Stock		05/14/2021		S		55,000 (<u>2</u>)	D	\$ 75	1,209,795	D	

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 SEC 1474 (9-02) this form are not required to respond unless the form displays a currently valid OMB control number.

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

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. N	umber of	6. Date Exer	cisable and	7. Title and	Amount of	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Deri	vative	Expiration Date		Underlying Securities		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code				(Month/Day/Year)		(Instr. 3 and 4)		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acquired (A)						(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or D	r Disposed						Owned	Security:	(Instr. 4)
	Security					of (I	(D)					Following	Direct (D)		
						(Instr. 3, 4,							Reported	or Indirect	
						and 5)							Transaction(s)	(I)	
											Amount or		(Instr. 4)	(Instr. 4)	
									Expiration		Number of				
				Code	V	(A)	(D)	Exercisable	Date		Shares				
Stock Option Grant	\$ 1.84	05/14/2021		М			55,000	(<u>3</u>)	08/15/2022	Common Stock	55,000.00	\$ 0	390,221	D	

Reporting Owners

Den estima Oran Nemeri Addama	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
Papermaster Mark D 2485 AUGUSTINE DRIVE SANTA CLARA, CA 95054			Chief Technology Officer & EVP					

Signatures

/s/ Linda Lam by Power-of-attorney for Mark Papermaster

Signature of Reporting Person

05/17/2021 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) The stock option exercise reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on December 4, 2020.

(2) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on December 4, 2020.

(3) This option vested 33 1/3% on August 15, 2016 and 8 1/3% per quarter over the subsequent eight quarters.

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.