FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ton, 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* BHATIA MANISH H					2. Issuer Name and Ticker or Trading Symbol WESTERN DIGITAL CORP [ WDC ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>БПАП</u>	<u>A MAINI</u>	<u>311 11</u>										-			Director			10% Ow		
													Officer (g	give title		Other (s below)	pecify			
(Last)	(F		3. Date of Earliest Transaction (Month/Day/Year) 01/17/2017									,	D Silico	n One	,					
C/O WESTERN DIGITAL CORPORATION					01/1//201/										EVP, Silicon Operations					
3355 MICHELSON DRIVE, SUITE 100																				
					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind	6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)						
IRVINE CA 92612													X	X Form filed by One Reporting Person						
														Form filed by More than One Reporting Person						
(O:+ )	(0		(7:)												Person					
(City)	(5	tate)	(Zip)																	
		Ta	able I - Non-D	Derivat	ive S	ecurities	s Ac	quir	red, D	isp	osed c	of, or	Ben	eficially	Owned					
Date				Transact				3.			4. Securities Acquired (A) of								7. Nature of	
				Date (Month/Day/Year)		Execution Date, if any (Month/Day/Yea			Transaction Dispose Code (Instr.			d Of (D) (Instr. 3, 4 a		. 3, 4 and 5)	and 5) Securities Beneficially Owned Following Reported				ndirect Beneficial	
														(I) (Instr. 4)			Ownership (Instr. 4)			
									Code V	Amo	Amount		A) or	Price	Transaction(s)			- '	15(1.4)	
									Code		Amount	(D)		11100	(Instr. 3 an	d 4)				
			Table II - De	erivativ	re Se	curities	Acq	uire	ed, Dis	pos	sed of	, or B	enef	icially O	wned					
			(e.	g., put	s, ca	lls, warr	ants	s, op	otions	, co	nverti	ble se	ecur	ities) ์						
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. Number of			6. Date Exercis							8. Price of	9. Number of		10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date, if any	Transaction Code (Instr.				Expiration Date (Month/Day/Year)			,			nderlying ecurity	Derivative Security	derivative Securities Beneficially		Ownership Form: Direct (D) or Indirect	of Indirect Beneficial	
(Instr. 3)	Price of	(monangay, roan)	(Month/Day/Year)		(	Acquired (A)						(Instr.			(Instr. 5)				Ownership	
	Derivative					or Disposed of (D) (Instr. 3,										Owned Following		(I) (Instr. 4)	(Instr. 4)	
					4 and 5)									Reporte Transac						
						(A)	(D)	Det:			Expiration Date	Title		Amount or		(Instr. 4)				
				Code	v			Date Exercis	e rcisable					lumber of Shares						
Dividend				ĺ								Com-							Ì	
Equivalent Rights	(1)	01/17/2017		A		701.7934			(1)		(1)	Stock		701.7934	\$0.0	2,269.6	5121	D		

## Explanation of Responses:

1. The dividend equivalent rights accrued on previously awarded restricted stock units (RSUs) which vest proportionately with the RSUs to which they relate. Each dividend equivalent right represents a contingent right to receive one share of the Issuer's common stock or the cash value thereof.

By: /s/ Sandra Garcia Attorneyin-Fact For: Manish Bhatia

01/19/2017

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.

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 Number.