FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ngton, D.C. 20549 | OMB APPROVAL |
|-------------------|--------------|
| | |

| OMB Number: | 3235-0287 | | | | | |
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| Estimated average burder | า | | | | | |
| hours 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).

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

| 1. Name and Address of Reporting Person* <u>Lauer Len J</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol WESTERN DIGITAL CORP [WDC] | | | | | | | | | | k all applica Director | | | 10% Ow | ner | |
|---|--|--|---|------------------------------|---|--|--|------------|---|----------|--|----------------|--------------------|---|---|-------------------------------|--|--|--|--|
| (Last) (First) (Middle) C/O WESTERN DIGITAL CORPORATION | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/07/2019 | | | | | | | | | | Officer (g below) | give title | | Other (sp below) | pecify | |
| 5601 GREAT OAKS PARKWAY | | | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | reet) AN JOSE CA 95119 | | | | | | | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | ng | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Ta | able I - Non-D | erivat | ive S | ecu | rities Ac | qui | ired, D | isp | osed c | of, or E | ene | ficially | Owned | | | | | |
| Date | | | | Transact ate lonth/Day | | 2A. Deemed Execution Date, if any (Month/Day/Year | | , | Code (Instr. | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | | Securities Beneficial Owned Fo | eneficially wned Following | | Direct II Indirect E tr. 4) C | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code V | | Amount | (A (D | or | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | nstr. 4) | |
| Common Stock 11/07 | | | | 11/07/2 | 7/2019 | | | M | | 228(| 1) | A | \$0.0 | 78,391 | | | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. | | Deri Seci Acq or D | umber of vative urities uired (A) visposed D) (Instr. 3, ad 5) | Exp | Date Exerc piration Da onth/Day/\ | ate | Securities Under | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Followin Reported Transact | e es ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Dat Exe | te ercisable | Ex Da | piration te | Title | Nu | nount or mber of ares | | (Instr. 4) | | | | |
| Dividend Equivalent Rights | (1) | 11/07/2019 | | M | | | 228.2743 | | (1) | | (1) | Commo Stock | n 22 | 8.2743 | \$0.0 | 0 | | D | | |

Explanation of Responses:

1. The dividend equivalents were converted into, and paid in the form of, shares of the Issuer's common stock on a one-for-one basis in connection with the vesting of restricted stock units to which the dividend equivalents relate. A cash amount was also paid to the holder to settle a fractional dividend equivalent.

> By: /s/ Sandra Garcia Attorneyin-Fact For: Len J. Lauer

11/12/2019

** Signature of Reporting Person

Date

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

- * 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.