FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washir

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549	OMB APPROVAL

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	OMB Number:	3235-0287
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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

1. Name and Address of Reporting Person* CORDANO MICHAEL D											g Symbol <u>ORP</u> [WI	(Check	k all applic Directo	ionship of Reporting all applicable) Director Officer (give title		10% Ov	wner		
(Last) (First) (Middle) C/O WESTERN DIGITAL CORPORATION 3355 MICHELSON DRIVE, SUITE 100						Date of /08/20		est Trar	nsaction	(Mont	th/Day/Year)	X	below)	Officer (give title below) Other (specify below) President, HGST Subsidiary					
(Street) IRVINE CA 92612					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)												1 01301				
1. Title of Security (Instr. 3)			2. Transac Date (Month/Da		ion	on 2A. D Exec		. Deemed ecution Date,		ed, D	4. Securities	Acquired (A) or (D) (Instr. 3, 4 and			5. Amou Securiti Benefic Owned	int of es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A) or (D)	Price			saction(s) r. 3 and 4)				
Common	Common Stock		06/08/2	015	5			M ⁽¹⁾		5,895	A	\$43	3.11	82,	,080(2)		D		
Common	Stock			06/08/2	015				S ⁽³⁾		8,374	D	\$94.8	584 ⁽⁴⁾	73,706 D				
Common	Stock			06/09/2	015				S ⁽³⁾		1,368	D	\$91.	4702	72	72,338 D			
		-	Table I								sposed of, , converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	ion Date,	4. Transactic Code (Inst		5. Number ion of		6. Date Exerci Expiration Da (Month/Day/Yo		ate	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i C F Ily C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Shai	ber					
Employee Stock Option	\$43.11	06/08/2015			M ⁽¹⁾			5,895	09/06/2	2013 ⁽⁵⁾	09/06/2019	Commo Stock		95	\$0.0	29,480)	D	

Explanation of Responses:

buy)

- 1. These transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 21, 2014.
- 2. Includes 224 shares acquired under the issuer's Employee Stock Purchase Plan on May 31, 2015.
- 3. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 21, 2014.
- 4. Represents the weighted average sale price per share. These shares were sold in multiple transactions at prices ranging from a low of \$94.42 to a high of \$95.05. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price.
- 5. The option vested 25% one year from the grant date of 9/6/2012, and an additional 6.25% vested at the end of each three-month period through 6/6/2015. The remaining shares subject to the option will vest at 6.25% at the end of each three-month period until fully vested on 9/6/2016.

By: /s/ Sandra Garcia Attorneyin-Fact For: Michael D.

06/10/2015

Cordano

** 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.