FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENE	FICIAL C	DWNERS	HIP

1	OIVID APP	ROVAL
	OMB Number:	3235-028

Check this box if no longer subject to	υ
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

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average	burden						
hours per response	: 0.5						

Name and Address of Reporting Person* LEONETTI OLIVIER					2. Issuer Name and Ticker or Trading Symbol WESTERN DIGITAL CORP [WDC]								(Chec	tionship of Reporting all applicable) Director Officer (give title		p Person(s) to Issuer 10% Own Other (sp		ner	
	STERN DI	GITAL CORPO	_											below) EVP and CF0			below)	рсопу	
3355 MICHELSON DRIVE, SUITE 100 (Street) IRVINE CA 92612 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line)	· •						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Tra		2. Transac Date			3. Transaction Code (Instr.) 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		A) or	or 5. Amount of		Form: [(D) or li		7. Nature of Indirect Beneficial Ownership							
								ode		Amount		A) or D)	Price	Transactio	on(s) nd 4))		(Instr. 4)	
Common Stock			07/22/2	22/2016				М		363(1)		A	\$0.0	7,938			D		
Common Stock			07/22/2	22/2016				A		6,029	(2)	A	\$0.0	\$0.0 13,9			D		
Common Stock			07/22/2	22/2016				F		2,401	,401 ⁽³⁾ D		\$52.4	11,566			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execution Date		4. Transaction Code (Instr.		Derivative E		5. Date Exercisa Expiration Date Month/Day/Yea			7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity)	Derivative Security (Instr. 5)	9. Number derivativ Securitie Beneficia Owned Following Reported Transact	e es ally g d ion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	de V	(A)	(D)	Date Exerc	cisable		opiration ate	Title	Nι	Amount or Number of Shares (Instr. 4)					
Dividend Equivalent	(1)	07/22/2016		М			363.3001	((1)		(1)	Comm		53.3001	\$0.0	1,472.61	183 ⁽⁴⁾	D	

Explanation of Responses:

- 1. A total of 363 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 the performance-based restricted stock units to which the dividend equivalents relate. A cash amount equal to \$15.73 was also paid to the holder to settle fractional dividend equivalents in an aggregate amount of 0.3001.
- 2. Represents shares issued as payment in respect of the vesting of a performance-based restricted stock unit award.
- 3. Payment of tax obligation by withholding securities incident to the vesting of securities in accordance with Rule 16b-3(e).
- 4. The total number of derivative securities has been adjusted to reflect the cancellation of 28.8034 stock units previously credited in the form of dividend equivalent payments on stock units that did not vest.

By: /s/ Van Huynh Attorney-in-07/26/2016 Fact For: Olivier C. Leonetti

** 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.