FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL            |           |  |  |  |  |  |  |  |  |
|-------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:             | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burde | en        |  |  |  |  |  |  |  |  |
| 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

|                                                        | nd Address of<br><u>JN THO</u>                                        |                                            | 2. Issuer Name and Ticker or Trading Symbol WESTERN DIGITAL CORP [ WDC ] |         |                                         |          |                                                             |                                                       |             |                                                 |                   |                                                             | lationship c<br>ck all applic<br>Directo | able)              | g Perso                                             | on(s) to Issu<br>10% Ov                                                                                        |                         |                                                                          |                                                                    |                                                     |  |
|--------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------|---------|-----------------------------------------|----------|-------------------------------------------------------------|-------------------------------------------------------|-------------|-------------------------------------------------|-------------------|-------------------------------------------------------------|------------------------------------------|--------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------|--|
|                                                        | (F<br>STERN DI                                                        |                                            | Date 6                                                                   |         | iest Tran                               | sactio   | on (Mo                                                      | onth/[                                                | Day/Year)   |                                                 | Officer<br>below) | (give title                                                 |                                          | Other (s<br>below) | pecify                                              |                                                                                                                |                         |                                                                          |                                                                    |                                                     |  |
| 3355 MI                                                | CHELSON                                                               | DRIVE, SUITE                               | 4. 1                                                                     | If Ame  | endme                                   | nt, Date | of Or                                                       | riginal I                                             | Filed       | (Month/Day                                      |                   | 6. Individual or Joint/Group Filing (Check Applicable Line) |                                          |                    |                                                     |                                                                                                                |                         |                                                                          |                                                                    |                                                     |  |
| (Street)                                               |                                                                       |                                            |                                                                          |         |                                         |          |                                                             |                                                       | 1 7         | X Form filed by One Reporting Person            |                   |                                                             |                                          |                    |                                                     |                                                                                                                |                         |                                                                          |                                                                    |                                                     |  |
| IRVINE                                                 | _                                                                     |                                            |                                                                          |         |                                         |          |                                                             |                                                       |             | Form filed by More than One Reporting<br>Person |                   |                                                             |                                          |                    |                                                     |                                                                                                                |                         |                                                                          |                                                                    |                                                     |  |
| (City)                                                 | (S                                                                    | tate)                                      | (Zip)                                                                    |         |                                         |          |                                                             |                                                       |             |                                                 |                   |                                                             |                                          |                    |                                                     |                                                                                                                |                         |                                                                          |                                                                    |                                                     |  |
|                                                        |                                                                       | Tal                                        | ole I - No                                                               | n-Deriv | vativ                                   | e Se     | curi                                                        | ties Ac                                               | cqui        | ired,                                           | Dis               | posed o                                                     | f, or E                                  | Bene               | ficially                                            | Owned                                                                                                          |                         |                                                                          |                                                                    |                                                     |  |
| 1. Title of Security (Instr. 3)  2. Trans Date (Month/ |                                                                       |                                            |                                                                          |         |                                         | ear)     | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                                                       |             | 3.<br>Transac<br>Code (II<br>B)                 |                   | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4  |                                          |                    |                                                     | Beneficia<br>Owned F                                                                                           | es<br>ally<br>Following | Form                                                                     | : Direct   I<br>r Indirect   I<br>str. 4)                          | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |  |
|                                                        |                                                                       |                                            |                                                                          |         |                                         |          |                                                             |                                                       | c           | Code                                            | v                 | Amount                                                      | (A)                                      | or                 | Price                                               | Reported<br>Transact<br>(Instr. 3 a                                                                            | ion(s)                  |                                                                          | [                                                                  | Instr. 4)                                           |  |
| Common                                                 | Stock                                                                 | 3/201                                      | 2012                                                                     |         |                                         |          | M                                                           |                                                       | 10,000      | 10,000 A                                        |                   | \$11.61                                                     | 35,449                                   |                    |                                                     | D                                                                                                              |                         |                                                                          |                                                                    |                                                     |  |
| Common                                                 | Stock                                                                 |                                            |                                                                          | 08/13   | 3/201                                   | 2        |                                                             |                                                       |             | S                                               |                   | 10,000                                                      | ) ]                                      | D                  | \$44                                                | 25,                                                                                                            | 449                     | D                                                                        |                                                                    |                                                     |  |
| Common                                                 | Stock                                                                 |                                            |                                                                          |         |                                         |          |                                                             |                                                       |             |                                                 |                   |                                                             |                                          |                    |                                                     | 15,                                                                                                            | 454                     |                                                                          | I 1                                                                | By<br>Family<br>Frust                               |  |
|                                                        |                                                                       |                                            | Table II -                                                               |         |                                         |          |                                                             |                                                       |             |                                                 |                   | osed of,<br>convertib                                       |                                          |                    |                                                     | Owned                                                                                                          |                         | ,                                                                        | <u> </u>                                                           |                                                     |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)    | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Day                           | Date,   | 4.<br>Transaction<br>Code (Instr.<br>3) |          | of<br>Deri<br>Sec<br>Acq<br>(A) o<br>Disp<br>of (I          | umber vative urities uired or oosed O) (Instr. and 5) | Exp         | ate Exo<br>piration<br>onth/Da                  | Date              |                                                             |                                          | ecurity            | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Numbe<br>derivative<br>Securities<br>Beneficia<br>Owned<br>Following<br>Reported<br>Transacti<br>(Instr. 4) | e C<br>s F<br>dlly C    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                                     |  |
|                                                        |                                                                       |                                            |                                                                          |         | Code                                    | v        | (A)                                                         | (D)                                                   | Date<br>Exe | e<br>ercisabl                                   |                   | Expiration<br>Date                                          | Title                                    | 1                  | Amount<br>or<br>Number<br>of<br>Shares              |                                                                                                                |                         |                                                                          |                                                                    |                                                     |  |
| Non-<br>Qualified<br>Stock<br>Option<br>(right to      | \$11.61                                                               | 08/13/2012                                 |                                                                          |         | M                                       |          |                                                             | 10,000                                                | 11/2        | 20/2004                                         | (1)               | 11/20/2013                                                  | Comm<br>Stock                            |                    | 10,000                                              | \$0                                                                                                            | 0                       |                                                                          | D                                                                  |                                                     |  |

## **Explanation of Responses:**

1. The option vested 25% on the first anniversary of the grant date and 6.25% at the end of each three-month period thereafter.

By: /s/ Sandra Garcia Attorneyin-Fact For: Thomas E. Pardun

\*\* 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.