FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549

OMB APPROVAL										
OMB Number:	3235-0287									

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

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

1. Name and Address of Reporting Person*  MASSENGILL MATTHEW E					2. Issuer Name and Ticker or Trading Symbol WESTERN DIGITAL CORP [ WDC ]										k all app Direc	tionship of Reportii all applicable) Director		10% O	wner
		GITAL CORPO	Middle)	N	3. Date of Earliest Transaction (Month/Day/Year) 11/20/2024										Officer (give title below)		Other (below)	specify	
5601 GREAT OAKS PARKWAY				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SAN JOS	SE CA	A 9	5119											<b>V</b>	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)																
		Table	I - Nor	n-Deriva	tive S	ecu	rities	Acq	uired,	Disp	osed of	, or E	Benefi	cially	/ Own	ed			
in this of occurry (mounts)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			5, 4 and Securi Benefi Owned		ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or Pr	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock <sup>(1)</sup>			11/20/2	/2024				A		4,542	A	\	60.0	.0 18,804(2)			D		
Common Stock														36,926			I	By Family Trust	
Common Stock													500			I	by IRA		
		Tal									sed of, o				Owne	d			
1. Title of Derivative Conversion Security (Instr. 3)  Price of Derivative Security  Output  O			4. Transaction Code (Instr. 8)		of		6. Date   Expirati (Month/	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of lerivative ecurity nstr. 5)	9. Number derivative Securities Securities Beneficially Owned Following Reported Transactior (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code			(A) (D)		able	Expiration Date	Numb of Title Share							

## **Explanation of Responses:**

- 1. Represents the grant of restricted stock units to the Reporting Person. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 2. Reflects a prior transfer by the Reporting Person of directly owned common shares to a trust for the benefit of the Reporting Person and the spouse of the Reporting Person, of which the Reporting Person and the spouse of the Reporting Person are also trustees.

By: /s/ Sandra Garcia Attorney-in-Fact For: Matthew E. Massengill

11/22/2024

\*\* Signature of Reporting Person

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.