FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number: 3235-02									
	Estimated average burden									
- 1	hours ner resnonse:	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

Name and Address of Reporting Person* COTE KATHLEEN A					2. Issuer Name and Ticker or Trading Symbol WESTERN DIGITAL CORP [WDC]								ck all applic	applicable) Director Officer (give title		Person(s) to Issuer 10% Owner			
	Last) (First) (Middle) C/O WESTERN DIGITAL CORPORATION 3355 MICHELSON DRIVE, SUITE 100				3. Date of Earliest Transaction (Month/Day/Year) 11/08/2013								below)			Other (s below)			
(Street) IRVINE (City)	C.	A	92612 (Zip)	4	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Ta	ble I - Non	-Derivati	ve Se	cur	ities Ac	quired	Dis	posed o	of, or B	enef	icially	Owned					
Date			2. Transacti Date (Month/Day	Execution (Day/Year) if any		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amoun Securities Beneficia Owned Fo	s	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or I	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 11/08				11/08/20	/2013		М		117	1)	A	\$0	15,2	15,210		D			
Common Stock 11/1			11/11/20	1/2013		М		96(2)		4	\$0	15,306		D					
			Table II - I (Derivativ					•				-	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Ye	Code	action (Instr.			6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur	ount nber Shares		(Instr. 4)	on(s)			
Dividend Equivalent Rights	(1)	11/08/2013		М			117.995	(1)		(1)	Commo	111	7.995	\$0	219.259)2	D		
Dividend Equivalent Rights	(2)	11/11/2013		М			96.2099	(2)		(2)	Commo	96.	.2099	\$0	123.049)3	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 equal to \$71.31 was also paid to the holder to settle a fractional dividend equivalent of 0.995.
- 2. 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 equal to \$15.02 was also paid to the holder to settle a fractional dividend equivalent of 0.2099.

By: /s/ Sandra Garcia Attorneyin-Fact For: Kathleen A. Cote

** 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.