KERR DEBORAH Form 3 November 17, 2017 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> KERR DEBORAH | | | 2. Date of Event Requir Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol NetApp, Inc. [NTAP] | | | | | |
|---|---------------|-----------------|--|--|--|--|---|--|--|--|
| (Last) | (First) | (Middle) | 11/09/2017 | | 4. Relationship of Reporting Person(s) to Issuer | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | |
| 495 EAST JA | AVA DRIV | /E | | | | | | | | |
| (Street) | | | (Check all applicable) | | 6. In | 6. Individual or Joint/Group | | | | |
| SUNNYVAL | .E, CAÂ | 94089 | | Officer | Officer 0// Owner Officer Other (give title below) (specify below) | | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | Table I | - Non-Derivati | ive Securition | ies Beneficially Owned | | | | |
| 1.Title of Securi (Instr. 4) | ity | | | nt of Securities ally Owned | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature o Ownership (Instr. 5) | of Indirect Beneficial | | | |
| Reminder: Repo owned directly o | | ate line for ea | ch class of securities ben | eficially SI | EC 1473 (7-02) | | | | | |
| 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 control number. | | | | | | | | | | |
| Ta | able II - Der | ivative Secur | rities Beneficially Owne | d (e.g., puts, calls, | warrants, opti | ons, conve | rtible securities) | | | |
| 1. Title of Deriv (Instr. 4) | ative Securit | Expir | ration Date Sec Day/Year) Der | Title and Amount of urities Underlying viative Security str. 4) | 4. Conversio or Exercis Price of | | of (Instr. 5) | | | |

Date

Exercisable

Expiration

Title

Date

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Derivative

Security

Amount or

Number of

Shares

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | | | | |
|--|----------|------------|---------|-------|--|--|--|
| reporting of the real of the cost | Director | 10% Owner | Officer | Other | | | |
| KERR DEBORAH 495 EAST JAVA DRIVE SUNNYVALE, CA 94089 | ÂX | Â | Â | Â | | | |
| Signatures | | | | | | | |
| By: Roberta S Cohen Attorney-in-Fact For: Deborah Kerr | | | | | | | |
| <u>**</u> Signature of Reportin | | Date | | | | | |
| Explanation of Re | spor | ises: | | | | | |

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.