SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and A GUSTAF	ddress of Repo	2. Date of E Requiring S (Month/Day 11/15/202	itatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>NetApp, Inc.</u> [NTAP]							
(Last) 3060 OLSE (Street) SAN JOSE (City)		(Middle) 95128 (Zip)	-	-	Issuer	ationship of Reporting k all applicable) Director Officer (give title below)	10% C	wner (specify	File 6. Ir	d (Month/Day/ ndividual or Jo eck Applicable Form filed I Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				i	2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
E			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)			4. Convers or Exerc Price of		5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Date Exercisable				Amount or Number of Shares	Derivative Security				

Explanation of Responses:

Remarks:

No securities are beneficially owned.

<u>By: Roberta S Cohen,</u>	
Attorney-in-Fact for	
Anders Gustafsson	
** Signature of Reporting Person	

11/21/2023

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 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.

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.