FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | | | | | | | | - | Investmen | | | | | 1. | | | D (): | | |
|---|---|--|-----------------------------------|---------------------|--------------------------------|--|-------------|---|--|---------------|------------------|---|--------------------------------|--------------|--|---|--|--|--|
| Name and Address of Reporting Person* Kurian George | | | | | | 2. Issuer Name and Ticker or Trading Symbol NetApp, Inc. [NTAP] | | | | | | | | | Relationship of Reporting Person(s) to Issi (Check all applicable) Director 10% Own | | | | |
| (Last) 495 EAS | (F ST JAVA D | irst) | (Middle |) | | 3. Date of Earliest Transaction (Month/Day/Year) 04/15/2014 | | | | | | | | | X Office below | cer (give title ow) | | (specify) | |
| (Street) SUNNYVALE CA 94089 (City) (State) (Zip) | | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tal | ole I - | Non-Deriv | ative | Sec | urit | ies Ac | quired, | Dis | posed | of, or | Bene | ficia | lly Own | ed | | | |
| 1 1110 01 000 1111 (1110 1110 11) | | | 2. Transact Date (Month/Day | 1 | Exec if an | A. Deemed execution Date, f any Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | | | | nd Secu Bene Own | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code V | | Amount | t (A) or Pri | | rice | Repo Tran | | | owing orted saction(s) r. 3 and 4) | | |
| Common Stock | | | | 04/15/2 | 014 | | | | M | | 6,25 | 0 . | A | \$0.0 | | 13,262 | D | | |
| Common Stock 04/ | | | | | 014 | | | | F | | 2,32 | 9 | D \$ | 36.9 | 95 | 10,933 | D | | |
| Common Stock 04/16/20 | | | | |)14 | | | M | | 2,500 | | A | \$0.0 | | 13,433 | D | | | |
| Common Stock 04/16/20 | | | | |)14 | | | F | | 939 | | D S | \$36.2 | 4 | 12,494 | D | | | |
| | | Т | able I | I - Derivat | | | | | uired, Di | | | | | | Owned | d | | | |
| Derivative Security (Instr. 3) Pi | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu if any | eemed tion Date, | 4. Transac Code (I 8) | ction | 5. Number E | | 6. Date Exe Expiration (Month/Da | rcisa Date | able and | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | v | (A) | | Date Exercisabl | | kpiration ate | Title | Amo or Num of Shar | ber | | | | | |
| Restricted Stock Unit | \$0.0 | 04/15/2014 | | | M | | | 6,250 | (1) | 12 | 2/15/2018 | Commo Stock | n 6,2 | 50 | \$0.0 | 12,500 | D | | |
| Restricted | \$0.0 | 1 | 1 | | | | | 2,500 | (1) | 04 | | Commo | , | 00 | \$0.0 | 5,000 | | 1 | |

Explanation of Responses:

1. The restricted stock unit shares vest as to 25% of the shares on the one-year anniversary of the grant date, and 25% of the shares on each annual anniversary thereafter for the next 3 years.

By: Michael Nolan, Attorneyin-Fact For: George Kurian

** 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.