

WAL MART STORES INC

Reported by **GEARHART JEFFREY J**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 06/08/15 for the Period Ending 06/04/15

Address 702 SOUTHWEST 8TH ST

BENTONVILLE, AR 72716

Telephone 5012734000

CIK 0000104169

Symbol WMT

SIC Code 5331 - Variety Stores

Industry Retail (Department & Discount)

Sector Services

Fiscal Year 01/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Weshington, D.C. 20540

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Address of Reporting Person *														5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Gearhart Jef	frey J				WAl	L MAR	T ST	OI	RES I	NC							
					[WMT]								Direct	Director 10% Owner			wner
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)								X _ Officer (give title below)			Other (specify	
													below) Executive Vice President				
702 SOUTHWEST 8TH STREET					6/4/2015								Executive	, vice I I	CSIGCIIC		
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)				
BENTONVI	LLE, AI	R 727	16-0215	;													
(City) (State) (Zip)													X Form filed by One Reporting Person Form filed by More than One Reporting Person				
													r orm me	od by More	man one rep	orting reiso	
		Tab	le I - Non	-Der	ivativ	e Securi	ties Ac	qui	ired, Di	spo	sec	d of, or l	Beneficially	y Owned			
1.Title of Security					Trans.	2A. Deemed Execution	Code		4. Securi								7. Nature
(Instr. 3)				Da	te				Acquired Disposed				Following Reported Transaction(s) (Instr. 3 and 4)		s)	Ownership Form:	of Indirect Beneficial
					Date, if	<u> </u>		(Instr. 3,	4 and							Ownership (Instr. 4)	
						any				(A)						(I) (Instr.	(IIISII. 4)
							Code	V	Amount	(D)	Pri	ce				4)	
Common Stock 6/					4/2015		G	v	2005	D	\$0		100029.323 (2)		D		
Common Stock													1050.9971			I	By 401(k) Plan
	ble II - De	rivati											ts, options		1	1	·
1. Title of Derivate Security	2. Conversion	3.	3A. 4 Deemed T	rans.	5. Number of Derivative		6. Date Exercisable and Expiration Date 7. Title and Am Securities Under							Price of Derivative	9. Number	10. Ownership	11. Nature
(Instr. 3)	or Exercise Price of		Execution C	ode	Securities		Derivati				riva	ivative Security		Security	derivative	Form of	Beneficial
		Date, if (1	Instr. 8	Acquired (A) or Disposed of (D)						str.	3 and 4)		(Instr. 5)	Securities Beneficially	Derivative Security:	Ownership (Instr. 4)	
	Derivative Security				^	` '									Owned Following	Direct (D)	(1115111 1)
					(Instr	. 3, 4 and										or Indirect (I) (Instr.	
					1	Date				n Tri			Number of	1	Transaction	` ' `	
			C	Code	(A)	(A) (D)	Exercisa	ble	Date	111	S	Shares	nares		(s) (Instr. 4)		

Explanation of Responses:

- (1) On June 4, 2015, the Reporting Person made a charitable gift of 2,005 shares.
- (2) Balance adjusted to reflect shares acquired through the Wal-Mart Stores, Inc. 2004 Associate Stock Purchase Plan.

Reporting Owners

Demonting Overnor Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Gearhart Jeffrey J 702 SOUTHWEST 8TH STREET			Executive Vice President							
BENTONVILLE, AR 72716-0215										

Signatures

/s/ Geoffrey W. Edwards, by Power of Attorney

6/8/2015

^{**} 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 control number.