

WAL MART STORES INC Reported by JOHN T. WALTON ESTATE TRUST

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/10/15 for the Period Ending 04/08/15

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**

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 *				*	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
John T. Walt	on Esta	te Tı	rust			L MAI MT]	RT S	T(ORES II	NC	•		Direct	or	_	X 10%	Owner
(Last)	(First)		(Middle)		3. Date of Earliest Transaction (MM/DD/YYYY)						Office below)	Officer (give title below) Other (specify elow)			(specify		
P.O. BOX 18	60						4	/8	/2015								
(Street)				4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)						
BENTONVII	LLE, AI	R 727	712										V Form f	ilad by Ona	Danartina Da	roon	
(City)	(State)		(Zip)							_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tal	ole I - Non			e Securi				_			Beneficiall	•		1	,
1.Title of Security (Instr. 3)				2. T Date	Trans. e	2A. Deemed Execution Date, if any	Code		4. Securitie (A) or Disp (Instr. 3, 4 a	osed	osed of (D) Follow		nount of Securities Beneficially Owned wing Reported Transaction(s) 3 and 4)		Ownership Form:	Beneficial	
					Code		v	Amount	(A) or (D)	Price				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common Stock 4/8			4/8/	3/2015		J (1)	v	194000000 (1)	D	\$0 ⁽¹⁾		1415891131		I (1)	By Limited Liability Company		
Tak	ole II - De	erivat	ive Securi	ties E	Benefi	icially O	wned	(e	e.g. , puts	, ca	lls, wa	arran	ts, options	, convert	ible secur	rities)	l.
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative Security		Execution C Date, if any	rans. Code	Deriv Secu Acqu Disp	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					7. Title and Amou Securities Underly Derivative Securi (Instr. 3 and 4)		ying ty		of derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial
				Code V	V (A)	(D)	Date Exerc	isab	Expiration Date	Ti	tle Sha		Number of		(s) (Instr. 4)	7)	

Explanation of Responses:

(1) The reporting person is a member of Walton Enterprises, LLC ("Walton Enterprises"). The securities were contributed by Walton Enterprises to the Walton Family Holdings Trust (the "Trust"), a trust established for the benefit of the holders of the membership interests of Walton Enterprises, on April 8, 2015 (the "Transaction"). Following the Transaction, Walton Enterprises owns 1,415,891,131 shares of Common Stock. The reporting person disclaims beneficial ownership of the reported securities held by Walton Enterprises except to the extent of its pecuniary interest therein.

Reporting Owners

reporting owners											
Deporting Orymon Name / Address	Relationships										
Reporting Owner Name / Address	Director	10% Owner	Officer	Other							
John T. Walton Estate Trust											
P.O. BOX 1860		X		1							
BENTONVILLE, AR 72712											

Signatures

/s/ Jennifer F. Rudolph, by power of attorney

** 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.