

[] 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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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	2. Issuer Name and Ticker or Trading Symbol						ol		5. Relationship of Reporting Person(s) to Issuer			
									_			(Check all app	olicable)			
Lore Marc F				1	Walm	ıart Iı	1c. [WM	1T]							
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							Director				
												"	X Officer (give title below) Other (specify below) Executive Vice President			
221 RIVER STREET, 8TH FLOOR					3/20/2018							Executive Vi	ce Presido	ent		
(Street)				4	4. If Amendment, Date Original Filed (MM/DD/YYYY)						Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
***	*** 0=00	•														
HOBOKEN, NJ 07030												X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)					ı							roini incu by	Tomi med by More than One Reporting Person			
			Table I	- Non-D	erivat	ive Sec	urities Ac	quir	ed, Di	sposed o	f, or	Beneficially Own	ed			
1.Title of Security (Instr. 3)			. Trans. Date			3. Trans. Coo (Instr. 8)	de					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			7. Nature of Indirect	
				Execution Date, if any		(IIISII. 6)	(Instr. 3, 4 and 5)			(Instr. 3 and 4)	Transaction	iisaction(s)		Beneficial		
																Ownership (Instr. 4)
							a 1			(A) or	n :				(I) (Instr.	(Instr. 1)
							Code	V	Amoun 21880	(D)	Price	e			4)	
Common 3/20/2018				3/20/2018	F				<u>(1)</u>	D	\$87.4	3366363			D	
					1		l l					<u></u>				
	Tab	le II - Der	ivative S	Securitie	s Bene	ficially	Owned (e.g.	, puts,	calls, wa	arrar	its, options, conve	rtible sec	urities)		
1. Title of Derivate		Date	3A. Deeme		ıs. Code				6. Date Exercisable and 7		7. Titl	le and Amount of	8. Price of	9. Number of 10.		11. Nature
Security (Instr. 3)			Execution Date, if an		B) Derivati Acquired Disposed (Instr. 3,			Expiration Date				ities Underlying ative Security		derivative Securities Beneficially	Derivative	Beneficial Ownership
(msu. 5)			Dute, ii ui	,			d of (D)					3 and 4)	(Instr. 5)			
							4 and 5)							Owned Following	Security: Direct (D)	(Instr. 4)
								Date		Expiration		mount or Number of		Reported	or Indirect	
				Code	e V	(A)	(D)	Exe	rcisable	Date	Title	Shares		Transaction(s) (Instr. 4)	(1) (Instr. 4)	
			1	l.	•		`_					1	ļ.			
Explanation of	Responses	:														

(1) Represents stock units withheld to satisfy tax withholding obligations upon the partial vesting of previously reported 3,554,093 restricted stock units (the "RSUs") that were granted to the Reporting Person on September 19, 2016, in connection with, and in consideration of, the Issuer's acquisition of Jet.com, Inc. and the Reporting Person becoming an employee and executive officer of the Issuer. The Reporting Person cannot exercise voting rights over the remaining portion of the unvested RSUs.

Reporting Owners

Reporting Owner Name / Address		Relationships						
ľ	Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
	Lore Marc E.							
4	221 RIVER STREET, 8TH FLOOR			Executive Vice President				
]	HOBOKEN, NJ 07030							

Signatures

/s/ Kristopher A. Isham, by power of attorney	3/21/2018			
** Signature of Reporting Person	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 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.