

[] 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

702 S.W. 8TH STREET (Street) A If Amendment, Date Original Filed (MM/DD/YYYY) (Last) (First) (Middle) X Officer (give title below) X Officer (give title below) Executive Vice President 4. If Amendment, Date Original Filed (MM/DD/YYYY) 6. Individual or Joint/Group Filing (O	% Owner Other (speci	fy below)
McKenna Judith J Walmart Inc. [WMT] (Last) (First) (Middle) 702 S.W. 8TH STREET (Street) 4. If Amendment, Date Original Filed (MM/DD/YYYY) BENTONVILLE, AR 72716 (City) (State) (Zip) (Check all applicable) Director	Other (speci	
(Last) (First) (Middle) 3. Date of Earliest Transaction (MM/DD/YYYY) 4. If Amendment, Date Original Filed (MM/DD/YYYY) BENTONVILLE, AR 72716 (City) (State) (Zip) Director10% Executive Vice President 4. If Amendment, Date Original Filed (MM/DD/YYYY) 5. Individual or Joint/Group Filing (Company) The property of the polynomial Person in the property of	Other (speci	
(Last) (First) (Middle) 702 S.W. 8TH STREET (Street) 4. If Amendment, Date Original Filed (MM/DD/YYYY) (City) (State) (Zip) 4. Date of Earliest Transaction (MM/DD/YYYY) Lagrange	Other (speci	
702 S.W. 8TH STREET (Street) 4. If Amendment, Date Original Filed (MM/DD/YYYY) 4. If Amendment, Date Original Filed (MM/DD/YYYY) 5. Individual or Joint/Group Filing (C X Form filed by One Reporting Person Form filed by More than One Reporting Person Form filed by More than One Reporting Person	(Check Appl	
(Street) 4. If Amendment, Date Original Filed (MM/DD/YYYY) 4. If Amendment, Date Original Filed (MM/DD/YYYY) 6. Individual or Joint/Group Filing (C X Form filed by One Reporting Person Form filed by More than One Reporting Per		licable Line)
BENTONVILLE, AR 72716 (City) (State) (Zip) X Form filed by One Reporting Person Form filed by More than One Reporting Person Form Form Form Form Form Form Form Form		licable Line)
(City) (State) (Zip) — Form filed by More than One Reporting Per	erson	
(City) (State) (Zip) — Form filed by More than One Reporting Per	erson	
Table I. Non Derivative Securities Acquired Disposed of an Reneficially Owned		ŀ
radie i - Non-Derivative Securities Acquired. Disdosed of or Deficially Owned		ŀ
	6.	7. Nature
(Instr. 3) Execution (Instr. 8) or Disposed of (D) Following Reported Transaction(s)	Ownership	of Indirect
	Form: Direct (D)	Beneficial Ownership
		(Instr. 4)
	(1) (IIIsti . 4)	
Common 4/1/2018 F 1534 D \$88.97 127589.331	D	
Common 32900.679	I	By spouse
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)		
	10. Ownership Form of Indirect Beneficial	
Price of Disposed of (D) (Instr. 3 and 4) (Instr. 5) Beneficially I		Ownership
	Security: Direct (D)	(Instr. 4)
Date Expiration Title Amount or Number of Reported of	or Indirect	
Exercisable Date Snares Transaction(s) ((1) (Instr. 4)	

Explanation of Responses:

(1) Represents shares withheld for taxes upon the vesting of previously-reported restricted stock that was granted to the Reporting Person on April 1, 2013.

Reporting Owners

Reporting Owner Name / Address	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
McKenna Judith J				
702 S.W. 8TH STREET			Executive Vice President	
BENTONVILLE, AR 72716				

Signatures

/s/ Jennifer F. Rudolph, by power of attorney	4/3/201	
**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.