

[] 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. I | 2. Issuer Name and Ticker or Trading Symbol | | | | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---------------------------------------|-------------------|-----------|---|--------|--|--|-------------|---|-----------|--------------------|---|---|----------------------------|--|---|---|--|
| Conde Cesar | | | | | W | Walmart Inc. [WMT] | | | | | | | | | | | | |
| (Last) | (First) | (Middle) | | | 3. I | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | X _ Director 10% Owner Officer (give title below) Other (specify below) | | | | | | |
| 702 S.W. 8TH STREET | | | | | | 6/5/2019 | | | | | | | | | | | | |
| (Street) | | | | | 4. I | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| BENTONVILLE, AR 72716 (City) (State) (Zip) | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | | Table l | I - Non | -Der | ivati | ve Secu | ırities Acc | quire | ed, Dis | sposed o | f, or | Bei | neficially Owne | d | | | - |
| 1.Title of Security (Instr. 3) | | | Date | 2A. Deemed Execution Date, if any | | 3. Trans. Co (Instr. 8) | or Disposed of (Instr. 3, 4 and 5 | | osed of (D 3, 4 and 5) (A) or |) ` | . F | 5. Amount of Securities Beneficially Following Reported Transaction(s) (Instr. 3 and 4) | | illy Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | | |
| Common | | | | 6/5/201 | 19 | | | A | | 1676 | <u>1)</u> A | \$0 |) | : | 2377 | | D | |
| | Tabl | le II - Der | ivative | Securi | ties E | Bene | ficially | Owned (| e.g. , | puts, | calls, w | arran | nts, | , options, conve | rtible sec | urities) | | |
| 1. Title of Derivate Security (Instr. 3) | or Exercise Price of Derivative | 3. Trans. Date | Execution | BA. Deemed Execution Date, if any | | Code | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date | | | 7. Title and A Securities Un Derivative Se (Instr. 3 and 4 | | s Underlying e Security | Derivative Security | Securities Beneficially Owned | Ownership Form of Derivative Security: | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | Security | | | C | ode | V | (A) | (D) | Date Exerc | cisable l | Expiration Date | Title | | nount or Number of ares | | Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | |

Explanation of Responses:

(1) Represents the annual equity grant as part of the Reporting Person's non-management director compensation.

Reporting Owners

| Danarina Overnar Nama / Address | Relationships | | | | | | |
|---------------------------------|---------------|---------------------------|--|-------|--|--|--|
| Reporting Owner Name / Address | Director | ector 10% Owner Officer O | | Other | | | |
| Conde Cesar | | | | | | | |
| 702 S.W. 8TH STREET | X | | | | | | |
| BENTONVILLE, AR 72716 | | | | | | | |

Signatures

| /s/ Geoffrey W. Edwards, by power of attorney | 6/7/2019 |
|---|----------|
| ** 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.