

[] 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. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer						
											(Check all applicable)						
McKenna Judith J				Walmart Inc. [WMT]													
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner						
											X Officer (g			Other (speci	fy below)		
702 S.W. 8TH STREET				9/6/2018							Executive Vic	e Presido	ent				
(Street	:)		4.	. If An	nendme	nt, Date	Ori	ginal Fi	led (MI	M/DE)/YYY	(Y)	6. Individual o	r Joint/G	roup Filing (Check Appl	icable Line)
BENTONVILLE, AR	72716												Y Form filed b	v One Reno	rting Person		
(City) (State) (Zip)											X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State	(Zip)											1				
	-	Γable I ₋ N	on_De	erivati	ve Seci	rities /	cai	uired D	isnose	d of	or	Ren	eficially Owne	d			
1.Title of Security						Trans. Co	_	·							ially Owned	6.	7. Nature
1.Title of Security (Instr. 3)			1	Execution Date, if any		(Instr. 8)		Disposed of (D)				1	Following Reported Transaction(s) (Instr. 3 and 4) Own Form			Ownership of Indirect	of Indirect
								(Instr. 3, 4 and 5)				Form: Direct (D)				Beneficial Ownership	
																or Indirect	(Instr. 4)
						Code	V	Amount	(A) or (D)		Price					(I) (Instr. 4)	
Common		9/6/20	18			S		12111	D	\$96.	3052	<u>(1)</u>	11:	5478.331		D	
Common													32	900.679		I	By spouse
Table	II - Deriv	vative Secu	ırities	Bene	ficially	Owned	(e.	g., puts	, calls	, wa	rran	ıts,	options, conve	rtible sec	urities)		
					5. Number of Derivative Securities Acquired (A) or Disposed of (D)			Derivative						11. Nature			
Security Conversion I (Instr. 3) Conversion or Exercise		Execution Date, if any	(Instr. 8	3)			es E				Securities Underlying Derivative Security (Instr. 3 and 4)			(Instr. 5)	erivative Securities	Derivative	Beneficial Ownership
Price of		, ,													Beneficially		
Derivative Security		ŀ		1	(Instr. 3,	tr. 3, 4 and 5)			1						Owned Following	Security: Direct (D)	(Instr. 4)
				le V (A				Date	Expiration Date				nount or Number of		Reported Transaction(s)	or Indirect	
			Code		(A)			Exercisable				Shares			(Instr. 4)	(1) (IIISII . 4)	
			Code	· V	(A)	(D)									(Instr. 4)	4)	

Explanation of Responses:

(1) This sale was executed in multiple trades ranging from \$96.32 - 96.30, inclusive. The price reported reflects the weighted average sales price. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and prices at which the transaction was effected.

Reporting Owners

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

Signatures

/s/ Jennifer F. Rudolph, by power of attorney	9/7/2018		
**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.