

[] 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								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
John T. Walton Estate Trust						Walmart Inc. [ WMT ]									,				
(Last) (First) (Middle)					3.	3. Date of Earliest Transaction (MM/DD/YYYY)								DirectorX 10% Owner Officer (give title below) Other (specify below)					
P.O. BOX 1860						3/5/2020									Officer (giv	e title below	v)Ou	iei (specify t	below)
(Street)														6. Individual or Joint/Group Filing (Check Applicable Line)					
BENTONVILLE, AR 72712 (City) (State) (Zip)														X Form filed by	X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Tabl	e I - Non	-De	rivati	ive Se	curities A	Acqu	ıire	ed, Dis	posed	of,	or Be	eneficially Owne	ed			
1. Title of Security (Instr. 3)  2. Trans. Dat					e 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquire Disposed of (D) (Instr. 3, 4 and 5)			red (	(A) or	5. Amount of Securi Following Reported (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Ownership Form:	Beneficial	
								Code	v		Amoun		.) or D)	Price				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock 3/5/2020				)			J <u>(1)</u>	v	41	15000000	<u>(1)</u>	D	\$0 <u>(1)</u>	1000891131		I (1)	By Limited Liability Company		
	Tab	ole II - De	rivati	ve Secur	ities	Bene	eficial	y Owne	d ( <i>e.</i> ¿	<b>g.</b> , ]	puts, c	alls, w	arr	rants,	options, conver	tible sec	urities)		
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	Execu	A. Deemed 4. T (Instance of A. T) (Instance of A. T			Derivat Acquire Dispose	Number of erivative Securities cquired (A) or isposed of (D) nstr. 3, 4 and 5)		5. Date Exercisable and Expiration Date			Se De	ecuritie	s Underlying e Security		Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			(	Code	v	(A)	(D)		ate exerc	cisable E	Expiratio Date	n Ti		mount or Number of ares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

### **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 03/05/2020 (the "Transaction"). Following the Transaction, Walton Enterprises owns 1,000,891,131 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**

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

#### **Signatures**

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

\*\*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.