

WAL MART STORES INC

Reported by SCHOEWE THOMAS M

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/20/08 for the Period Ending 08/18/08

Address 702 SOUTHWEST 8TH ST

BENTONVILLE, AR 72716

Telephone 5012734000

CIK 0000104169

Symbol WMT

SIC Code 5331 - Variety Stores

Industry Retail (Department & Discount)

Sector Services

Fiscal Year 01/31





[] 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 Expires: February 28, 2011 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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) 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)						
SCHOEWE 1	ГНОМА	SM				L MA MT]	RT	ST	ORI	ES I	NC	C		Directo	or	_	10% O	wner
(Last) (First) (Middle)			3	3. Date of Earliest Transaction (MM/DD/YYYY)							/DD/YYY	below)	X Officer (give title below) Other (specify below) Other (specify below)					
702 S.W. 8TH STREET					8/18/2008													
	(Street)					Amendi DD/YYYY		, Dat	te Ori	gina	l Fil	led		6. Individu Applicable Li	ual or Joi	nt/Group l	Filing (Che	eck
BENTONVII (City)	(State)	Z 72716 (Zip)														Reporting Per than One Rep		n
		Table 1	I - Non-l	Deriv	vati	ive Secu	rities	s Ac	quire	ed, I	Dispo	osed of,	, or	Beneficially	y Owned	[
1.Title of Security (Instr. 3)				2. Trans. Date		2A. Deemed Execution Date, if	3. Tr Code (Inst	(A) or Dispos		osed	sed of (D) Foll		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership o Form: B	7. Nature of Indirect Beneficial Ownership	
			any			Coo	de V	Amo	l i	A) or O)	Price				or Indirect (Instr. 4) (I) (Instr. 4)			
Common Stock				8/18/2	2008		M	1	8805	3	4 \$	550.70		45	8204		D	
Common Stock				8/18/2	2008		s		8253	7	D \$5	59.2015		37	5667		D	
Common Stock				8/18/2	2008		F (1)	5510	6	D \$	559.24		37	0151		D	
Common Stock														362	3622 ⁽²⁾		I	By Profit Sharing and 401 (k)
Tab	ole II - De	rivative	Securiti	es Be	ene	ficially (Own	ed (e.g. ,	put	s, ca	ılls, waı	rrai	nts, options,	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Trans. Date		3A. Deemed Execution Date, if any	4. Trans Code (Instr 8)	Securities		(A) or of (D)	and Expired and Ex		ercisable ttion Date			es U ive S		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A) (I	D)	Date Exer	cisable		ratio	Title	N	Amount or Number of Chares		Transaction (s) (Instr. 4)	4)	
Stock Options	\$50.70	8/18/2008		M		880:	53		(3)	3/8/	2011	Commo Stock	n	88053	\$0	0	D	

Explanation of Responses:

- (1) Includes shares that were withheld to pay taxes upon the exercise of stock options.
- (2) Balance adjusted to reflect shares acquired through the Wal-Mart Stores, Inc. Profit Sharing and 401(k) Plan.
- (3) These options are exercisable in 5 equal annual increments each year after the grant date.

Reporting Owners

Reporting Owner Name / Address	Relationships					
reporting owner reame, reacress						

	Director	10% Owner	Officer	Other
SCHOEWE THOMAS M				
702 S.W. 8TH STREET			Exec VP and CFO	
BENTONVILLE, AR 72716-0215				

Signatures

/s/ Geoffrey W. Edwards, By Power of Attorney	8/20/2008
** 0:	Date

** Signature of Reporting Person

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.