WAL MART STORES INC  
Reported by  
GLASS DAVID D  

FORM 4  
(Statement of Changes in Beneficial Ownership)  

Filed 04/01/04 for the Period Ending 03/31/04  

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
TABLE I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)  2. Trans. Date  3. Trans. Code (Instr. 8)  4. Securities Acquired (A) or Disposed of (D) (Instr. 3 and 4)  5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)  6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)  7. Nature of Indirect Beneficial Ownership (Instr. 4)

| Common Stock | 3/31/2004 | S | 186003.00 | D | $60.00 | 500000.00 | I | LLC |

TABLE II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative 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) | 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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | 8. Price Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

| Code | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Address | Relationships
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GLASS DAVID D  702 SOUTHWEST 8TH STREET  BENTONVILLE, AR 72716 | Director 10% Owner  Officer  Other

X  Chairman, Exec Com of Board

Signatures

/is/ David D. Glass  3/31/2004

** 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).


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.