WAL MART STORES INC
Reported by
FORD ROLLIN L.

FORM 4
(Statement of Changes in Beneficial Ownership)

Filed 01/25/11 for the Period Ending 01/24/11

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
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 *
   
   Ford Rollin L.
   
   (Last) (First) (Middle)
   
   702 S.W. 8TH STREET
   
   BENTONVILLE, AR 72716-0215

2. Issuer Name and Ticker or Trading Symbol
   
   WAL MART STORES INC [ WMT ]

3. Date of Earliest Transaction (MM/DD/YYYY)
   
   1/24/2011

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

   X Officer (give title below)
   
   EVP and CIO

7. Nature of Indirect Beneficial Ownership (Instr. 4)

   Code V Amount or Number of Shares
   
   (A) or (D) Price
   
   720 (1) D $55.73 94495.059 D
   
   Common Stock
   
   8415 1
   
   Common Stock
   
   2397.152 (2) I
   
   Common Stock
   
   13707.164 (3) I
   
   Common Stock
   
   2140 1
   
   Common Stock

Explanation of Responses:

(1) Represents shares withheld to satisfy tax withholding obligations upon the vesting of restricted stock.

(2) Balance adjusted to reflect shares acquired through the Wal-Mart Stores, Inc. Profit Sharing and 401(k) Plan.

(3) Balance adjusted to reflect shares acquired through the Wal-Mart Stores, Inc. 2004 Associate Stock Purchase Plan.

Reporting Owners

Reporting Owner Name / Address Relationships

Ford Rollin L. Director 10% Owner Officer Other
** Signatures


** 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).


Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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