

WAL MART STORES INC

Reported by CHAMBERS MARY SUSAN

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/06/14 for the Period Ending 03/04/14

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

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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								Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Chambers Mary Susan						WAL MART STORES INC [WMT]									or	_	10% O	wner
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)								X Officer (give title below) Other (specify below)				
702 S.W. 8TH STREET							3/4/2014								Vice Pr	esident		
						4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)				
BENTONVILLE, AR 72716-0215														X _ Form filed by One Reporting Person				
(City) (State) (Zip)													Form filed by More than One Reporting Person					
		Tab	ole I - No	n-De	eriva	ativ	e Securi	ties Acq	μui	ired, Di	isp	osed	d of, or l	Beneficially	y Owned			
1				2. Trans. Date		2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securi Acquired Disposed (Instr. 3,	l (A l of	(A) or Follow of (D) (Instr.		Amount of Securities Beneficially Owned lowing Reported Transaction(s) str. 3 and 4)		Ownership Form: Direct (D)	Beneficial Ownership		
							any	Code	v	Amount	or (D)		rice				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 3/4						1/2014		A		13772 (1)	A	\$74	1.12	216934.794		D		
Common Stock 3/4)14		F		6742 (2)	D	\$74	1.12	210192.794 (3)			D	
Common Stock														492.2843			I	By 401(k)
Tal	ole II - De	rivati	ive Secur	ities	Bei	nefi	cially O	wned (2.g	, puts	, ca	ılls,	warran	its, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	itle of Derivate 2. 3. 3A. 4. Trans. In tr. 3) Conversion Trans. Deemed Trans or Exercise Date Execution Code			5. Nur Deriva Securi Acquii Dispos		mber of ative ities	6. Date E	Exercisable piration Date		7. S. D. (I	7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		unt of lying ity		9. Number of derivative Securities Beneficially Owned Following	Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial	
				Code	v	1 1 1 1 1					" T		Shares	TAUTHUCI OI		(s) (Instr. 4)		

Explanation of Responses:

- (1) Represents the vesting of performance share units for the three-year period ending January 31, 2014, as certified by the Compensation, Nominating and Governance Committee on March 4, 2014.
- (2) Represents shares withheld to satisfy tax withholding obligations upon the vesting of performance share units.
- (3) Balance adjusted to reflect shares acquired through the Wal-Mart Stores, Inc. 2004 Associate Stock Purchase Plan.

Reporting Owners

Deposition Overson Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Chambers Mary Susan										
702 S.W. 8TH STREET		Executive Vice Presid								
BENTONVILLE, AR 72716-0215										

/s/ Geoffrey W. Edwards, by Power of Attorney

3/6/2014

** 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.