FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROV | Δ | V | O) | R | Р | Р | Α | ΛB | ЛC | (|
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| hours per response: | 0.5 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | | of occasion 30(ii) of the investment company Act of 1340 | | | | | | | | |
|---|--|-------|--|--|--|--|--|--|--|--|--|
| Name and Address of Reporting Person* Kumar Suresh | | | 2. Issuer Name and Ticker or Trading Symbol Walmart Inc. [WMT] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | | |
| (Last) 1525 11TH AV | ast) (First) (Middle) 325 11TH AVENUE | | 3. Date of Earliest Transaction (Month/Day/Year) 01/31/2022 | X Officer (give title Other (specify below) Chief Technology Officer | | | | | | | |
| (Street) SEATTLE | WA | 98122 | If Amendment, Date of Original Filed (Month/Day/Year) | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transac Code (Ir 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---------------------------------|---|--|---------------|----------|----------------------------------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (IIISU. 4) |
| Common | 01/31/2022 | | F | | 26,472(1) | D | \$137.52 | 344,216 | D | |

Table II - Derivative Securities Acquired, Disposed of, or 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. Transaction Date (Month/Day/Year) | 4. Transac Code (li 8) | | 5. Num Derivat Securit Acquire or Disp (D) (Ins and 5) | ive ies ed (A) osed of | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Securities Underlying ar) Derivative Security (Instr. | | Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | Ownership of Form: Bodirect (D) O | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|--|---------------------------------|---|--|---------------------------------|--|--------------------|--|----------------------------------|--------------------------------------|--|-----------------------------------|--|
| | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |

Explanation of Responses:

1. Represents stock units withheld to satisfy tax withholding obligations upon the vesting of performance-based restricted stock units.

/s/ Geoffrey W. Edwards, by power of attorney

02/02/2022

** 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 Number.