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| WALTON | S ROBSON | | | | | | | | | | | | |
|--|---|---|--|---|----------------------|-----------|--|--|---|---|---|--|--|
| Form 4 June 21, 20 | 110 | | | | | | | | | | | | |
| FORI | | ~~.~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | ~~~ . | | | C | OMB APPR | OVAL | | |
| UNITED STATES SECO | | | | URITIES AND EXCHANGE COMMISSION Vashington, D.C. 20549 | | | | | OME Num | | 235-0287 | | |
| Check this box if no longer STATEMENT OF CHA | | | ANGES IN BENEFICIAL OWNERSHIP OF SECURITIES a 16(a) of the Securities Exchange Act of 1934, Utility Holding Company Act of 1935 or Sectio Investment Company Act of 1940 | | | | | | res. | nuary 31, 2005 | | | |
| Subject to Section 16. Form 4 or Form 5 obligations may continue. Filed pursuant to Section Section 17(a) of the Public U 20(b) of the L | | | | | | | | | Estimated average burden hours per response 0.5 | | | | |
| <i>See</i> Ins 1(b). | truction | 50(II) (| JI UIC I | liivesuiie | nt Compa | ly Ac | 1011940 |) | | | | | |
| (Print or Type | e Responses) | | | | | | | | | | | | |
| WALTON S ROBSON Symbol | | | | nd Ticker or WMT1 | Tradii | -0 | 5. Relationship of Reporting Person(s) to Issuer | | | | | | |
| (Last) | (First) | | | | | | | all applicable) | | | | | |
| | | | (Month 06/19/ | h/Day/Year) 9/2018 | | | | X_ DirectorX_ 10% Owner Officer (give titleOther (specify below)below) | | | | | |
| | (Street) | | | nendment, ionth/Day/Y | Date Origina ear) | ıl | | 6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by Mo | ne Repo | orting Person | | | |
| BENTON | VILLE, AR 7271 | 6-0215 | | | | | | Person | | i Ole Reporti | lig | | |
| (City) | (State) | (Zip) | Ta | ble I - Non | -Derivative | Secur | ities Acqu | ired, Disposed of, | or Be | neficially O | wned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | f TransactionDisposed of (D) Code (Instr. 3, 4 and 5) | | | | d (A) or 5. Amount of Securities Beneficially O Following Rep Transaction(s) (Instr. 3 and 4) | | 6. Ownership wned Form: orted Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code V | Amount | or (D) | Price | (| (Instr. 4) | | | | |
| Common Stock | 06/19/2018 | | | J <u>(1)</u> | 160,000 (1) | D | \$ 0 <u>(1)</u> | 74,977,905 | | I | By Trust | | |
| Common Stock | 06/19/2018 | | | J <u>(2)</u> | 160,000 (2) | А | \$ 0 <u>(2)</u> | 3,507,254.31 | 56 | D | | | |
| Common Stock | 06/19/2018 | | | S | 550,958 | D | \$ 82.9753 (<u>3)</u> | 5 74,426,947 | | I | By Trust (4) | | |
| Common Stock | | | | | | | | 1,415,891,13 | 31 | I | By Limited Liability Company (5) | | |

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 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. Transact Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Title Amour Underl Securit (Instr. 1 | nt of ying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|--------------------------------------|---|---------------------|--------------------|---|--|---|--|
| | | | Code V | · (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|--|
| FB | Director | 10% Owner | Officer | Other | | | | |
| WALTON S ROBSON 702 S.W. 8TH STREET BENTONVILLE, AR 72716-0215 | Х | Х | | | | | | |
| Signatures | | | | | | | | |
| /s/ Jennifer F. Rudolph, by power o attorney | of 06/21/2018 | | | | | | | |

Explanation of Responses:

**Signature of Reporting Person

- * 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).
- (1) The transaction is a distribution of 160,000 shares of Common Stock, for no consideration, by the Walton Family Holdings Trust (the "Trust") to the reporting person (the "Distribution").

Date

(2) The transaction is the receipt of 160,000 shares of Common Stock, for no consideration, in the Distribution.

This sale from the Trust was executed in multiple trades at prices ranging from \$82.50 to \$83.39, inclusive. The price reported above reflects the weighted average sale price. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the

(3) reflects the weighted average sate piece. The reporting person undertaces to provide to the issuer, any security holder of the issuer, of the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and prices at which the transaction was effected.

(4)

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The reporting person is a trustee of the Trust, the entity that owns 74,426,947 shares of Common Stock. The reporting person disclaims beneficial ownership of the reported securities held by the Trust except to the extent of his pecuniary interest therein.

The reporting person is a member of Walton Enterprises, LLC, the entity that owns 1,415,891,131 shares of Common Stock. The
 (5) reporting person disclaims beneficial ownership of the reported securities held by such LLC except to the extent of his pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.