FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Heckman Todd						2. Issuer Name and Ticker or Trading Symbol Walgreens Boots Alliance, Inc. [WBA]									ck all app Direc	tor		10% Ov	wner
(Last)	`	rst) (N	Middle)	INC.		3. Date of Earliest Transaction (Month/Day/Year) 10/25/2023									below	ficer (give title low) Interim Global (Other (s below) Controller	specify
108 WILMOT ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) DEERFI	ELD IL	6	0015			X Form filed by One Reporting F Form filed by More than One R Person											J		
(City)	Rul	Rule 10b5-1(c) Transaction Indication																	
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	, Dis	posed of	, or B	ene	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execu y/Year) if any		Deemed ution Date, / th/Day/Year)				es Acquired (A) Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Reporte	ies cially Following	Forn (D) c	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) c (D)	or P	rice		ction(s)			(111511. 4)
Common Stock 10/25/2						2023					2,898	A		\$ <mark>0</mark>	13,	,062(2)		D	
Common Stock 10/25/2					2023				F ⁽³⁾		849	D	\$	21.37	12,	2,213(2)		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)	if any	emed ion Date, /Day/Year)		nsaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbe of Title Shares		Str.	8. Price of Derivative Security Instr. 5) Benefic Owned Followin Reporte Transac (Instr. 4		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Shares issued upon settlement of performance share award (not a derivative security within the meaning of Rule 16a-1(c)) granted on November 1, 2020 under the Walgreens Boots Alliance, Inc. 2013 Omnibus Incentive Plan.
- 2. Includes shares underlying restricted stock units issued in lieu of dividends (through October 15, 2023) on outstanding restricted stock units.
- 3. Disposition relating to the satisfaction of tax withholding obligations upon the settlement of award granted in accordance with Rule 16b-3.

Remarks:

Mr. Heckman's full title is Vice President, Interim Global Controller and Chief Accounting Officer.

/s/ Todd Heckman by Cherita Thomas, Attorney-in-Fact

10/27/2023

** 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.