FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
vasimigton,	D.O.	200-0

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours nor roonones:	0.5								

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

1. Name and Address of Reporting Person* <u>Gray Danielle</u>					2. Issuer Name and Ticker or Trading Symbol Walgreens Boots Alliance, Inc. [ WBA ]										ck all applic Directo	able)			Ssuer  Dwner (specify	
(Last) (First) (Middle) C/O WALGREENS BOOTS ALLIANCE, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2021										below)					
108 WILMOT ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year) 6									6. Individual or Joint/Group Filing (Check Applicable					
(Street) DEERFIELD IL 60015					- II Americanent, Date of Original Flied (World#Day/Teal)								Line)							
(City)	(9	tate)	(Zip)												F 613011	ı				
		Tak	ole I - Non-	-Deriva	ative	e Se	curities	s Acc	quired,	Dis	posed o	of, or Be	nefi	cially	/ Owned					
Date				Date	ansaction hth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Disposed Of Code (Instr. 5)					5. Amour Securitie Beneficia Owned F	es For ally (D) Following (I) (		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		rice	Transact (Instr. 3 a	ion(s)				
Common Stock 11/0					1/2021		A <sup>(1)</sup>		11,99	11,992 A		\$ <mark>0</mark>	11,992			D				
			Table II - D									or Ben ble sec			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	ate, Ti	4. Transaction Code (Insti				6. Date Exercisable an Expiration Date (Month/Day/Year)		!	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				c	ode	v	(A)		Date Exercisab		Expiration Date	Title	or	ount nber ıres						
Employee Stock Option (Right to	\$47.32	11/01/2021			A		71,252		(2)	1	1/01/2031	Common Stock	71,	252	\$0	71,25	2	D		

## **Explanation of Responses:**

- 1. Restricted stock unit award granted under the Walgreens Boots Alliance, Inc. 2021 Omnibus Incentive Plan (together with the related award agreement and the applicable election forms thereunder, the "Plan") vests in one-third increments on each of the first, second and third anniversaries of the November 1, 2021 date of grant, subject to acceleration or forfeiture in certain circumstances in accordance with the terms
- 2. The option vests with respect to 23,727 shares on November 1, 2022, with respect to 23,727 shares on November 1, 2023, and with respect to 23,798 shares on November 1, 2024, subject to acceleration or forfeiture in certain circumstances in accordance with the terms and conditions of the Walgreens Boots Alliance, Inc. 2021 Omnibus Incentive Plan (together with the related agreement thereunder).

## Remarks:

/s/ Danielle Gray by Paul Ingram, Attorney-in-Fact

11/03/2021

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.