FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DС	20549	
vasimigton,	D.O.	20040	

STATEMENT	OF CHANG	SES IN BEI	NEFICIAL C	WNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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hours per response:	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

Name and Address of Reporting Person* DILLARD WILLIAM T II					2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) 1600 CA	(Fir	,	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/11/2023						X Officer (give title Other (specify below) CEO, CHAIRMAN OF BOARD								
(Street) LITTLE	ROCK AF	t 7	2201									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(Sta	ate) (2	<u>Z</u> ip)		Ru	le 10)b5-	1(c)	Tra	nsa	ction Ind	icatio	on I	reisuii					
Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In										uction or w	ritten pla	an that is in	tended to						
		Table	I - N	on-Deriva	tive \$	Secu	rities	Acc	quire	d, Di	sposed of	f, or E	Benefici	ally Own	ed				
Date		2. Transaction Date (Month/Day/	Year)	Execution Date,				Acquired (A) or (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following		Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
							Ī	Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Class A 04/11/20:				23				Α		1,552	A	\$311.7	1 942	942,948		D			
Common Class A - Retirement Plan														Ģ)5		D		
Common	Class A													41,496 ⁽¹⁾ I See Footnote				See Footnote ⁽¹⁾	
Common	Class A													7,300 ⁽²⁾ I See Footnote				See Footnote ⁽²⁾	
	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)	Exec if any	Deemed ution Date, / th/Day/Year)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date (Month/Day/Year) Amount Security Underlyi Derivativ Security 3 and 4)			int of ities rlying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or Number of Shares						

Explanation of Responses:

- 1. These shares are held by W.D. Company, Inc. The reporting person owns 27.4% of W.D. Company, Inc. and is one of its directors and officers. W. D. Company, Inc. also holds 3,985,776 shares of Class B Common Stock, which are convertible into shares of Class A Common Stock on a one-for-one basis.
- 2. Trustee of GST Trust

Remarks:

The reporting person disclaims beneficial ownership of the shares reported herein as indirectly beneficially owned, except to the extent of his pecuniary interest therein.

/s/ William Dillard II 04/13/2023

** 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.