FORM 4

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

Washington, D.C. 20549

IIILO 7	THE EXCHANGE OF	•
Machinaton	D.C. 20540	

OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number:	3235-028								
Estimated average burden									
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed 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*     Mahaffy Denise Dillard					2. Issuer Name <b>and</b> Ticker or Trading Symbol DILLARD'S, INC. [ DDS ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)      Director 10% Owner						
(Last) 1600 CA	ust) (First) (Middle) 00 CANTRELL RD					3. Date of Earliest Transaction (Month/Day/Year) 10/28/2024								Officer (give title Other (specify below) below)  SENIOR VICE PRESIDENT					
(Street) LITTLE ROCK AR 72201 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/				on	n 2A. Deemed Execution Date, if any			acquired, Disposed of, or Benef 3. Transaction Disposed Of (D) (Instr. 3, 4 5)				d (A) or	or 5. Amount of			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Class A 10/28/2				10/28/20	24			Α		14	A	\$385.	48	8 136,185			D		
Common Class A - Retirement Plan															26,	810		D	
Common Class A													7,300 <sup>(1)</sup>		I		See Footnote <sup>(1)</sup>		
		Tal	ble II								oosed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if	Exec if any	Deemed ution Date, / th/Day/Year)	4. Transa Code 8)				Expir	te Exe ration I th/Day		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying itive ity (Instr.	Di Se (II	3. Price of Derivative Security Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownershi t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	er					

## **Explanation of Responses:**

1. Trustee of GST Trust

10/30/2024 /s/ Denise Dillard Mahaffy

\*\* 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.