Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

A / I- ! 4	D 0	00540
Vashington,	D.C.	20549

STATEMENT	OF CHANGE	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 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* BOLTE TONY J						2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]								Check	all app Direc	,	ng Pe	rson(s) to Is 10% O Other (wner
(Last) 1600 CA	(Fir NTRELL F	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/03/2022								X				below)	specify
(Street) LITTLE (City)	ROCK AF		2201 Zip)		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv _ine) X	Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transact Date (Month/Day	Execution Date,				Disposed O	es Acquired (A) Of (D) (Instr. 3, 4		and Securi Benefi		ities Folicially (D		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) o (D)	Price)	Transa	saction(s) : 3 and 4)				
Common Class A 05/03			05/03/2	022		A		1	A	\$31	5.43		,448		D				
Common Class A - Retirement Plan											5		5,672		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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			Transaction Code (Instr.		rative rities ired r osed) : 3, 4	6. Date Exerc Expiration Da (Month/Day/V		ate Amount of		int of ities rlying ative ity (Instr	Der Sed (Ins	rivative (curity (str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

/s/ Tony J. Bolte

05/05/2022

** Signature of Reporting Person Date

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

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.

^{*} 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).