FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | 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

| 1. 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) | | | | | | |
|--|---|--|---------------------------------|---|---|--|---|------|--|---------|------------------------|--|--|--|---|---|--|--|---|
| DILLA | KD WIL | LIAM I II | | | 1211 | | | , 11 | <u></u> [| 220 | J | | | 7 | Direc | tor | | 10% | Owner |
| (Last) 1600 CA | (Fii NTRELL I | , | | 3. Date of Earliest Transaction (Month/Day/Year) 11/01/2022 | | | | | | | | y | X Officer (give title below) Other (specify below) CEO, Chairman of the Board | | | | | | |
| (Street) LITTLE ROCK AR 72201 | | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | on-Deriva | tive S | Secu | rities | Ac | quire | d, Di | sposed of | , or E | Benefi | cial | ly Own | ed | | | |
| Date | | | 2. Transaction Date (Month/Day/ | Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4, 5) | | | and Securitie Beneficia Owned F | | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Price | | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Class A 11/01 | | | 11/01/20 | 22 | | | | A | | 129 | A | \$333 | 3.74 | 941 | 1,622 | | D | | |
| Common Class A - Retirement Plan | | | | | | | | | | | | | | 145 | | | D | | |
| Common Class A | | | | | | | | | | | | | | | 41,4 | .96(1) | | I | See Footnote ⁽¹⁾ |
| Common Class A | | | | | | | | | | | | | | 7,300(2) | | I | | See Footnote ⁽²⁾ | |
| | | Tal | ble II | | | | | | | | posed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu | eemed ution Date, :h/Day/Year) | 4. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration [| | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (In | s. Price of Derivative Security Instr. 5) | 9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4) | re es ally eg d tion(s) | 10. Ownersi Form: Direct (I or Indire (I) (Instr. | Beneficial Ownership ect (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exer | cisable | Expiration Date | Title | Amour or Number of Shares | er | | | | | |

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 11/02/2022

** Signature of Reporting Person

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.