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

Washington, D.C	20549
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STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
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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* MATHENY DRUE					2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]									5. Relationship of Report (Check all applicable) X Director			rting Person(s) to I 10% C		
(Last) 1600 CA	`	,	(Middle)	3. Date of Ear 10/24/2022				ate of Earliest Transaction (Month/Day/Year) 24/2022							cer (give title w) Executive Vice Pro		belov	′ I
(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)	(·	(Zip)	Bi	1:	0		•		.l. D:			6	1	h. 0				
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				n 2A. Deemed Execution Date,			3. 4. Securities A			Acquired (A) or (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		Form:	Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transact (Instr. 3 a	ion(s)			(111501. 4)
Common	Class A			10/24/20	22	22			A		20	A	\$312	.11	410,484			D	
Common Class A - Retirement Plan													40,	409		D			
Common Class A														7,30	00(1)			See Footnote ⁽¹⁾	
Common Class A														65	0(2)			See Footnote ⁽²⁾	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
				Transa Code	Transaction (Code (Instr. 18)		. Number f Expiratio (Month/D ecurities cquired A) or isisposed f (D) nstr. 3, 4 nd 5)		ration [7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number derivative Securitie Beneficial Owned Following Reported Transact (Instr. 4)	ee Owners es Form: ally Direct (I or Indire d tion(s)		Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares	r					

Explanation of Responses:

- 1. Trustee of GST Trust
- 2. Owned by spouse

/s/ Drue Matheny

10/26/2022

** 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.