FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	: 0.5							

	Check this box if no longer subject
$\overline{}$	to Section 16. Form 4 or Form 5
	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* STOCKMAN JAMES D (Last) (First) (Middle) 1600 CANTRELL RD (Street) LITTLE ROCK AR 72201					2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS] 3. Date of Earliest Transaction (Month/Day/Year) 06/26/2023 4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Owne X Officer (give title below) VICE PRESIDENT 6. Individual or Joint/Group Filing (Check App Line) X Form filed by One Reporting Person					wner specify Applicable
(City)	(St	ate) (Z	Zip)		Form filed by More than One Rep Person Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is integrated to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/				on 2A. Deemed Execution Date,			3. 4. Securitie Transaction Code (Instr. 8) 4. Securitie Disposed C 5)			s Acqui	ired (A) c	r 5. Amo		ount of ties cially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Class A				06/26/2023				Code	v	Amount 23	(A) o (D)	Pilce	4.18	Repor Transa (Instr.			D	(1150.4)	
Common Class A - Retirement Plan					525							1432			0,892 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)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 8) Numl Of Deriv Secu Acqu (A) on Dispo of (D) (Instr and 5		rative rities nired r osed)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and or Numb of Title Share		nt er				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ James D Stockman

06/28/2023

** 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.