| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| 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

| OMB APP | ROVAL |
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| l | hours per response: | 0.5 |
| | Estimated average burden | |

| 1. Name and Address of Reporting Ferson | | | 2. Issuer Name and Ticker or Trading Symbol <u>DILLARD'S, INC.</u> [DDS] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---------|----------|--|--|--|---------------|--|--|--|
| MATHENY DRUE | | | <u>,</u> ,, | X | Director | 10% Owner | | | |
| (Last) (First) (Middle) 1600 CANTRELL ROAD | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2018 | X | Officer (give title Other (specif below) below) Executive Vice President | | | | |
| (Street) LITTLE ROCK | AR | 72201 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing (Form filed by One Report | ing Person | | | |
| (City) | (State) | (Zip) | | | Form filed by More than C Person | one Reporting | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned 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 | 12/31/2018 | | A | | 120 | Α | \$59.96 | 441,455 | D | |
| Common Class A - Retirement Plan | | | | | | | | 38,925 ⁽³⁾ | D | |
| Common Class A | | | | | | | | 7,300 ⁽¹⁾ | I | See Footnote ⁽¹⁾ |
| Common Class A | | | | | | | | 150 ⁽²⁾ | Ι | See Footnote ⁽²⁾ |

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) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|-----|-----|--|---|-------|---|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Trustee of GST Trust

2. Owned by spouse

3. Reflects a 401(k) disposition that has occurred since the date of the reporting person's last ownership report.

Remarks:

/s/ Drue Matheny

** Signature of Reporting Person

01/03/2019 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.