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
----------------	----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average	burden								
hours nor resnance	. 05								

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* BOLTE TONY J					2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]										all app Direc Office	tor er (give title	ng Per	10% Ov	ner
(Last) 1600 CA	(Fir NTRELL F	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/03/2022								A	below	,	resid	below) resident	
(Street) LITTLE ROCK AR 72201						4. If Amendment, Date of Original Filed (Month/Day/Year)								S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(St		Zip)	n Deriva	tive 9	Secu	ritios	- Acc	uired	Die	nosed of	or F	Renefic	nially.	Perso				
1. Title of Security (Instr. 3) 2. Tr			2. Transaction Date		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)		s Acqui	red (A) o	5. Amount of Securities Beneficially Owned Follow		unt of ties cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) o (D)	File		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Class A - Retirement Plan			01/03/2	:022		A		25	A	\$26			3,632 5,557		D D				
		Tal	ole II -							•	osed of, convertib			•	Owne	t			
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Executivity or Exercise (Month/Day/Year) if an		if any	emed tion Date, n/Day/Year)		Transaction Code (Instr.		vative vrities vired or osed v) r. 3, 4	Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sed (Ins	Price of vivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						v	(A)	(D)	Date Exercis	sable	expiration or Number of		Number	r					

Explanation of Responses:

/s/ Tony J. Bolte

01/05/2022

** 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).