FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549	
------------------------	--

OMB APPROVAL							
OMB Number: 3235-0							
Estimated average burden							
hours per response	: 0.5						

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(0). 3	ee instruction i	0.														
1. Name and Address of Reporting Person* DILLARD ALEX					2. Issuer Name <b>and</b> Ticker or Trading Symbol DILLARD'S, INC. DDS					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DILLARD ALEX				L J						✓ Direct	/ Director		10% Owner			
(Last) (First) (Middle) 1600 CANTRELL RD					3. Date of Earliest Transaction (Month/Day/Year) 11/25/2024					Officer (give title below)  PRESIDE			Other ( below)	specify		
											FRESIDENT					
				4 15 4	A 16 Assessed assess A Date of Original Filed (Month/DayA/car)											
(Street)				4. II AI	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)					
LITTLE ROCK AR 72201											Form filed by One Reporting Person					
											Form filed by More than One Reporting Person					
(City) (State) (Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)			2. Transacti Date (Month/Day	Year) if	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Disposed Of (5)		s Acquired (A) or f (D) (Instr. 3, 4 ar		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	Reporte Transac (Instr. 3	tion(s)		(1)	nstr. 4)	
Common	Class A		11/25/20	)24		A		19	A	\$467.9	1,01	8,150	D			
Common Class A											41	496	I	1	ee ootnote <sup>(1)</sup>	
Common Class A										7,	300	I		ee ootnote <sup>(2)</sup>		
Common Class A										36	,548	I		ee ootnote <sup>(3)</sup>		
Common Class A - Retirement Plan												0	D			
		Tal	ole II - Derivat (e.g., pı		curities Ac							d				
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year)		4. Transac Code (li 8)		Expiration Da (Month/Day/Yo		Date	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numboderivatival Securities Beneficial Owned Followin Reported Transact (Instr. 4)	e Owner For Oir Oir Oir Oir Oir Oir Oir Oir Oir Oi	nership m: ect (D) Indirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. These shares are held by W.D. Company, Inc. The reporting person owns 27.9% 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.

Exercisable

Expiration Date

- 2. Trustee of GST Trust
- 3. Owned by Spouse.

## 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.

and 5)

(A) (D)

> /s/ Alex Dillard 11/27/2024

\*\* Signature of Reporting Person Date

Amount Numbe

of Shares

Title

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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).

Code

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.