FORM 4

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

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

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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*   |                |                 |                                       |                         | 2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [ DDS ] |   |   |   |                                      |  |                        |   |   | Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |   |     |  |  |
|--|----------------|-----------------|---------------------------------------|-------------------------|---|---|---|---|--------------------------------------|--|------------------------|---|---|--|--|---|---|-----|--|--|
| MATHENY DRUE   |                |                 |                                       |                         |   |   |   |   |                                      |  |                        |   |   |  | C Direct   | tor   |   | 10% | Owner                                    |  |
| (Last)<br>1600 CA  | (Fi            | ,               | Middle                                | )                       |   | Date of Earliest Transaction (Month/Day/Year) 1/21/2022 |   |   |                                      |  |                        |   | y   | below  |  |   | belov   | ′ I |  |  |
| ,  | ROCK AI        |                 | 2201                                  |                         | 4. If <i>i</i>  | Amend   | ment,   | Date                                    | e of Original Filed (Month/Day/Year) |  |                        |   |   |  | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |     |  |  |
| (City)   | (St            | ate) (2         | Zip)                                  |                         |   |   |   |   |                                      |  |                        |   |   |  |  |   |   |     |  |  |
|  |                | Table           | I - N                                 | on-Deriva               | tive  | Secu  | rities  | Ac                                      | quire                                | d, Di  | sposed of              | f, or E   | Benef                                       | icial  | ly Own   | ed  |   |     |  |  |
| Date   |                |                 | 2. Transaction<br>Date<br>(Month/Day/ | Execui<br>Year) if any  |   | eemed<br>ution Date,<br>th/Day/Year)                    |   | 3.<br>Transaction<br>Code (Instr.<br>8) |                                      | 4. Securities Acquired (A) o<br>Disposed Of (D) (Instr. 3, 4 a<br>5) |                        |   | and Securities Beneficially Owned Following |  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  |   | 7. Nature of Indirect Beneficial Ownership                        |     |  |  |
|  |                |                 |                                       |                         |   |   |   |   |                                      | v  | Amount                 | (A) or<br>(D)   | Price                                       | ,  | Reported<br>Transaction(s)<br>(Instr. 3 and 4)   |   |   |     | (Instr. 4)                               |  |
| Common   | Common Class A |                 |                                       | 11/21/2022              |   |   |   |   | A                                    |  | 17                     | A   | \$35  | 8.89   | 410,533  |   |   | D   |  |  |
| Common   | Class A - I    | Retirement Plan |                                       |                         |   |   |   |   |                                      |  |                        |   |   |  | 40,433   |   |   | D   |  |  |
| Common   | Class A        |                 |                                       |                         |   |   |   |   |                                      |  |                        |   |   |  | 7,300(1)   |   |   | I   | See<br>Footnote <sup>(1)</sup>           |  |
| Common   | Class A        |                 |                                       |                         |   |   |   |   |                                      |  |                        |   |   |  | 65   | 0(2)  |   | I   | See<br>Footnote <sup>(2)</sup>           |  |
|  |                | Tal             | ole II                                | - Derivati<br>(e.g., pu |   |   |   |   |                                      |  | oosed of,<br>convertib |   |   |  | Owne   | d   |   |     |  |  |
| 1. Title of Derivative Security  (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year) (Month/Day/Year)  (Month/Day/Year) |                |                 |                                       | ution Date,             | 4.<br>Transaction<br>Code (Instr.<br>8)                             |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |   | Expi                                 | nte Exer<br>ration I<br>nth/Day                                      |                        | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |   | tr.  | . Price of<br>Perivative<br>Pecurity<br>Pecurity<br>Pecurity   | 9. Numb<br>derivativ<br>Securitie<br>Beneficia<br>Owned<br>Followin<br>Reported<br>Transact<br>(Instr. 4) | overes or India d tion(s)  Owner: Form: Direct or India (I) (Inst |     | Beneficial<br>Ownership<br>ct (Instr. 4) |  |
|  |                |                 |                                       | Cod                     |   | v   | (A)   | (D)                                     | Date<br>Exercisable                  |  | Expiration<br>Date     | Title   | or<br>Numb<br>of<br>Shares                  | er   |  |   |   |     |  |  |

## **Explanation of Responses:**

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

/s/ Drue Matheny

11/23/2022

\*\* Signature of Reporting Person Date

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).

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.