FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours ner resnonse.								

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Dillard Deborah						2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) 1600 CA	(Fii .NTRELL I	,	Middle))	3. Date of Earliest Transaction (Month/Day/Year) 06/27/2022									X	Office belov	er (give titl v)		10% Owner Other (specify below) ice President			
(Street) LITTLE (City)	ROCK AI		Z201 Zip)		4. If A	Line)										vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				2. Transaction Date (Month/Day/	Execution Date		Date, Transac Code (Ir			4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			and Securities Beneficially Owned Followin		es ally 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 Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Common Class A 06/27/202					22	22			A		25	Α	\$260.	0.96		4,808		D			
Common	Common Class A - Retirement Plan														25,	427		D			
Common Class A												7,300(1)			I S		e otnote ⁽¹⁾				
		Tal	ble II	- Derivati (e.g., pu							posed of, convertib				Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	eemed ution Date, / th/Day/Year)	4. Transa Code (8)	(Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed)	Expi (Mor	ration E hth/Day	(Year)	7. Title Amou	nt of ities lying ative ity (Instr.	Derivative Security (Instr. 5) 6. 1. 1. 1. 1. 1. 1. 1. 1. 1.		derivativ Securitie Beneficia Owned Following Reported	ecurities eneficially wned ollowing eported ransaction(s)		ip)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Trustee of GST Trust

/s/ Deborah Dillard

06/28/2022

** 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.