FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per respons	e: 0.5								

	Check this box if no longer subject
$\neg$	to 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

1. Name and Address of Reporting Person*  MUSGRAVE BRANT					2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [ DDS ]										all app Direc	onship of Reporti all applicable) Director		erson(s) to I 10% Ov Other (s	wner
(Last) 1600 CA	(Fii	•	,			3. Date of Earliest Transaction (Month/Day/Year) 05/22/2023									Officer (give title below)  CORPORAT			below)	·
(Street) LITTLE	t) TLE ROCK AR 72201				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication													
Check this box to indicate that a transaction w satisfy the affirmative defense conditions of R															ruction or wr	itten p	plan that is int	ended to	
		Table	I - No	on-Deriva	tive S	ecui	rities	Acc	uired,	Dis	posed of	, or E	Benefi	cially	/ Owr	ned			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)				Execution D			n Date, Transaction Code (Instr.			4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			, 4 and Secu Bene Own Follo		cially I ring	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) c (D)	Price	•	Repor Transa (Instr.	orted saction(s) r. 3 and 4)			
Common Class A 05/22/20					)23				A		14	A	A \$290		3,995		D		
Common Class A - Retirement Plan														8,299		D			
	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)	Exect if any	eemed ution Date, rth/Day/Year)		ransaction of Output of Ou		vative crities critied r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		rt		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

/s/ Brant Musgrave

05/24/2023

\*\* 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.