FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ton, D.C. 20549		OMB APP	ROVAL
	١Ē	OMP November	2005

	OMB Number:	3235-0287					
Estimated average burden							
Ш	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).

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* STOCKMAN JAMES D						2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]									k all app Direc	tor		10% Ov	vner	
(Last) 1600 CA	(F NTRELL	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/30/2024								X	X Officer (give title Other (specify below) VICE PRESIDENT						
(Street)	(Street) LITTLE ROCK AR 72201					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate) (2	Zip)		Rul	Rule 10b5-1(c) Transaction Indication														
	Check this box to indicate that a transaction was made pursuan satisfy the affirmative defense conditions of Rule 10b5-1(c). See												uction or writt	en pla	an that is inter	nded to				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.					Execution I		on Date, Transaction Code (Ins						4 and Secu Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	r Price		Transa	action(s) 3 and 4)			(111501.4)	
Common Class A 04/30/				04/30/2	024			A		52	A	\$43	34		4,937		D			
Common Class A - Retirement Plan						20,99		0,999		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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	6. Date Expirat (Month		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number of 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)			
					Code V (A) (D)		Date Expiration Date		Expiration Date	Number of Shares										

Explanation of Responses:

/s/ James Stockman

05/02/2024

** 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.

 $^{^{\}star}$ 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).