Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C. 20549	

	Washington, I	D.C. 20549	
STATEMENT O	F CHANGES IN	N 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

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

1. Name and Address of Reporting Person* Johnson Chris B.			2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]								Check	all app Direc	nship of Reporting applicable) hirector officer (give title		erson(s) to Is 10% Ov Other (s	wner			
(Last) 1600 CA	(Fir NTRELL F	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024								X	below) SENIOR VICE		E PF	below)	
(Street) LITTLE	ROCK AF	2 7	2201		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivine)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								nded to						
		Table	I - No	on-Deriva	ative \$	Secu	rities	Acc	uired	, Dis	posed of	, or Be	nefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		Transaction Disposed Of Code (Instr. 5)		es Acquired (A) o		and Securi Benefi		rities Ficially (d Following (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)			,	
Common	Class A			02/02/2	024		A		153	A	\$391	1.28 9,339		,339		D			
Common Class A - Retirement Plan														9	,076		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)	if any	eemed tion Date, h/Day/Year)	4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sec	rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date		Amount or Number of Shares						

Explanation of Responses:

/s/ Chris B. Johnson

02/06/2024

** 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.

^{*} 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).