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

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

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response	: 0.5								

	tion 1(b).	unde. See		Filed	l pursua or Se	ant to Section 3	Section 30(h) d	16(a) of the I	of the S nvestme	Securi ent Co	ties Exchang ompany Act o	e Act of f 1940	1934			Hours	perre	esponse:	0.5
1. Name and Address of Reporting Person*  BOLTE TONY J				2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [ DDS ]									heck al	l appli Directo	cer (give title		10% O		
(Last) (First) (Middle) 1600 CANTRELL RD					3. Date of Earliest Transaction (Month/Day/Year) 04/24/2023									A t			pelow)	below) IDENT	
(Street) LITTLE (City)	ROCK A		Z2201 Zip)		4. If A	Amend	ment,	Date o	of Origin	al File	ed (Month/Da	y/Year)		ne) <mark>X</mark> I	orm f	filed by One	e Rep	ng (Check A porting Pers an One Rep	son
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	quired	, Dis	posed of	, or Be	nefici	ally C	wne	d			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Disposed O 5)					4 and Secur Benef		rities ficially ed Following		wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Tr	ansac	tion(s) and 4)			(moti. 4)
Common Class A 04/24					.023			A		8	A	\$311	1.66		2,772		D		
Common Class A - Retirement Plan															5,	781		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)	tive Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any			Transaction of Code (Instr. 8)  8)  Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative rrities gired 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 (Insti 3 and 4)  Amoun or Numbe of Title Shares		unt ber		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

**Explanation of Responses:** 

/s/ Tony J Bolte

04/26/2023

\*\* 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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).