FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>STOCKMAN JAMES D</u>						2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]									Check all	ationship of Reportin call applicable) Director Officer (give title		g Person(s) to Issuer 10% Owner	
(Last) 1600 CA	(F NTRELL	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/30/2019									elow) `	Vice Pr	Other (specify below) esident		
(Street) LITTLE (City)	ROCK A	R State)	72201 (Zip)		4. If										Individual or Joint/Group Filing (Check Applicable ine) X 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					action 2A. Deemed Execution Da if any (Month/Day/Y		n Date,	Code (Instr.					(A) or 3, 4 a	4 and Secur Bene		y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (E	A) or D)	Price	. ∣Tr	ansaction str. 3 and			(1113111 4)
Common Class A 09				09/30	30/2019				A		98		A	\$63	.44	32,380		D	
Common Class A - Retirement Plan														17,235		D			
			Table II -								sed of, onvertib				y Own	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/D	n Date,	4. Transaction Code (Instr. 8)				6. Date E Expiratio (Month/D		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price Derivat Securit (Instr. 5	ve deri / Sec) Ben Owr Folk Rep Trar	lumber of ivative curities neficially ned lowing ported nsaction(str. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res					

Explanation of Responses:

Remarks:

<u>/s/ James D. Stockman</u> <u>10/02/2019</u>

** 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).