FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| Ì | OMB Number: | 3235-0287 | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| | hours per response: | 0.5 | | | | | | | | |

| | Check this box if no longer subject |
|--------|-------------------------------------|
| | to Section 16. Form 4 or Form 5 |
| \cup | 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 ar | 2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | | | | |
|--|--|--|---------------|--|--|---|-----|-----|---|---|------------------------|---------------|--|---|---|--|--|---|--|
| (Last) (First) (Middle) 1600 CANTRELL RD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2023 | | | | | | | | | X Officer (give title below) Other (specify below) SENIOR VICE PRESIDENT | | | | |
| (Street) LITTLE ROCK AR 72201 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) (State) (Zip) | | | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| | C | 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. | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5) | | | | | Securi Benefi Owned Follow | 5. Amount of Securities Beneficially Owned Following | | nership : Direct ect (I) . 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transa | Reported Transaction(s) (Instr. 3 and 4) | | | | |
| Common | 3 | | | | A | | 20 | A | \$290.1 | 33,992 | | | D | | | | | | |
| Common | | | | | | | | | 15 | 15,572 | | D | | | | | | | |
| Common Class A | | | | | | | | | | | | | | 188 | 188,565 ⁽¹⁾ | | I | See Footnote ⁽¹⁾ | |
| Common Class A | | | | | | | | | | | | | | 15, | 15,555 ⁽²⁾ | | I | See Footnote ⁽²⁾ | |
| | | Tab | le II | - Derivativ (e.g., pur | | | | | | | posed of, convertib | | | | ed | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Exec if an | Deemed cution Date, y nth/Day/Year) | tion Date, Transaction Number Code (Instr. of | | | | Expiration Date (Month/Day/Year) Amo Sect Undu Deriv Sect (Inst | | | | rlying ative ity 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownersh Form: Direct (D or Indire (I) (Instr. | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

- 1. Trustee on shares held in trust for the benefit of the reporting person and his family.
- 2. Owned by Spouse

/s/ William T Dillard III

** Signature of Reporting Person

05/24/2023

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).
- $^{\star\star} \ Intentional \ misstatements \ or \ omissions \ of facts \ constitute \ Federal \ Criminal \ Violations \ See \ 18 \ U.S.C. \ 1001 \ and \ 15 \ U.S.C. \ 78ff(a).$

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.