FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPRO	OVAL					
OMB Number:	3235- 0104					
Estimated average burden						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

SECURITIES

1. Name and Address of Reporting Person* Connor William E II		Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 05/21/2022 3. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]							
(Last) 1600 CAN	(First) ΓRELL ROA	(Middle)			Relationship of Reporting Issuer (Check all applicable) X Director	Person(s	•	File	ed (Month/Day	,
(Street) LITTLE ROCK (City)	AR (State)	72201 (Zip)	-		Officer (give title below)		(specify		eck Applicable Form filed Person	by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)							4. Nature of Indirect Beneficial Ownership (Instr. 5)			
1. Title of Sec	curity (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)	Form: I	Direct ndirect			
1. Title of Sec					Beneficially Owned (Instr.	Form: I (D) or II (I) (Inst	Direct ndirect			
) Derivative	Beneficially Owned (Instr. 4)	Form: I (D) or II (I) (Inst	Direct ndirect r. 5)	Own		
Common C		(e.g.		Derivative ls, warran	Beneficially Owned (Instr. 4) 0 Securities Beneficiants, options, converti	Form: I (D) or II (I) (Inst	Direct ndirect r. 5)	Own)		

Explanation of Responses:

William E Connor, II

05/24/2022

** Signature of Reporting Person

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 5 (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).

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.