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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0								

					or Se	ection 3	su(n) o	of the i	nvestme	ent Co	mpany Act o	11940							
1. Name and Address of Reporting Person* <u>LITCHFORD MIKE</u>						2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]									ionship of Reportin all applicable) Director		ng Person(s) to Is 10% Ov		
(Last) (First) (Middle) 1600 CANTRELL RD					3. Date of Earliest Transaction (Month/Day/Year) 01/27/2023								X	Officer (give title below) VICE PRESIDE			Other (s below) DENT	specify	
(Street) LITTLE ROCK AR 72201 (City) (State) (Zip)				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								S. 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 - No	n-Deriva	ative \$	Secu	rities	Acc	quired	, Dis	posed of	, or Be	nefic	ially	Own	ed			
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		ities icially d Following (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price	- 1	Transa	nsaction(s) str. 3 and 4)			(
Common Class A 01/27/20						023			A		84	Α	\$384	4.08		,832	D		
Common Class A - Retirement Plan													3	3,321		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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			Transaction Code (Instr. 3) Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5)		vative prities pired r osed) r. 3, 4	6. Date Expira (Month	tion D n/Day/		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amount or Numb of Title Share		ıt r		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 Ownershij (Instr. 4)		

Explanation of Responses:

/s/ Mike Litchford

01/31/2023

** 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.

^{*} 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).