FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* DILLARD MIKE					2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) 1600 CA	(Last) (First) (Middle) 1600 CANTRELL RD				3. Date of Earliest Transaction (Month/Day/Year) 06/28/2024								Officer (give title below) EXECUTIVE VICE PRESIDENT							
(Street) LITTLE ROCK AR 72201					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursus satisfy the affirmative defense conditions of Rule 10b5-1(c). S								suant to a c							
		Table	I - N	on-Deriva	tive :	Secu	rities	s Ac	quire	d, Di	sposed o	f, or E	Beneficia	ally Owr	ned					
Date			2. Transaction Date (Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Class A				06/28/2024					A		18	A	\$442.68	536,	536,025(1)		D			
Common Class A - Retirement Plan														0		D				
Common Class A													41,4	496(2)		I	See Footnote ⁽²⁾			
Common Class A													7,3	7,300 ⁽³⁾		I	See Footnote (2) ⁽⁴⁾			
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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any					ransaction Code (Instr.)		vative urities uired or osed)) r. 3, 4	Expi (Mor	ate Exe ration I nth/Day		7. Titl Amou Secur Under Derive Secur 3 and	int of ities rlying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)	derivativ Securitie Benefici Owned Followin Reporte Transaci	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cod		v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. Amount of Securities Beneficially Owned adjusted to reflect 79 shares that were transferred from the reporting person's retirement plan to registered holdings on 06/10/24.
- 2. These shares are held by W.D. Company, Inc. The reporting person owns 26.3% of W.D. Company, Inc. and is one of its directors and officers. W. D. Company, Inc. also holds 3,985,776 shares of Class B Common Stock, which are convertible into shares of Class A Common Stock on a one-for-one basis.
- 3. Trustee of GST Trust
- 4. Trustee of GST Trust

Remarks:

The reporting person disclaims beneficial ownership of the shares reported herein as indirectly beneficially owned, except to the extent of his pecuniary interest therein.

07/02/2024

** 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 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).

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.