FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	militae. See		Filed	or Se	ant to S ection 3	Section 30(h) c	n 16(a) of the Ir	of the S ovestme	ecuriti nt Cor	ies Exchang mpany Act o	je Act of 1 of 1940	L934			nours	per re	esponse:	0.5
1. Name and Address of Reporting Person*  STOCKMAN JAMES D					2. Issuer Name <b>and</b> Ticker or Trading Symbol DILLARD'S, INC. [ DDS ]									Check	all app	hip of Reportin pplicable) ector icer (give title		erson(s) to Is 10% O Other (	wner
(Last) (First) (Middle) 1600 CANTRELL ROAD				3. Date of Earliest Transaction (Month/Day/Year) 11/23/2020									X	below		below)	opsony		
(Street) LITTLE (City)	ROCK A		72201 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Line)  X Form filed by One Reportion Form filed by More than C										porting Pers	on			
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or Be	nefic	ially	Own	ed			
Date				2. Transac Date (Month/Da	Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) o tr. 3, 4 a	r and	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Price	:	Transaction(s) (Instr. 3 and 4)				,,			
Common	Class A			11/23/2	2020				A		101	A	\$49	.16	33	3,575 D			
Common	Class A -	Retirement Plan			18,312 D														
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	e Conversion Date Execution Date, Trai		Transa Code (	5. Number of perivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration			7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)		unt		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

**Explanation of Responses:** 

Remarks:

/s/ James D. Stockman

11/25/2020

\*\* 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.