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McNiff Michae Form 4											
Check this box Washington, D.C. 20549 N Check this box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF E Subject to SECURITIES E							OMB Number: Expires: Estimated a burden hour response				
 (Print or Type Responses) 1. Name and Address of Reporting Person <u>*</u> McNiff Michael S. 			2. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 1600 CANTRELL ROAD			3. Date of Earliest Transaction (Month/Day/Year) 08/27/2018					(Check all applicable) <u> </u>			
(Street) LITTLE ROCK, AR 72201			4. If Amendment, Date 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 Person				
(City)	(State)	(Zip)	Table	I - Non-De	rivative S	ecurit	ies Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Executi any		3. Transactic Code (Instr. 8) Code V	(Instr. 3,	(A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class A	08/27/2018			A	137	A	\$ 75.84	20,772	D		
Common Class A - Retirement Plan								1,812	D		
Common Class A								66	Ι	Owned by Spouse	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D)			Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
McNiff Michael S. 1600 CANTRELL ROAD LITTLE ROCK, AR 72201			Vice President					
Signatures								

/s/ Michael S. McNiff 08/29/2018 <u>**Signature of Date</u> Reporting Person

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.