DILLARD'S, INC. Form 3 May 24, 2017 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB 2025 022

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> BOLTE TONY J	Chatamant	3. Issuer Name and Ticker or Trading Symbol DILLARD'S, INC. [DDS]		
(Last) (First) (Middle) 1600 CANTRELL ROAD		4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street)		(Check all applicable)	6. Individual or Joint/Group	
LITTLE ROCK, AR 72201		Director 10% Ow _XOfficer Other (give title below) (specify below) Vice President	_X_ Form filed by One Reporting	
(City) (State) (Zip)	Table I - No	on-Derivative Securities	Beneficially Owned	
1.Title of Security (Instr. 4)	2. Amount of Beneficially C (Instr. 4)	Owned Ownership C	. Nature of Indirect Beneficial wnership instr. 5)	
Common Class A	2,389	D Â	Å	
Common Class A - Retirement I	lan 3,621	D Â		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)				

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
BOLTE TONY J 1600 CANTRELL ROAD LITTLE ROCK, AR 72201	Â	Â	Vice President	Â
Signatures				
/s/ Tony J. Bolte 05/2	4/2017			
<u>**</u> Signature of Reporting Person	Date			

Explanation of Responses:

* 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. 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.