### Edgar Filing: DILLARD MIKE - Form 4

DILLARD MI Form 4 July 03, 2018	IKE										
FORM	4						01 <b>11 11 11 11 11</b>	OMB AF	PROVAL		
	UNITED 5		SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549					OMB Number:	3235-0287		
Check this if no longe	r							Expires:	January 31, 2005		
In the folger       Statement of Changes in Benefic:         subject to       Section 16.         Section 16.       SecURITIES         Form 4 or       Filed pursuant to Section 16(a) of the Securities         Sobligations       Section 17(a) of the Public Utility Holding Comparison 30(h) of the Investment Company A         1(b).       Subject to						CIAL OWNERSHIP OF Estimated average burden hours per response es Exchange Act of 1934, bany Act of 1935 or Section					
(Print or Type Re	esponses)										
1. Name and Ad DILLARD M	dress of Reporting Pe IIKE	Symbo	suer Name <b>and</b> ol LARD'S, INC		Fradin	g	5. Relationship of I Issuer				
(Last)	(First) (Mid		e of Earliest Tra	ansaction			(Check	all applicable	)		
1600 CANTRELL ROAD			(Month/Day/Year) 07/02/2018				X Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President				
LITTLE ROO	(Street) CK, AR 72201		.mendment, Dat Month/Day/Year)	-			6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by Me Person	ne Reporting Per	son		
(City)	(State) (Z	<sup>ip)</sup> T	able I - Non-D	erivative S	ecuri	ties Acq	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any	3. e, if Transacti Code ear) (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ties A ispose 4 and (A) or	cquired 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		
Common Class A	07/02/2018		A	79	A	\$ 91.39	579,553	D			
Common Class A - Retirement Plan							38,280	D			
Common Class A							41,496 <u>(1)</u>	I	See Footnote		
Common Class A							7,300 (2)	Ι	See Footnote		

#### (2)

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

#### 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 control number.

# 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. Transact Code (Instr. 8)	5. ionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting officer thank frautous	Director 10% Owner		Officer	Other			
DILLARD MIKE 1600 CANTRELL ROAD LITTLE ROCK, AR 72201	Х		Executive Vice President				

## Signatures

/s/ Mike Dillard 07/03/2018

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.

(2) Trustee of GST Trust

#### **Remarks:**

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Remarks: The reporting person disclaims beneficial ownership of the shares reported herein as indirectly beneficially owned,

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.