

DOLLAR GENERAL CORP

Reported by COCHRAN SANDRA B

FORM 5

(Annual Statement of Changes in Beneficial Ownership)

Filed 03/14/16 for the Period Ending 01/29/16

Address 100 MISSION RIDGE

GOODLETTSVILLE, TN, 37072

Telephone 6158554000

CIK 0000029534

Symbol DG

SIC Code 5331 - Retail-Variety Stores

Industry Discount Stores

Sector Consumer Cyclicals

Fiscal Year 02/02

FORM 5

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).
[] Form 3 Holdings Reported
[X] Form 4 Transactions
Reported

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person *				2.	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
COCHRAN S	SANDRA	В		D	OLLAR	GENERA	L COR	P [DG]	C II II III					
(Last) (First) (Middle)					3. Statement for Issuer's Fiscal Year Ended					X Director 10% Owner					
					(MM/DD/YYYY) 1/29/2016					Officer (give to	Officer (give title below) Other (specify below)				
C/O DOLLA			ON			1/2/	2010								
CORPORAT RIDGE	10N, 10	U MHSSI	ION												
	(Street	:)		4.	If Amendr	nent, Date Or	iginal File	d (MM/DI	D/YYYY	6. Individual or	Joint/Group F	Filing (Check Appl	icable Line)	
GOODLETTSVILLE, TN 37072											X _ Form Filed by One Reporting PersonForm Filed by More than One Reporting Person				
(Cit	ty) (State	(Zip)												
		·	Γable I -	Non-De	rivative So	curities Acq	uired, Dis	posed o	f, or B	eneficially Owned					
1.Title of Security (Instr. 3) 2. Trans. D			Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		ties Acquir sed of (D) 4 and 5)	red (A)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) [Instr. 3 and 4)			7. Nature of Indirect Beneficial Ownership		
							Amount	(A) or (D)	Price				Direct (D) or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock 4/2.			/22/2015		A	5.5095 (1)	A	\$0	6583.5095			D			
Common Stock			5	5/29/2015		S4	1.7959 (2)	D	\$72.59	6581.7136			D		
Common Stock 7/1.				7/1/2015	A 8.2507 A \$0 6589.9643			D							
Common Stock 9/30/			/30/2015	, A		8.9863 (1)	A	\$0	6607.9307 (3)			D			
Table I	I - Derivati	ve Securit	ties Acq	uired, Di	sposed of,	or Beneficia	lly Owned	(e.g. ,)	puts, c	alls, warrants, opt	ions, convert	tible so	ecurities)		
		3. Trans. Date	3A. Deem Execution Date, if an		Deriv Acqu Dispo	mber of ative Securities red (A) or sed of (D) 3, 4 and 5)	Expiration I	. Date Exercisable and expiration Date MM/DD/YYYY)		ties Underlying ative Security	(Instr. 5) Secu Bene	of Derivative Securities Beneficially	Form of Derivative Security:	Beneficial	
					(/	(D)	Date Exercisable			Amount or Number of Shares	End Issue Fisca	Owned at End of Issuer's Fiscal Year (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		

Explanation of Responses:

- (1) Additional restricted stock units, which were acquired as a result of dividend equivalent rights, representing the right to receive shares of common stock upon vesting.
- (2) Represents the cashout of fractional shares resulting from the vestings of certain restricted stock units.
- (3) Reflects ownership as of January 29, 2016 and includes 8.9801 additional restricted stock units, which were acquired through an exempt transaction as a result of dividend equivalent rights on January 6, 2016, representing the right to receive shares of common stock upon vesting.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
COCHRAN SANDRA B							
C/O DOLLAR GENERAL CORPORATION	X						
100 MISSION RIDGE	71						
GOODLETTSVILLE, TN 37072							

/s/ Christine L. Connolly, Attorney-in-Fact 3/14/2016

**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 control number.