

DOLLAR GENERAL CORP

Reported by **BRYANT WARREN F**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 05/30/14 for the Period Ending 05/29/14

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



[] 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

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

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. I	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BRYANT V	VARREN	F			DO	OLI	LAR (GENEF	RAL	CO	RP	P [D	G]			oncable)			
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								X Director10% Owner Officer (give title below) Other (specify below)						
100 MISSIC	N RIDG	E						5/2	29/2()14					Officer (giv	e title below	0	ther (specify	below)
	(Str	eet)			4. I	f An	nendme	nt, Date	Origir	nal Fi	iled	(MM/E	DD/YYY	Y)	6. Individual o	or Joint/G	roup Filing	(Check App	icable Line)
GOODLETTSVILLE, TN 37072														X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)															Form fried by More than One Reporting Person				
			Table l	I - Non	-Der	ivati	ive Seci	ırities A	cquir	ed, D	Disp	osed (of, or E	Bene	eficially Owne	ed			
1.Title of Security (Instr. 3)			2. Trans.	Date	Date 2A. Deemed Execution Date, if any		3. Trans. ((Instr. 8)	Code	4. Securities According Disposed of (Instr. 3, 4 and 5		ed of (Î	D)		Following Reported Transaction(s) Ownership of Form: General Policy of Countries of Policy of			Beneficial		
								Code	V	Amo	ount	(A) o (D)	r Price	e					Ownership (Instr. 4)
Common Stock 5/29/2014				14			A		891	<u>(1)</u>	A	\$0	9487			D			
	Tab	ole II - Der	ivative	Securi	ties I	Bene	ficially	Owned	(e.g.	, put	s, ca	alls, w	arrant	ts, o	options, conve	rtible sec	urities)	•	•
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deer Executio Date, if a	n (In	Γrans. str. 8)	5. Code Derivative Acquired Disposed (Instr. 3,		ve Securities Expl (A) or l of (D)		ate Exercisable and ration Date		7. Title and Securities U Derivative S (Instr. 3 and		nderlying ecurity	Derivative Security	9. Number of derivative Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code		V	(A)	(D)	Date Exerc	cisable		oiration e	Title		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Director Stock Option (Right to Buy)	\$53.5	5/29/2014			A		4839		1	(2)	5/2	9/2024	Comm Stock		4839	\$0	4839	D	

Explanation of Responses:

- (1) Restricted stock units which represent a contingent right to receive shares of common stock upon vesting. The restricted stock units vest in three annual installments of 33 1/3% beginning on May 29, 2015.
- (2) The option vests in four annual installments of 25% beginning on May 29, 2015.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BRYANT WARREN F								
100 MISSION RIDGE	X							
GOODLETTSVILLE, TN 37072								

Signatures

/s/ Rhonda M. Taylor, Attorney-in-Fact 5/30/2014

**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.