

DOLLAR GENERAL CORP

Reported by WENKOFF CARMAN R

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/03/20 for the Period Ending 04/01/20

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

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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. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Wenkoff Carman R					DOLLAR GENERAL CORP [DG]							,				
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)						Director						
100 MISSION RIDGE				4/1/2020							*	X_ Officer (give title below) Other (specify below) EVP & Chief Information Ofc				
	(Stre	et)			4. If A	mendm	ent, Date ()rigi	nal File	ed (MM/DI	D/YYY	Y) 6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
GOODLETTSVILLE, TN 37072 (City) (State) (Zip)											X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
			Table I	[- Non-l	Deriva	itive Sec	urities Ac	quir	ed, Di	sposed o	f, or l	Beneficially Own	ed			
1.Title of Security (Instr. 3)			2	. Trans. Da	te 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		or Disp	ities Acqui osed of (D) , 4 and 5) (A) or (D)		Following Reported (Instr. 3 and 4)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock				4/1/2020			F		544 (1)	` /	\$153.1	6	5883		D	
	Tab	le II - De	rivative	Securiti	ies Be	neficiall	y Owned	(e.g.	, puts,	calls, wa	rran	ts, options, conve	rtible secu	urities)		
1. Title of Derivate Security (Instr. 3)		Date Exe	3A. Deen Execution Date, if a	ition (Instr. 8		Derivati Acquire Dispose	ve Securities d (A) or d of (D) , 4 and 5)		6. Date Exercisable and Expiration Date		Securi Deriva	e and Amount of ties Underlying ative Security 3 and 4)	Derivative Security	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	de V	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s (Instr. 4)	Direct (D) or Indirect) (I) (Instr. 4)	

Explanation of Responses:

(1) Shares of common stock surrendered to the Issuer in payment of taxes in connection with the vesting and payment of a portion of performance share units granted March 21, 2018 (265 shares from the vesting of PSUs earned as a result of the Issuer's fiscal year 2018 adjusted EBITDA performance) and March 20, 2019 (279 shares from the vesting of PSUs earned as a result of the Issuer's fiscal year 2019 adjusted EBITDA performance).

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Wenkoff Carman R								
100 MISSION RIDGE			EVP & Chief Information Ofc					
GOODLETTSVILLE, TN 37072								

Signatures

/s/ Carman R. Wenkoff	4/3/2020
**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.