

DOLLAR GENERAL CORP

Reported by **OWEN JEFFERY**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/12/20 for the Period Ending 03/10/20

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. I	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Owen Jeffer	y				DO)LI	LAR G	SENERA	AL	COF	RP [DC	;]						
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								Director 10% Owner X Officer (give title below) Other (specify below)					
100 MISSION RIDGE						3/10/2020								Chief Operating Officer				
	(Stre	et)			4. I	f An	nendmei	nt, Date O	rigin	al Fil	ed (MM/DI	D/YYY	YY)	6. Individual o	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 - No	n-Der	ivati	ve Secu	rities Acc	quire	ed, Di	sposed o	f, or	Bei	neficially Owne	d			
1.Title of Security (Instr. 3)				2. Trans. Date				3. Trans. Code (Instr. 8)		or Dis	Securities Acquired (Disposed of (D) str. 3, 4 and 5) (A) or nount (D) Properties (Disposed of (D) str. 3, 4 and 5)		F (Following Reported Transaction(s) (Instr. 3 and 4)			7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock				3/10/2	2020			A		6627	1) A	\$0	,	2	23774		D	
	Tab	le II - De	rivative	Secu	rities	Bene	eficially	Owned (e.g.,	puts,	calls, wa	rran	ts,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)		Date	3A. Deer Execution Date, if a	ecution (Ins		Code	ode 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)							s Underlying e Security	Derivative Security	9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				(Code	V	(A)	(D)	Date Exerc	cisable	Expiration Date	Title		nount or Number of ares		Reported Transaction(s) (Instr. 4)	or Indirect	

Explanation of Responses:

(1) Performance share units ("PSUs") earned by reporting person from March 22, 2017 & March 20, 2019 grants, as certified by Issuer's Compensation Committee on March 10, 2020. Each PSU represents right to one share of Issuer's common stock. Amount reported includes: (i) 2,537 PSUs earned as a result of Issuer's fiscal years 2017-2019 average adjusted ROIC performance (2017 grant), all of which will become vested & be settled & paid in unrestricted shares of Issuer's common stock on April 1, 2020; & (ii) 4,090 PSUs earned as a result of Issuer's fiscal year 2019 adjusted EBITDA performance (2019 grant), 1,364 of which will become vested & be settled & paid in unrestricted shares of Issuer's common stock on April 1, 2020, & remainder of which is subject to time-based vesting requirements (1,363 on each of April 1, 2021 & April 1, 2022) & certain forfeiture & accelerated vesting provisions, & once vested are payable solely in unrestricted shares of Issuer's common stock.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Owen Jeffery								
100 MISSION RIDGE			Chief Operating Officer					
GOODLETTSVILLE, TN 37072								

Signatures

/s/ Jeff Owen 3/12/2020

**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.