☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL

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

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

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 *						ssue	r Name	and Tick	er or	Tradin	g Symbo	Relationshi	5. Relationship of Reporting Person(s) to Issuer				
	•	0											(Check all app	(Check all applicable)			
ELLIOTT ANITA C DOLLAR GENERAL CORP [DG]																	
ELLIOTTRIVITA												Director	Director 10% Owner				
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)							X Officer (gi	X Officer (give title below) Other (specify below)			pelow)	
						4/1/2024								SVP & Chief Accounting Officer			
100 MISSION RIDGE								4/1	/20	24		S Y I G GILLOI					
(Street)					4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)							Y) 6. Individual of	6. Individual or Joint/Group Filing (Check Applicable 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	ive Secu	ırities Acc	quir	ed, Dis	posed of	f, or F	Beneficially Owne	d			
1.Title of Security (Instr. 3)					Execu		A. Deemed (Instr. 8) 3. Trans. Cod (Instr. 8)		or Disposed of (D)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial Direct (D) Ownership	
								Code	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				4/1/2	024			F		481 (1)	D	\$157.3	5		19,390	D	
	Tab	le II - Der	ivative	e Secu	rities]	Bene	eficially	Owned (e.g.,	puts, c	alls, wa	rrant	s, options, conver	tible secu	rities)		
1. Title of Derivate Security (Instr. 3)	curity Conversion Date Execution (Ins			. Trans. Instr. 8)	ans. Code r. 8) 5. Number of Derivative Sec Acquired (A) c Disposed of (D (Instr. 3, 4 and			and Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	Securities Beneficially Owned Following	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	V	(A)	(D)	Date Exe	rcisable	Expiration Date		Amount or Number of Shares		Transaction(s) (Instr. 4)	(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 restricted stock units granted March 16, 2021 (52 shares), March 15, 2022 (50 shares) and March 28, 2023 (68 shares), as well as vesting and payment of a portion of performance share units ("PSUs") granted March 16, 2021 (51 shares from the vesting of PSUs earned as a result of the Issuer's fiscal year 2021 adjusted EBITDA performance and 221 shares from the vesting of PSUs earned as a result of the Issuer's fiscal years 2021-2023 adjusted ROIC performance) and March 15, 2022 (39 shares from the vesting of PSUs earned as a result of the Issuer's fiscal year 2022 adjusted EBITDA performance).

Reporting Owners

Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
ELLIOTT ANITA C									
100 MISSION RIDGE			SVP & Chief Accounting Officer						
GOODLETTSVILLE, TN 37072									

Signatures

/s/ Anita C. Elliott 4/3/2024 **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.