

DOLLAR GENERAL CORP

Reported by MCGUIRE TIMOTHY I

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 06/01/20 for the Period Ending 05/29/20

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 02/29



[] 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. | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|-------------|-----------|--------|--|--|--|-----------|-------------------------------------|---|---|----------------------|---|--------------------------------|------------|---|---|--------------|
| McGuire Timothy I | | | | | | DOLLAR GENERAL CORP [DG] | | | | | | | | incabic) | | | | |
| (Last) (First) (Middle) | | | | 3. | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | X_ Director10% Owner | | | | | | |
| | | | | | | | | | | | | | Officer (give title below) Other (specify below) | | | | | |
| 100 MISSION RIDGE | | | | | | | 5/29/2020 | | | | | | | | | | | |
| | (Stree | et) | | | 4. | If An | nendme | ent, Date | Orig | inal File | d (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-De | rivati | ive Sec | urities A | cqui | red, Di | sposed o | f, or | Ber | neficially Owne | ed | | | |
| 1.Title of Security (Instr. 3) | | | 2. Trans. | | te 2A. Deemed Execution Date, if any | | 3. Trans. Code (Instr. 8) | | 4. Securi Disposed (Instr. 3, | ed (A) | d (A) or 5. Amount of Secur Following Reported (Instr. 3 and 4) | | | | | Beneficial Ownership | | |
| | | | | | | | | Code | V | Amoun | (A) or (D) | Pric | ce | | | | 4) | |
| Common Stock 5/29/2020 | | | | 020 | | | D | | 0.1749 | D | \$191. | .51 | 6032 | | | D | | |
| | Tab | le II - Dei | rivativ | e Secu | rities | Bene | eficiall | y Owned | (e.g. | ., puts, | calls, wa | rran | ıts, c | options, conver | tible secu | ırities) | | |
| 1. Title of Derivate Security (Instr. 3) | Conversion or Exercise Price of Derivative | Date I | Executi | | | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Exercisable and Expiration Date | | | ities | Jnderlying Derivative Security | | Securities Beneficially Owned | Ownership Form of Derivative Security: | Beneficial |
| | Security | | | | Code | V | (A) | (D) | Da Exc | te ercisable | Expiration Date | Title | Am Sha | nount or Number of | | Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | |

Explanation of Responses:

(1) Represents the cashout of a fractional share resulting from the vesting of certain restricted stock units.

Reporting Owners

| • | | | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|--|
| Reporting Owner Name / Address | Relationships | | | | | | | |
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| McGuire Timothy I | | | | | | | | |
| 100 MISSION RIDGE | X | | | | | | | |
| GOODLETTSVILLE, TN 37072 | | | | | | | | |

Signatures

/s/ Christine L. Connolly, Attorney-in-Fact 6/1/2020

**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.