FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

Check th	is box if no longer subject to
Section	<ol><li>Form 4 or Form 5 obligations</li></ol>
may con	tinue. See Instruction 1(b).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 *  Creedon Michael C Jr			2. Issuer Name and Ticker or Trading Symbol DOLLAR TREE, INC. [ DLTR ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) 500 VOLVO PAR	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2023	X	Officer (give title below)  Chief Operating C	Other (specify below)		
(Street) CHESAPEAKE	VA	23320	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing (Ch Form filed by One Reportin Form filed by More than On	g Person		
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satis affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.					

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Ad Disposed Of (D			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I)	Beneficial Ownership
			Code	v	Amount (A) or (D) Price			Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	03/31/2023		A		5,433(1)	A	\$0	13,362	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (right to buy)	\$143.55	03/31/2023		A		8,764		(2)	(3)	Common Stock	8,764	\$0	8,764	D	

#### **Explanation of Responses:**

- 1. Restricted stock units granted pursuant to the Company's 2021 Omnibus Incentive Plan and will vest in approximately three equal annual installments, beginning on the anniversary of the award date, subject to continued employment.
- 2. The stock options were granted pursuant to the Company's 2021 Omnibus Incentive Plan and will vest in approximately equal installments on each of the first three anniversaries of the date of grant, subject generally to continued employment with the Company through each vesting date.
- 3. Expires upon termination, with certain grace periods, or ten years after award, whichever is less.

/s/ Derek R. Redmond, attorneyin-fact for Mr. Creedon 04/04/2023

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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 Number.