FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | |
|---|------------------------|-----------|--|--|--|
| | OMB Number: | 3235-0287 | | | |
| l | Estimated average burd | en | | | |
| l | hours per response: | 0.5 | | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Gupta Ashwini | | | | | | 2. Issuer Name and Ticker or Trading Symbol ENCORE CAPITAL GROUP INC [ECPG] | | | | | | | | | Relationsh neck all ap X Dire | plicable) | g Person(s) to | Issuer Owner | |
|--|---|--|--|-------------------|--|---|---|-----------------------------------|---|---|---------------------|---|-----------|----------------|---|---|--|---|--|
| (Last) (First) (Middle) 3111 CAMINO DEL RIO NORTH, SUITE 103 | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/08/2016 | | | | | | | | | er (give title w) | Oth belo | er (specify w) | |
| (Street) SAN DIEGO CA 92108 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Lir | e) X Forr Forr | dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (In 5) | | | | | Secur Benet | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect | | |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Trans | action(s) 3 and 4) | | (IIISU. 4) | |
| Common Stock 06/08/2 | | | | | | | .016 | | A | | 4,767(1 | 1) |) A \$25. | | 17 | 13,163 | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Conversion Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Oberivative | | Date, ny/Year) | Transaction Code (Instr. 8) | | of Deriv | rities lired r osed) | Expiratio (Month/D | Date Exercisable and piration Date conth/Day/Year) ate Expiration Date Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) | |

Explanation of Responses:

1. Grant to the reporting person, for service on the Board of Directors of Encore Capital Group, Inc. ("Encore"), of deferred stock units under the terms of a non-employee director deferred compensation plan established under the 2013 Incentive Compensation Plan. Deferred stock units will be converted into shares of Encore common stock on a one-for-one basis upon distribution. The distribution of shares of common stock will occur within 10 business days following the fifth anniversary of the date the reporting person is no longer a member of the Board of Directors.

Remarks:

/s/ Michael Chin, Attorney-in-Fact for Ashwini Gupta

06/09/2016

** 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 Number.