FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* CLARK JONATHAN C						2. Issuer Name and Ticker or Trading Symbol ENCORE CAPITAL GROUP INC [ECPG]								(Checl	k all applic Directo	•		son(s) to Iss 10% Ow Other (s	vner
(Last) (First) (Middle) 3111 CAMINO DEL RIO NORTH SUITE 103						3. Date of Earliest Transaction (Month/Day/Year) 03/09/2017								X	below)			below)	·
(Street) SAN DIEGO CA 92108				_ 4.	If Ame	endment, [Date o	f Original	Filed	d (Month/Da	ay/Year)		6. Indi Line) X	Form fi	led by One	Repo	(Check Apporting Person	n	
(City)	(S		(Zip)	n Davi		- 6-				Dia		f a. Da		ia II. r	O				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					saction	ar) i	A. Deemed xecution Date, any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or 5. Amou Securitie Benefici Owned F		nt of es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Pric	e	Reported Transact (Instr. 3 a	ction(s)			(Instr. 4)	
Common Stock 03/09/2						2017		A		15,347	7 ⁽¹⁾ A		\$ <mark>0</mark>	69,	69,128		D		
Common Stock 03/09/2						2017					3,770) D	\$3	0.95	65,	,358		D	
		-	Table II -								osed of, converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (8)		of i		6. Date Exercis: Expiration Date (Month/Day/Yea		е	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amou or Numb of Share	er					
Employee Stock Option (right to	\$30.95	03/09/2017			A		41,617		(3)		03/09/2024	Common Stock	41,6	17	\$0	41,617	7	D	

Explanation of Responses:

- 1. Grant to the reporting person on March 9, 2017 of restricted stock awards ("RSAs") under the Encore Capital Group, Inc. 2013 Incentive Compensation Plan. The RSAs are subject to vesting and vest in annual installments over a three-year period, with one-third vesting on March 9, 2018, one-third vesting on March 9, 2019, and the remaining one-third vesting on March 9, 2020.
- 2. Disposal relates to the withholding of securities for the payment of the tax liability incident to the vesting of stock awards.
- 3. The option vests and becomes exercisable, if at all, in installments over a three-year period, with one-third vesting on March 9, 2018, one-third vesting on March 9, 2019 and the remaining one-third vesting on March 9, 2020, but only if and when the 20 trading day average of the NASDAQ-reported closing price per share of the Company's common stock (subject to certain adjustments) exceeds \$38.6875 per share.

Remarks:

/s/ Greg Call, Attorney-in-Fact for Jonathan Clark

03/13/2017

** 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.