FORM 4

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

Washington,	D.C. 20549	

STATEMENT	OF CHA	NGES IN	BENEFI	CIAL O	WNERSHIP

ı	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average bur	den									
	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

1. Name and Address of Reporting Person*  KRAFT KEVIN MICHAEL SR				2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [ DGICA ]									ationship k all app Direc	licable)	ng Per	rson(s) to Is			
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024										Office	er (give title /)		Other (sbelow)	specify
1195 RIVER ROAD P.O. BOX 302					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street) MARIETTA PA 17547													Form filed by More than One Reporting Person					orting	
(City) (State) (Zip)  Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuar satisfy the affirmative defense conditions of Rule 10b5-1(c). Set									uant to a			uction or writ	ten pla	n that is inter	nded to				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				y/Year) Execution		ution Date,		3. 4. Securitie Disposed Code (Instr. 8)		es Acquired (A) Of (D) (Instr. 3,		and Securit Benefic Owned		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D) Pri		,	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock <sup>(1)</sup> 01/				01/02/2	2024			A		500	A	\$13	3.99 12		12,936		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	if any (Month/Day/Year) if any (Month/Day/Year) Code (Ins		Instr.	of	r osed (1. 3, 4	6. Date Expirat (Month)	ion Da /Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amoun or Numbe of Title Shares		nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

1. Grant from Directors Equity Incentive Plan

## Remarks:

Jeffrey D. Miller, by power of <u>attorney</u>

\*\* Signature of Reporting Person

01/02/2024

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.