FORM 4

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

STATEMENT	OF CHANGES II	N BENEFICIAL	OWNERSHIP

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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* MILLER JEFFREY DEAN					2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA]									k all app Direc Office	tionship of Reportir all applicable) Director Officer (give title		10% O Other (:	wner		
(Last) 1195 RIV P.O. BOX	ER ROAI	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/16/2021										below) below) EVP & Chief Financial Officer				
(Street) MARIET (City)			.7547 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form	al or Joint/Group Filing (Check Applicable form filed by One Reporting Person form filed by More than One Reporting forms				
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	y Own	ed				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)) or 4 and	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or Pr	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A C	Class A Common Stock ⁽¹⁾		08/16/2021					J	v	346	A	. \$	15.66	33	33,898			401(k) Plan		
Class A C	Common St	ock													1	5,982		D		
Class B C	Common St	ock														106		D		
Class B Common Stock														478		I		401(k) Plan		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security or Exercise (Month/Day/Year) if any		emed ion Date, /Day/Year)	n Date, Transactio Code (Inst				6. Date Exerci Expiration Dat (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
					Code		(A)	(D)	Date Exercis	able	Expiration Date	Title	or Numb of Share							

Explanation of Responses:

1. Dividend Reinvestment Plan

Remarks:

Jeffrey D. Miller, EVP & **Chief Financial Officer**

08/30/2021

** 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.