FORM 4

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

Washington, D	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 Instruction 1(b).

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

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1. Name and Address of Reporting Person*  DONEGAL MUTUAL INSURANCE			2. Issuer Name <b>and</b> Ticker or Trading Symbol DONEGAL GROUP INC DGICA								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
CO	OAL MI	OT OAL INSU	IXAI	<u>ICE</u>							-			Direc	tor	X	10% O	wner
<u>co</u>					<u> </u>							_		Office	er (give title		Other ( below)	specify
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 09/10/2020									Delov	')		below)	
1195 RI	VER ROA	O																
P.O. BOX 302				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													X	Form	filed by One	Repo	rting Pers	on
MARIE	ГТА РА	A 1	7547									Form filed by More than One Rep Person					orting	
(City)	(S	tate) (Z	Zip)															
		Table	I - No	on-Deriva	tive S	Secui	rities Acc	quired	l, Dis	sposed of	, or Be	nefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Execution Date,		tion Date,	3. Transaction Code (Instr. 8)				4 and 5) Secur Benef Owne		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price		Report Transa (Instr. 3	ed ction(s) 3 and 4)			(Instr. 4)	
Class A Common Stock 0			09/10/20	020		P			180,000	A	\$14	.794	10,1	132,692		D		
		Tal	ble II							osed of, convertib				wne	d			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date rity or Exercise (Month/Day/Year) Execution Date, if any		tion Date,		nsaction de (instr. Derivative Securities Acquired (A) or Disposed of (D) (instr. 3, 4 and 5)		Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ O F D o (I	0. wnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	

Date Exercisable

Expiration Date

Explanation of Responses:

Remarks:

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

Number

of Shares

Title

09/14/2020

\*\* Signature of Reporting Person Date

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

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.

(D)

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).