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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	ction 1(b).			Fi	led pur or	suant Section	to Section on 30(h) o	n 16(a of the	i) of the Se Investment	curiti	es Exchan npany Act	nge Act of 1940	of 193 0	34		Tiouis	per re	sporise.	0.5	
1. Name and Address of Reporting Person* LONG ROBERT RICHARD JR						2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	VER ROA	(First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/21/2023							7	below)	(give title :VP, Ger	neral (Other (below) Counsel			
P.O. BOX 302					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) MARIE	ГТА]	PA	17547												X Form filed by One Reporting Person Form filed by More than One Reportin Person					
(City)	((State)	(Zip)		_ 	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										d to				
		Tal	ole I - Nor	n-Deri	vativ	-						`								
Date			n/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Disposed Of (I Code (Instr. 5)			ties Acquired (A) or I Of (D) (Instr. 3, 4 an		5. Amour Securitie Beneficia Owned F	s ally ollowing	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A (I	A) or D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Class A (Common S	Stock								430			D							
		,	Table II -						uired, D , option						Owned					
1. Title of Derivative Security (Instr. 3) Conver Security Security			3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr.				Expiration Date of (Month/Day/Year) U			of Sec Under Deriva	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	O S Illy D OI	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		expiration Date	Title	100	Amount or Number of Shares						
Options	\$13.87	12/21/2023			A		18,000		07/01/202	4 1	2/21/2028	Class Comn Stoc	non 1	18,000	\$0.00	18,00	00	D		

Explanation of Responses:

Remarks:

Jeffrey D. Miller, by power of attorney

12/22/2023

** 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.

^{*} 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).