

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden

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).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>DEAS NOLAND RONE JR</u> (Last) (First) (Middle) <u>1195 RIVER ROAD</u> (Street) <u>MARIETTA PA 17547</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>DONEGAL GROUP INC [DGICA]</u> 3. Date of Earliest Transaction (Month/Day/Year) <u>04/29/2025</u> 4. If Amendment, Date of Original Filed (Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner ☒ Officer (give title below) Other (specify below) <u>Senior Vice President</u> 6. Individual or Joint/Group Filing (Check Applicable Line) ☒ Form filed by One Reporting Person Form filed by More than One Reporting Person
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Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Class A Common Stock	04/29/2025		M		151	A	\$14.39	2,212	D	
Class A Common Stock	04/29/2025		M		37	A	\$14.09	2,249	D	
Class A Common Stock	04/29/2025		S		188	D	\$19.545	2,061	D	
Class A Common Stock	04/30/2025		M		100	A	\$14.39	2,161	D	
Class A Common Stock	04/30/2025		M		148	A	\$14.09	2,309	D	
Class A Common Stock	04/30/2025		S		100	D	\$19.5	2,209	D	
Class A Common Stock	04/30/2025		S		148	D	\$19.528	2,061	D	
Class A Common Stock								1,126	I	401(k) Plan

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Options	\$14.39	04/29/2025		M		151	07/01/2022	12/16/2026	Class A Common Stock	151	\$14.39	11,849	D	
Options	\$14.09	04/29/2025		M		37	07/01/2023	12/15/2027	Class A Common Stock	37	\$14.09	6,863	D	
Options	\$14.39	04/30/2025		M		100	07/01/2022	12/16/2026	Class A Common Stock	100	\$14.39	11,749	D	
Options	\$14.09	04/30/2025		M		148	07/01/2023	12/15/2027	Class A Common Stock	148	\$14.09	6,715	D	

Explanation of Responses:

Remarks:

Jeffrey D. Miller, by power of attorney 05/01/2025

** 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.