FORM 4

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

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	e burden								

0.5

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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	

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.

1. Name and Address of Reporting Person*  DONEGAL MUTUAL INSURANCE  CO  (Last) (First) (Middle)  1195 RIVER ROAD  P.O. BOX 302					3. Da 11/2	Issuer Name and Ticker or Trading Symbol     DONEGAL GROUP INC [ DGICA ]      In Date of Earliest Transaction (Month/Day/Year)     11/27/2024      If Amendment, Date of Original Filed (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title below)  6. Individual or Joint/Group Filing (Check Application)					wner specify	
(Street)  MARIETTA PA 17547  (City) (State) (Zip)															Line)  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Table	I - No	on-Deriva	tive	Secui	rities A	Acc	quirec	d, Dis	sposed of	, or B	enefic	ially	Own	ed				
Date				2. Transacti Date (Month/Day	//Year) Execu		Deemed ution Date, / th/Day/Year)		3. Transaction Code (Instr. 8)			Acquired (A) (D) (Instr. 3, 4		and 5) Secur Benef		cially I Following	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	Transa		action(s) 3 and 4)			(111341. 4)	
Class A C	Common St	ock		11/27/2024					P		8,500	A	\$16.4	729 12,72		729,950		D		
Class A Common Stock				11/29/2024					P		8,300	A	\$16.5	.5949 12,		,738,250		D		
Class B C	Common Sto	ock													4,7	08,570		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	3. Transaction Date (Month/Day/Year)	Execu if any	eemed ution Date, th/Day/Year)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ive ies ed	6. Date Expira (Mont	ation D		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (	D)	Date Exerc	isable	Expiration Date		or Number of Shares							

**Explanation of Responses:** 

Remarks:

Jeffrey D. Miller, EVP & Chief Financial Officer

12/02/2024

\*\* 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.

<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).