FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject	STATEME
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Fil

ENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* DONEGAL MUTUAL INSURANCE CO (Last) (First) (Middle) 1195 RIVER ROAD						Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA] Independent of the state o									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title below) Other (specify below)					
P.O. BOX (Street) MARIET	ΓΤΑ PA		7547 Zip)		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					tion 2A. Deemed Execution Date			d Date,	3. 4. Securities Acquired (. Transaction Code (Instr. 5)		ed (A)) or 5. Amo 4 and Securi Benefi		ount of ties (D) (D) (I) (I) (I		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	Amount	(A) or (D)	Pric	e	Transa	ction(s) 3 and 4)	}		(111541. 4)				
Class A Common Stock 11/14						2022					4,596	A	\$1	5.22	.22 11,382,2		82,290 D			
Class A C	Common St	ock		11/14/2	2022				P		45,000	A	\$1	\$15.4 11,427,290 D						
Class B C	Common St	ock																		
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)	if any	emed iion Date, i/Day/Year)	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispe	osed) r. 3, 4	6. Date Expirat (Month	ion Da	Securities Underlying Derivative Security (Ins 3 and 4)		nt of ties ying tive ty (Instr	De Ser (In:	Price of rivative curity str. 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	(A)	(D)			Expiration Date		or Numbe of Shares	er						

Explanation of Responses:

Remarks:

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

11/15/2022

** 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.