FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

washington,	D.C. 20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response:	0.5								

to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).
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* KELLEY RICHARD GEORGE					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 V Officer (give title Other (specify					
(Last) 1195 RIV P.O. BOX	ER ROAI	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/16/2021							X	belov		below)		
(Street) MARIET (City)	TTA PA	tate) (2	7547 Zip)							d (Month/Da			Line) X	Form Form Perso	filed by On filed by Mo on	e Rep	ng (Check A porting Pers an One Rep	on
1. Title of Security (Instr. 3)			2. Transac Date	. Transaction 2 vate E		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5)			ired (A)	or	5. Amount of Securities Beneficially Owned Following		Forn (D) c	n: Direct	7. Nature of Indirect Beneficial Ownership	
									v	Amount	(A) (D)	or Pric	e		action(s) . 3 and 4)			(Instr. 4)
Class A Common Stock ⁽¹⁾				08/16/2	2021			J	v	259	A	\$1	5.66	2!	5,528		I	401(k) Plan
Class A Common Stock ⁽¹⁾				11/15/2	2021			J	v	282	A	\$1	4.46	25,810			I	401(k) Plan
Class A Common Stock														9,284		D		
		Tal								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	exercise (Month/Day/Year) if an (Mortive)		emed on Date, (Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exerc Expiration Da (Month/Day/Y		te Amount of		int of rities rlying ative rity (Insti	Der Sed (Ins	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)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	r							

Explanation of Responses:

1. Dividend Reinvestment Plan

Remarks:

Mitchell J. Thoreson, by power of attorney

11/19/2021

** 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.