SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

to Sec obliga	this box if no k tion 16. Form 4 tions may conti tion 1(b).	or Form 5	STA		l pursua	ant to S	ection 16(a)	of the S	ecurit	NEFICIA ties Exchang mpany Act o	le Act of 1		RSHIP	Estin	Number: nated average burg s per response:	3235-0287 den 0.5
1. Name and Address of Reporting Person* <u>DONEGAL MUTUAL INSURANCE</u> CO					2. Issuer Name and Ticker or Trading Symbol <u>DONEGAL GROUP INC</u> [DGICA]								heck all app Direc	licable) tor		0% Owner
(Last) 1195 RT						3. Date of Earliest Transaction (Month/Day/Year) 11/09/2022							_ Officer (give title Other (specify below) below)			
P.O. BOX 302					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street) MARIE	ГТА РА	· 1	7547									Form filed by More than One Reporting Person				
(City)	(St	ate) (2	Zip)													
		Table	I - No	n-Deriva	ative S	Secur	ities Acq	uired,	Dis	posed of	, or Be	nefici	ally Own	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			y/Year) Execution D		ecution Date, Transaction		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	Report Transa (Instr. 3	ed ction(s) 3 and 4)		(Instr. 4)	
Class A Common Stock 11/09			11/09/2	2022			Р		6,672	A	\$15.	38 11,3	65,056	D		
Class A Common Stock 11/10/			2022			Р		5,889	A	\$15.	48 11,3	70,945	D			
Class A Common Stock 11/11/2				2022			Р		6,749	A	\$15.	34 11,3	77,694	D		
Class B Common Stock											4,7	08,570	D			
		Tal								osed of, convertib				d		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Dee Executi if any		4. Transa Code (8)	ction	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 a Amount Securitie Underlyi Derivativ Security 3 and 4)	nd of es ng re (Instr.	8. Price of Derivative Security (Instr. 5)		y Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
1			1							1	A	mount				1

Explanation of Responses:

Remarks:

Jeffrey D. Miller, EVP &

Chief Financial Officer

or Number

of Shares

Title

11/14/2022

** 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.

Code

(A) (D)

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.

Date

Exercisable

Expiration

Date