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## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB AP	PROVAL
MB Number:	3235-028

0 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).	

## 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* DONEGAL MUTUAL INSURANCE					2. Issuer Name and Ticker or Trading Symbol <u>DONEGAL GROUP INC</u> [DGICA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
	GAL MU	TUAL INSU	KANU	<u>E</u>					110	[ 2 01011	J		0	irector		X 10%	Owner	
<u>CO</u>														officer (give t	tle		(specify	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 08/24/2022								b	elow)		below	()	
1195 RIVER ROAD																		
						mond	mont Data a	f Origing		d (Month/Do	v/Voor)		Individu	al an Iaint/C		Tiling (Chook	Applicable	
P.O. BOX 302				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Ctra at)													X F	orm filed by	One F	Reporting Pe	rson	
(Street) MARIE	ΓΤΑ ΡΑ	<b>.</b> 1	7547											orm filed by erson	More	than One Re	porting	
(City)	(St	ate) (2	Zip)															
		Table	I - Non-l	Deriva	tive S	ecu	rities Acq	uired,	Dis	posed of	, or Be	nefici	ally O	wned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		3.4. Securities AcquTransactionDisposed Of (D) (InCode (Instr.5)					nd Se Be Ov	5. Amount of Securities Beneficially Owned Following		. Ownership orm: Direct D) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)	Price	ce Reported Transaction(s (Instr. 3 and 4				(Instr. 4)		
Class A Common Stock 08,			08/24/2	2022			Р		7,414	A	\$14	<u> </u>	11,182,086	╈	D			
Class B Common Stock													4,708,570	╈	D			
		Tal					ies Acqu varrants,							ned				
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)			Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of Der Securities Sec		8. Price Derivat Securit (Instr. §	ive derivati y Securit	ve es ially ng ed ction(s	10. Ownersh Form: Direct (D) or Indirec (I) (Instr. 4	t (Instr. 4)				

Explanation of Responses:

**Remarks:** 

Jeffrey D. Miller, EVP & Chief Financial Officer

Amount or Number

of Shares

Title

08/24/2022

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\star}$  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.

and 5)

(A) (D)

v Code

Date

Exercisable

Expiration

Date