FORM 4

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

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

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

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

Instruction 1(b).	Filed	pursua or Se	nt to S ction 3	Section 16(a) 30(h) of the I	of the S ovestme	ecurit nt Co	ies Exchang mpany Act o	e Act of 19 f 1940	934		nours	s per res	sponse:	0.5	
1. Name and Address of Reporting Person*  WAGNER DANIEL J  (Last) (First) (Middle 1195 RIVER ROAD P.O. BOX 302	e)	2. Issuer Name and Ticker or Trading Symbol  DONEGAL GROUP INC [ DGICA ]  3. Date of Earliest Transaction (Month/Day/Year)  08/16/2021						Check all app Direct Offic	Relationship of Reporting Person(s) to Issuer neck all applicable) Director 10% Owner  X Officer (give title other (specify below) below)  Sr. VP & Treasurer						
(Street)  MARIETTA PA 17547  (City) (State) (Zip)	,	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							ne) X Form Form					
Table I - N	lon-Deriva	tive S	ecui	rities Acq	uired,	Dis	posed of	, or Ber	nefici	ally Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)		Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			nd Securi Benefi	cially I Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	Amount	(A) or (D)	Price	Transa	action(s) 3 and 4)			(111301. 4)	
Class A Common Stock <sup>(1)</sup>	08/16/2	2021			J	V	609	A	\$15.	68 6	0,360			401(k) Plan	
Class B Common Stock											166		D		
Class A Common Stock										23,387			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
Derivative Conversion Date Executive Or Exercise (Month/Day/Year)	Deemed cution Date, y nth/Day/Year)	4. Transa Code (I 8)		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 and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
		Code	v	(A) (D)	Date Exercis	able	Expiration Date	or Nu of	ımber						

## **Explanation of Responses:**

1. Dividend Reinvestment Plan

## Remarks:

Jeffrey D. Miller, by power of <u>attorney</u>

08/30/2021

\*\* 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.