FORM 4

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

ashington,	D.C. 20549	

wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

Check this box if no longer subject
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

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0								

1. Name and Address of Reporting Person* BURKE KEVIN GERARD				2. Issuer Name <b>and</b> Ticker or Trading Symbol  DONEGAL GROUP INC [ DGICA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
BUKK	EKEVII	N GERARD			1						[ - 51011	,		X	Direc	tor		10% O	wner	
(Last)	,	,	Middle)			te of E		t Trans	action (N	Лоnth	/Day/Year)			X	belov	,	ief I	Other (below)	·	
	VER ROAI	)												President & Chief Exec Officer						
P.O. BOX 302					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X	Form	filed by On	e Rep	oorting Pers	on	
MARIET	ΓTA PA	A 1	7547												Form Perso	filed by Mo on	re tha	an One Rep	orting	
(City)	(S	tate) (2	Zip)		Rul	le 10	)b5-	·1(c)	Tran	sac	tion Indi	catio	n							
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acqu Disposed Of (D) (Instr. 5)						5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	,	Transa	ed ction(s) 3 and 4)			(111511.4)	
Class A Common Stock <sup>(1)</sup> 02/15/2					2024				J		34	A	\$14	\$14.88		3,008			401(k) Plan	
Class A Common Stock														10,235		D				
		Tal	ble II -								osed of, convertib				Owne	d				
4 =====================================		1	l			a115, V	_							·			. 1		44.94.4	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, //Day/Year)	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispe	osed )) r. 3, 4	6. Date Expirati (Month/	ion Da	'ear) Securiti Underly Derivati		nt of ties ying tive ty (Instr.	De	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)	
								Date Exercis	able	Expiration Date		Amount or Number of Shares	er							

## **Explanation of Responses:**

1. Dividend Reinvestment Plan

## Remarks:

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

\*\* Signature of Reporting Person Date

02/21/2024

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.