FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHA	ANGES IN	<b>I BENEFICIA</b>	L OWNERSHIP

OMB APPR	OVAL
OMB Number:	3235-0287
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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

1. Name and Address of Reporting Person*  DONEGAL MUTUAL INSURANCE  CO  (Last) (First) (Middle)  1195 RIVER ROAD						Susuer Name and Ticker or Trading Symbol     DONEGAL GROUP INC [ DGICA ]      Susuer Name and Ticker or Trading Symbol     DONEGAL GROUP INC [ DGICA ]      Susuer Name and Ticker or Trading Symbol     DONEGAL GROUP INC [ DGICA ]										k all app Direc	licable) tor er (give title	ng Pe	orson(s) to Is  10% Orong Other (below)	wner
P.O. BOX (Street) MARIET	ГТА Б	PA State)		4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
			Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				tion 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				) or 5. Amo 4 and Securit Benefic		unt of 6. 0 ies For (D) Following (I)		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or Pr		се	Transaction(s) (Instr. 3 and 4)				(		
Class A Common Stock 05/18/2				022		P		6,344	A \$1		5.51	1 10,643,343		D						
Class A Common Stock 05/19/2				05/19/2	2022		P		15,600 A S		\$1	5.62	5.62 10,658,943		D					
Class B Common Stock													4,708,570			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security	xercise (Month/Day/Year) if any (Month/Day/Year) vative		4. Transa Code ( 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		t		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

**Explanation of Responses:** 

Remarks:

<u>Jeffrey D. Miller, EVP & Chief Financial Officer</u>

05/20/2022

\*\* 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.