FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
\neg	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

						01 300	tion	0(11) 0	i tiic ii	iivestiiiei		прапу Аст с	71 1340								
1. Name and Address of Reporting Person* BURKE KEVIN GERARD							2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC DGICA								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DORK		111	GLIMIND												X	Direc	tor		10% O	wner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2023								X	belov	,		Other (below)	·		
1195 RIV	VER RO	AD				03/13/2023									President & Chief Exec Officer						
P.O. BOX 302						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Ctt)															X	,					
(Street) MARIETTA PA 17547															Form filed by More than One Reporting Person						
(City) (State) (Zip)						Rule	Rule 10b5-1(c) Transaction Indication														
							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	l - No	n-Deriva	tive S	ecui	ities	Acq	uired,	Dis	posed of	, or I	3ene	iciall	y Owr	ned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (ADisposed Of (D) (Instr. 3 5)			8, 4 and Secur Benef Owne Follow		cially I ving	Forn (D) c	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
										Code	v	Amount	(A) (D)	or Pr	ice		rted saction(s) . 3 and 4)				
Class A Common Stock ⁽¹⁾ 05/15/20							023		J	v	34	A	\$	14.45	45 2,907				401(k) Plan		
Class A Common Stock															8,874			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
		_			(e.g., pu	ıs, cai	15, V	vaiio	uits,				16 36	Curit							
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, if any				4. Transaction Code (Instr. 8)				6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		De Se (In:	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)	Beneficial Ownership (Instr. 4)		
						Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er						

Explanation of Responses:

1. Dividend Reinvestment Plan

Remarks:

<u>Jeffrey D. Miller, by power of attorney</u> <u>05/19/2023</u>

** Signature of Reporting Person Dat

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.