FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* GLATFELTER PHILIP H II					2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA]									Check all a	'		to Issuer		
(Last) (First) (Middle) 1195 RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 05/15/2014										icer (give title low)		Other (specify below)		
(Street) MARIET (City)			17547 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ine) X Fo	I or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
		Tabl	e I - Noi	n-Deriv	/ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally Ow	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4					6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	t of Indirect			
									Code	v	Amount	(A) or D)	Price	, Trai	saction(s) tr. 3 and 4)		(1150.4)	
Class A Common Stock ⁽¹⁾ 05/15/2					5/2014	2014		J	V	29		A	\$14	1.65	11,872	D	\top		
Class B Common Stock														3,276	D				
		Та									osed of, onvertib					d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Date,	Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivativ Security (Instr. 5)		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount nber ires					

Explanation of Responses:

1. Dividend Reinvestment Plan

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

05/20/2014

** 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.