FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

- 1										
	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								

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* <u>GLATFELTER PHILIP H II</u>							2. Issuer Name <b>and</b> Ticker or Trading Symbol DONEGAL GROUP INC [ DGICA ]								Check all a		ng Person	Person(s) to Issuer 10% Owner Other (specify below)	
(Last) (First) (Middle) 1195 RIVER ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013										cer (give title ow)			
Street) MARIETTA PA 17547 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Fo Fo	or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting orson			
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or I	3ene	ficia	ally Owi	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			Transaction Disposed Code (Instr. 5)			ities Acquired (A) or d Of (D) (Instr. 3, 4 an			nd Secu Bend Own	5. Amount of Securities Beneficially Owned Following Reported		rship irect direct 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	nt (A) or (D)		Price	Tran	Transaction(s) (Instr. 3 and 4)			(111511.4)			
Class A Common Stock <sup>(1)</sup> 05/15/3							2013		J	v	27		A	\$14	1.7	11,362	D		
Class B Common Stock															3,276	D			
		Та	ble II - D								sed of, onvertib				y Owne	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 I if any (Month/Day	Date, Transa Code (I			of		Expiratio	6. Date Exercisable a Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price o Derivative Security (Instr. 5)		Own Forn Direc or In (I) (Ir	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shai	ber					

## **Explanation of Responses:**

1. Dividend Reinvestment Plan

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

05/20/2013

\*\* 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.