FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

hours per response:

Check this box if no longer subject 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

1. Name and Address of Reporting Person* DONEGAL MUTUAL INSURANCE CO						2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 1195 RIV	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/26/2007										Officer (give titl relow)	Э	Other below)	(specify	
(Street) MARIET (City)			17547 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X F F	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Nor	า-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed o	f, or	Bene	ficia	ally Ov	vned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			nd Se Be Ov	Amount of curities eneficially vned Following ported	Fo (D)	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount (A) or (D)		Price	Tra	Transaction(s) (Instr. 3 and 4)			(msu. 4)		
Class B Common Stock 02/26/				5/2007	2007		P		119		A	\$17	7.6	3,893,237		D				
Class A Common Stock														8,132,884		D				
		Та	ıble II - [sed of, onvertib				y Own	ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		ı of		6. Date E Expiratio (Month/D	n Date	Amou Secur Under Deriva		itle and bunt of urities erlying vative urity (Instr. 3		8. Price Derivati Securiti (Instr. 5		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha	ber						

Explanation of Responses:

Jeffrey D. Miller, SVP & Chief 02/27/2007 Financial Officer

** 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.