FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ngton, D.C. 20549	OMB APPROVAL

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

											ilpally Act										
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)							
				1							,				Director		X	10% C	wner		
(Last) (First) (Middle) 1195 RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 09/11/2006											Officer ( below)	cer (give title ow)		Other below)	(specify	
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) MARIAT	TA PA	. 1	7547			, ,									ne) X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (	Zip)													r erson					
		Tabl	e I - Noi	n-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	lly O	wned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exe ay/Year) if ar		A. Deemed kecution Date, any lonth/Day/Year)				rities Acquired (A) ed Of (D) (Instr. 3, 4			and Secur Bene		rities F ficially (I ed Following (I		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	( <i>A</i>	) or ))	Price	Ti	ransacti	action(s) . 3 and 4)			(11150.4)	
Class B Common Stock 09/11					2006			P		124		A	\$17.	7.75 3,8		837,538		D			
		Та						•			sed of, onvertib				y Owr	ned					
1. Title of Derivative Security (Instr. 3)	ive Conversion or Exercise (Month/Day/Year) Price of Derivative Security  Execution Date, if any (Month/Day/Year)				saction e (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)  Amount or Number of Title Shares			8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

**Explanation of Responses:** 

Jeffrey D. Miller, Sr. VP & **Chief Financial Officer** 

09/12/2006

Date

\*\* Signature of Reporting Person

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.