FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL												
OMB Number:	3235-028											

37 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).

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* HESS JACK LEE						2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA]									k all app	•		()	ssuer Owner	
					3. Date of Earliest Transaction (Month/Day/Year) 05/15/2014									Office belov	er (give title w)		Other below	(specify ')		
(Street) MARIET (City)			.7547 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Yea								6. Indi Line) X	•					
		Tabl	e I - No	on-Deriv	/ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or B	enefic	ially	Owne	ed				
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/				Execution Date,		3. 4. Securitie Transaction Code (Instr. 8) 5,			nd	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership						
									Code	v	Amount	(A) oi (D)	Price	- 1		nsaction(s) tr. 3 and 4)			(Instr. 4)	
Class A Common Stock ⁽¹⁾ 05/15/20					2014)14		J	V	22	A	\$14	.65	2,529			D			
Class A Common Stock													10,500				Retirement Plan			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		ı of		6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

1. Dividend Reinvestment Plan

Jeffrey D. Miller, by power of attorney

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.