FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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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

1. Name and Address of Reporting Person* DONEGAL MUTUAL INSURANCE CO						2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICB]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) 1195 RIV	Last) (First) (Middle) 195 RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2016										Officer (give title Other (sp below) below)					
(Street) MARIET (City)			.7547 Zip)		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individ ne) X	Form Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)						Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A) o d Of (D) (Instr. 3, 4 a			and Securi		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A (D) or)	Price	1	Transaction(s) (Instr. 3 and 4)				(
Class B C	/2016	2016		P		100		A	\$14.77		4,647,339			D							
Class A Common Stock															9,851,025			D			
		Та									sed of, onvertib				y Ow	ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,		ansaction ode (Instr.		of		xercis n Date ay/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		str. 3		ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	vnership orm: rect (D) Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber	er							

Explanation of Responses:

<u>Jeffrey D. Miller, EVP & Chief</u> Financial Officer <u>06/08/2016</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).