FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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1. Name and Address of Reporting Person*  KRAFT KEVIN MICHAEL SR						2. Issuer Name <b>and</b> Ticker or Trading Symbol DONEGAL GROUP INC [ DGICA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
															X Directo			10% Ov			
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)										Officer below)	(give title		Other (s	specify		
1195 RIVER ROAD					12/	12/15/2016									,			,			
1155 KIVEK KOAD							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Ctroot)					4. 11	Ame	nament,	Date 0	i Originai i	-iieu	(MOHUH/D	ay/ rea	1)	Line		JohnvGroup	) HIIII	у (Спеск Ар	plicable		
(Street)  MARIE	ΓΤΑ ΡΑ	<u> </u>	17547												X Form f	iled by One	e Repo	orting Perso	n		
WII HOLD	1111 11	1	17547														re thar	n One Repo	rting		
(City)	(S	tate)	(Zip)												Persor	1					
		Tab	le I - Nor	า-Deriv	ative	Sec	curitie	s Acc	quired, I	Disp	osed o	of, or	Bene	eficial	ly Owned	d I					
1. Title of Security (Instr. 3)  2. Trans Date						6	2A. Deemed Execution Date,		3. Transaction Code (Instr.						nd Securities		Form: Direct		7. Nature of Indirect Beneficial Ownership		
(Month/E						Day/Year)   if any (Month/Day/Ye				nstr.	r.   5)					Following (I)		(Instr. 4)			
					Code	v	Amount	(4	(A) or (D) Price		Reported Transact (Instr. 3	ction(s)			(Instr. 4)						
Class A (	Class A Common Stock													7,736			D				
		7	able II -						iired, Di option						Owned						
4 Tido -4		0. 7				-	<del>-</del>					_		11.00	0 Duize of	0 N		10			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (I 8)		ı of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisable		xpiration ate	Title	0 N 0	Amount or Number of Shares							
				-+		_	. 7	-/-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	+		Class	-								
Options	\$16.48	12/15/2016			Α		6,000		07/01/2017	12	2/15/2021	Comm		6,000	<b>\$0</b>	6,000		D			

**Explanation of Responses:** 

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

12/19/2016

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.