FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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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 Se	ection	1 30(n) o	of the in	vestmen	t Con	npany 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 [DGICA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DUNEC	JAL MU	TUAL INSU	KANC	<u>e CU</u>								•			Dire	ctor	X	10% C	wner
(Last) 1195 RIV	(First) (Middle) RIVER ROAD				3. Date of Earliest Transaction (Month/Day/Year) 06/04/2015										Offic belo	er (give title w)		Other below)	(specify
(Street) MARIET	TA PA	A PA 17547				4. If Amendment, Date of Original Filed (Month/Day/Year)									e) <mark>X</mark> Forr Forr	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(St	ate) (Zip)												reis	SOTI			
		Tabl	e I - Noi	n-Deriva	ative	Seci	urities	s Acq	uired,	Dis	posed o	f, or I	3ene	ficia	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A (D) or)	Price	Trans	ransaction(s) nstr. 3 and 4)			(11150: 4)	
Class A C	ommon Sto	ock		06/04/	2015				P		50,000)	A	\$14 .	8,3	176,025	D		
Class B C	ommon Sto	ock													4,247,039 D				
		Та									sed of, onvertib				Owned				
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,	Code (Ins				6. Date E: Expiration Month/D	n Date		7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)		tr. 3	8. Price of Derivative Security Instr. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	F C O (I	.0. Ownership orm: Oirect (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				t			anu 5)						Amo or Num						

Date Exercisable

Expiration Date

Title

Explanation of Responses:

Jeffrey D. Miller, EVP & Chief 06/05/2015 **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.

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