FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	OMB APPROVAL			
CEC IN DENETICIAL OWNEDCHID	OMB Number:	3235-0			

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BURKE KEVIN GERARD					2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA]									heck all a Dir)	Person(s) to Iss 10% O Other (wner
(Last) 1195 RIV P.O. BOX	VER ROAD	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/17/2015								^ be	below) below) President & Chief Exec Officer			·
(Street) MARIET (City)			17547 (Zip)		4. 1	If Ame	endment, [Date o	f Original	Filed	(Month/Da	ay/Year)	6. Lir	ie) <mark>X</mark> Fo Fo	m filed b	y One R	iling (Check Ap deporting Perso than One Repo	on
		Tab	le I - Non	-Deriv	/ativ	e Se	curities	s Acc	quired,	Disp	osed o	f, or Be	neficia	lly Owr	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp Code (Instr. 5)		Dispose	ties Acquir d Of (D) (Ins				Fo (D	Ownership orm: Direct O) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) o	r Price	Tran	action(s) action(s)			(instr. 4)
Class A Common Stock													583		D			
Class A Common Stock													2,156			I	401(k) Plan	
		7	Γable II - I (or Bend ble secu		y Owne	d			
Derivative Conversion D		3. Transaction Date (Month/Day/Year) (Month/Day/Year)		Date, Transactio Code (Inst					6. Date Ex Expiration (Month/Da	n Date		7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5	ve deri / Sec Ben Owr Foll Rep Trar	lumber of ivative curities neficially ned lowing oorted nsaction(itr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisat		xpiration ate	Title	Amount or Number of Shares					
Options	\$13.64	12/17/2015			A		55,000		07/01/203	16 1	2/17/2020	Class A Common Stock	55,000	\$0		55,000	D	

Explanation of Responses:

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

12/21/2015

** 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.