FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-028								
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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).

## 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*  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)  Director X 10% Owner					
(Last) 1195 RIV						3. Date of Earliest Transaction (Month/Day/Year) 03/28/2008										Office	er (give title v)		Other below)	(specify
(Street)  MARIET  (City)			.7547 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check A Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person									orting Pers	on				
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally (	Dwne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				4 and 5) Sed Ber Ow		Amount of ecurities eneficially wned Following		vnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D) Pri		Price	- 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Class A Common Stock 03/28/2					/2008	2008		P		25,000		A	\$17.	.584 8,		3,348,517		D		
Class B Common Stock															4,125,364			D		
		Та									sed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year		4. Transaction Code (Instr. 8)		n of		6. Date Exercis Expiration Date (Month/Day/Yea		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	O F D 0 (!	0. Ownership orm: Direct (D) or Indirect () (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)			Expiration Date	Amour or Number of Shares		mber						

**Explanation of Responses:** 

<u>Jeffrey D. Miller, Sr. VP & Chief Financial Officer</u>

04/01/2008

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).