FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |

0.5

hours per response:

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* WAMPLER RICHARD D II | | | | | 2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA] | | | | | | | | | heck al | nship of Reportin I applicable) Director | g Person(s) to I | | |
|--|---|------|------------------------|------------------------------|--|---|--|--|------------|-------|--|---------------|--|---|---|--|--|----------|
| (Last) (First) (Middle) 1195 RIVER ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013 | | | | | | | | | (| Officer (give title pelow) | Other below | (specify |
| (Street) MARIET (City) | | | .7547 Zip) | | 4. If | Ame | ndment | Date o | f Original | Filed | (Month/Da | ay/Yea | r) | | ne) X | ual or Joint/Group Form filed by One Form filed by Mor Person | e Reporting Pers | son |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, or | Ben | eficia | lly O | wned | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquisities Acquisit | | | | | d S B O | Amount of ecurities eneficially wned Following eported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | Code | v | Amount (A) | | A) or O) | Price | Tr | ransaction(s) nstr. 3 and 4) | | (11150.4) | | |
| Class A Common Stock ⁽¹⁾ 05/15/2 | | | | | 5/2013 | | | | J | V | 14 | | Α | \$14 | 65 | 4,592 | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | Date, ny/Year) - | 4. Transa Code (8) | | on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares | | ount nber | 8. Price Derivat Securit (Instr. 5 | ive derivative y Securities | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Dividend Reinvestment Plan

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

05/22/2013

** 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.