FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL										
	OMB Number:	3235-028									
- 1											

87 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).

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 (Last) (First) (Middle)					Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICB] Just of Earliest Transaction (Month/Day/Year) 03/09/2007									Relationship of Reporting (Check all applicable) Director Officer (give title below)			10% C	wner (specify		
(Street) MARIET	MARIETTA PA 17547					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Forn Forn	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(50		Zip) 	n Deriv	ativo	Sac	uritio		nuired	Die	nosed o	f or F	Ronof	icially	Owne					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				ction	tion 2A. Deemed Execution Date,		3. 4. Securi		4. Securiti	ies Acquired (A) o Of (D) (Instr. 3, 4 a) or	5. Ame Securi Benefi	ount of ties cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or P	rice	Transa (Instr.	action(s) 3 and 4)				
Class B Common Stock 03/09/2					/2007	:007		P		274	P	\$	17.745	3,893,937		D				
Class A Common Stock														8,1	.32,884	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	Execution Date, if any		4. Transaction Code (Instr. 8)		of		6. Date Exercisable Expiration Date (Month/Day/Year)		Amount of Securities Underlying Derivative Security (Instr. and 4)		Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code		v	(A)	(D)	Date Exercisa	Date Expiration Exercisable Date Title		or Numb of Share								

Explanation of Responses:

Jeffrey D. Miller, SVP & Chief 03/12/2007 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.