FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
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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

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1. Name and Address of Reporting Person* WAGNER DANIEL J					2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [DGICA]												p of Reporting plicable) ctor	g Pei	rson(s) to Is		
(Last) (First) (Middle) 1195 RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 08/05/2015									X	Offic belov			below)	(specify		
(Street) MARIET (City)			17547 Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year) 08/06/2015									i. Indiv ine) X	Forn Forn	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Ben	efici	ally	Owne	ed				
			2. Transaction Date (Month/Day/Year)		ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						4 and Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v			A) or D)	Price	•		action(s) 3 and 4)			(Instr. 4)	
Class A C	ss A Common Stock ⁽¹⁾ 08/05/2015							I		687	A \$		\$14	1.52	42,123			I	401(k) Plan		
Class A Common Stock																1	6,663		D		
Class B Common Stock						\top											166		D		
		Та									sed of, onvertib					vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Executior if any (Month/Da	Date,	I. Fransaction Code (Instr B)				6. Date E Expiratio (Month/D	on Date	e ar)	7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)		ount	Deri Seci	Price of erivative ecurity istr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Sha	ares							

Explanation of Responses:

1. Reporting Person hereby amends his Form 4 report to change the reporting code of this transaction to I from the code P that was reported inadvertently in the initial Form 4 filing. This transaction under the Donegal Mutual Insurance Company 401(k) Plan is a transaction exempt under Section 16(b) by virtue of Rule 16b-3(f).

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

09/03/2015

** 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.