## Edgar Filing: DONEGAL GROUP INC - Form 4

DONEGAL C	GROUP INC										
Form 4											
July 20, 2007	Л									PPROVAL	
	UNITE	D STATES		ITIES AN hington, 1	COMMISSION	OMB Number:	3235-0287				
Check this if no longe subject to Section 16 Form 4 or Form 5	er <b>STATE</b> 5. Filed p	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31Expires:200Estimated averageburden hours perresponse0.4	
obligation: may contin <i>See</i> Instruct 1(b).	s Section 1	7(a) of the 1	Public Ut		ing Com	pany	Act o	f 1935 or Section	n		
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> DONEGAL MUTUAL INSURANCE CO			2. Issuer Name <b>and</b> Ticker or Trading Symbol DONEGAL GROUP INC [DGICB]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Chec	k all applicable	e)	
1195 RIVER ROAD			(Month/Day/Year) 07/20/2007					Director    X 10% Owner       Officer (give title     Other (specify below)			
MARIETTA	Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>						
								Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ace	quired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	any		emed 3. 4. Securities on Date, if TransactionAcquired (A) or Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or			)	Securities Beneficially Owned Following Reported Transaction(s)	5. Ownership Form: Direct D) or ndirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount		Price	(Instr. 3 and 4)			
Class B Common Stock	07/20/2007			Р	8,218	A	\$ 19	4,009,298	D		
Class A Common Stock								8,135,684	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
1	Director	10% Owner	Officer	Other				
DONEGAL MUTUAL INSURANCE CO 1195 RIVER ROAD MARIETTA, PA 17547		Х						
Signatures								
Jeffrey D. Miller, Sr. VP & Chief Financial Officer	07/20/2007							
**Signature of Reporting Person		Date						
Explanation of Responses:								

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\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.