DONEGAL GROUP INC

Form 4

January 02, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average

OMB APPROVAL

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

1(b).

Stock (1)

(Print or Type Responses)

| 1. Name and Address of Reporting Person * MAHAN JON MARSHALL | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|--|-----------------------------------|---------------|--|---|--|------------------------------|------------------------|--|--|-------------|--|
| (Last) | (First) | (Middle) | DONEGAL GROUP INC [DGICA] 3. Date of Earliest Transaction | | | BICA] | (Check all applicable) | | | | |
| (Lust) | (1130) | (Middle) | | | ansaction | | | X Director | 10% | Owner | |
| 1195 RIVER ROAD | | | (Month/Day/Year) 01/02/2015 | | | | | Officer (give below) | | er (specify | |
| (Street) | | | 4. If Amendment, Date Original | | | | | 6. Individual or Joint/Group Filing(Check | | | |
| MARIETT. | A, PA 17547 | | Filed(Mor | nth/Day/Year |) | | | Applicable Line) _X_ Form filed by 0 Form filed by N Person | One Reporting Pe More than One Re | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed o | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | ar) Execution | med on Date, if Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securi or(A) or Di (Instr. 3, | ispose 4 and (A) or | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Class A Common | 01/02/2015 | | | A | 400 | ٨ | \$ | 4.488 | D | | |
| Common | 01/02/2013 | | | A | 400 | Α | 4 = 00 | 4,400 | ע | | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

15.98

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) | | ate | Amount Underly Securiti | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------------------------------|---|---|---|
| | | | | Code V | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|--------------|--|--|--|--|
| r g | Director | 10% Owner | Officer Othe | | | | |
| MAHAN JON MARSHALL | | | | | | | |
| 1195 RIVER ROAD | X | | | | | | |
| MARIETTA, PA 17547 | | | | | | | |

Signatures

Jeffrey D. Miller, by power of attorney 01/02/2015

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Grant from Directors Equity Incentive Plan

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.

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