DONEGAL GROUP INC

Form 4

November 28, 2007

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Washington, D.C. 20549

Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

Section 16.

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

See Instruction 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * NIKOLAUS DONALD H			Symbol	and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earlies	t Transaction	(Check all applicable)			
1520 QUARRY ROAD, PO BOX 286			(Month/Day/Year 11/28/2007	r)	_X_ Director 10% Owner _X_ Officer (give title Other (specify below) President and CEO			
	(Street)		4. If Amendment	, Date Original	6. Individual or Joint	/Group Filing(Check		
SILVER S	SPRING, PA 1757	75	Filed(Month/Day/	Year)	Applicable Line) _X_ Form filed by One Form filed by More Person			
(City)	(State)	(Zip)	Table I - No	n-Derivative Securities Acq	uired, Disposed of, o	r Beneficially Owned		
1.Title of	2. Transaction Date	2A. Deeme	d 3.	4. Securities Acquired (A)	5. Amount of 6.	7. Nature o		

(City)	(State)	(Zip) Ta	ble I - Non	-Derivativ	e Secu	rities Acqu	iired, Disposed o	f, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8)	Fransactioner Disposed of (D) Code (Instr. 3, 4 and 5) Instr. 8) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Class A Common Stock	11/28/2007		M	25,000	` ′	\$ 6.75	154,675.202	D	
Class A Common Stock	11/28/2007		S	25,000	D	\$ 17.378	129,675.202	D	
Class A Common Stock							126,089.792	I	401(k) Plan
Class B Common							51,623.118	I	401(k) Plan

Edgar Filing: DONEGAL GROUP INC - Form 4

	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 control						
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.							
Class A Common Stock	1	19,464	I	Family Foundation			
Class B Common Stock	5	589	I	Spouse			
Class A Common Stock	1	,365.798	I	Spouse			
Class B Common Stock	1	134,148.444	D				
Stock							

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

number.

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	onDerivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options	\$ 6.75	11/28/2007	M		25,000	09/01/2003	04/17/2008	Class A Common Stock	25,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
• 0	Director	10% Owner	Officer	Other				
NIKOLAUS DONALD H 1520 QUARRY ROAD PO BOX 286 SILVER SPRING, PA 17575	X		President and CEO					

Reporting Owners 2

Signatures

Donald H. Nikolaus

**Signature of Date
Reporting Person

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).

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.

Signatures 3