Edgar Filing: DONEGAL GROUP INC - Form 4

DONEGA Form 4 May 04, 20	L GROUP INC											
FOR	M 4 _{UNITEI}) STATES		U RITIES Vashingto	OMB A OMB Number:	PPROVAL 3235-0287						
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT C			Section Public	SECU 16(a) of	Anuary 3 Expires: 200 Estimated average burden hours per response 0							
1(b).	struction	50(II)	or the	mvesune	nt Compa	ily AC	. 01 194	0				
(Print or Typ	e Responses)											
1. Name and Address of Reporting Person <u>*</u> NIKOLAUS DONALD H			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 (Ch					(Check	ck all applicable)			
1195 RIV	ER ROAD, P.O.]	BOX 302	below)						e titleX Other (specify below) aarks / See Remarks			
MARIET	(Street) FA, PA 17547			mendment, //onth/Day/Yo	Date Origina ear)	al		6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting P	erson		
(City)	(State)	(Zip)	Т	bla I Nor	Dorivativa	Soon	ritios A ca	Person uired, Disposed of,	or Bonoficio	lly Ownod		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day	l Date, if	3.	4. Securitie opr Disposed (Instr. 3, 4) Amount	es Acqu d of (E	uired (A)))	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	04/30/2015			M <u>(1)</u>	125,000	A	\$ 14	234,389.869	D			
Class A common stock	04/30/2015			S	125,000	D	\$ 15.418	109,389.869	D			
Class A common stock								174,118.483	I	401(k) Plan		
Class A common								16,365.798	Ι	Spouse		

Class A common stock	166,369	Ι	Family Foundation
Class A common stock	12,668	I	Trust
Class B common stock	130,210.44	D	
Class B common stock	51,637.532	I	401(k) Plan
Class B common stock	589	I	Spouse
Class B common stock	3,938	I	Family Foundation

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

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 number.

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)	onDeri Secu Acqu Disp	umber of vative rities hired (A) or osed of (D) r. 3, 4, and	e Expiration Date (Month/Day/Year) (A) or of (D)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun Number Shares
Employee Stock option (right to buy)	\$ 14	04/30/2015		M <u>(1)</u>		125,000	03/01/2011	07/15/2015	Class A common stock	125,0

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
NIKOLAUS DONALD H 1195 RIVER ROAD P.O. BOX 302 MARIETTA, PA 17547	Х		See Remarks	See Remarks					
Signatures									
/s/ Donald H									

/s/ Donald H. Nikolaus <u>**</u>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).

Exercise of employee stock options under Rule 16b-3. As reported in Table II of this Form 4 Report, the exercise of options resulted in the acquisition of 125,000 shares of Class A common stock under Rule 16b-3, as reported in Table I of this Form 4 Report, which were concurrently sold, as reported in Table I of this Form 4 Report.

Remarks:

Chairman of the Board and President

Reporting Person is the President of Donegal Group Inc. ("DGI"), on medical leave of absence in his capacity as Chief Execut

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.