FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	OF	CHANGES	IIN	BENEFICIAL	OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>DONEGAL MUTUAL INSURANCE CO</u>					2. Issuer Name and Ticker or Trading Symbol DONEGAL GROUP INC [dgicb]										p of Reportin blicable) ctor	g Pers	()		
(Last) (First) (Middle) 1195 RIVER ROAD				3. Date of Earliest Transaction (Month/Day/Year) 09/20/2004									Offic belov	er (give title w)	Other (s below)				
(Street) MARIAT (City)			.7547 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indir Line) X	Forn Forn	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson					
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or E	Benef	icially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 5)					Securi Benef	icially d Following	Form (D) or	nership : Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or F	Price	Transa	action(s) 3 and 4)			(msu. 4)
Class B Common Stock			09/20	/2004				P		500	500 A		\$18.95	1,980,870		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security Instr. 3) 2. Conversion Opate (Month/Day/Year) Conversion Opate (Month/Day/Year)		Date,	Date, Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Oi Fo Di (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

Ralph G. Spontak, Sr. VP, Secretary and CFO

09/22/2004

** 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.