### Edgar Filing: State Auto Financial CORP - Form 4

State Auto I Form 4	Financial CORP												
April 30, 20	008												
FORM	GEGU								OMB APPROVAL				
	STATES		SECURITIES AND EXCHANGE CO Washington, D.C. 20549						OMB Number:	3235-0287			
Check ti if no lor subject Section Form 4 Form 5 obligation may con <i>See</i> Inst 1(b).	nger to 16. or Filed put ons stinue.	F CHAN	NGES I SECU 16(a) of Utility He	Expires: January 31, 2005 Estimated average burden hours per response 0.5									
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> STATE AUTOMOBILE MUTUAL INSURANCE CO								I	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction						(Check all applicable)				
518 E. BROAD STREET			(Month/Day/Year) 04/28/2008					- - b	DirectorOfficer (give titleOther (specify below)				
				Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
COLUMB	US, OH 43215							Ē	erson	she than one Rej	Jorting		
(City)	(State)	(Zip)	Tab	le I - Nor	n-D	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)			tior	4. Securiti or Dispose (Instr. 3, 4	ed of		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	V	Amount	or (D)	Price	(Instr. 3 and 4)	(msu: I)			
Common Shares without par value	04/28/2008			S		31,755	D	\$ 27.9395	21,552,849 (1)	D			
Common Shares without par value	04/29/2008			S		24,518	D	\$ 27.6545	21,528,331 (1)	D			
Common Shares without par value	04/30/2008			S		22,587	D	\$ 27.6783	21,505,744 (1)	D			

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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.

#### 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)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	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**

S 5 C S

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
STATE AUTOMOBILE MUTUAL INSURANCE CO 518 E. BROAD STREET COLUMBUS, OH 43215		Х				
Signatures						
	A \$7					

State Automobile Mutual Insurance Company by James A. Yano, Secretary

\*\*Signature of 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).

1. On August 17, 2007, State Auto Financial Corporation announced a Stock Repurchase Program pursuant to which State Auto Financial Corporation is authorized the repurchase, from time to time, of up to 4.0 million of its common shares over a period extending until December 31, 2009. Under this Stock Repurchase Program, State Auto Financial Corporation will repurchase shares from State

(1) Automobile Mutual Insurance Company in amounts that are proportional to the respective current ownership percentages of State Automobile Mutual Insurance Company, which is approximately 64%, and other shareholders. All of the common shares being reported as sold under this Form 4 were sold by State Automobile Mutual Insurance Company to State Auto Financial Corporation pursuant to this Stock Repurchase Program.

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.

04/30/2008

Date