## Edgar Filing: POWELL CYNTHIA A - Form 4

POWELL CY	YNTHIA A										
Form 4											
March 04, 20	013										
FORM			CECUD					COMPAREION	т	PPROVAL	
Check thi	ITIES AND EXCHANGE COMMISSION hington, D.C. 20549				OMB Number:	3235-0287					
if no long subject to Section 10 Form 4 or	F CHANGES IN BENEFICIAL OWN SECURITIES					NERSHIP OF	Expires: Estimated : burden hou response	irs per			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Section 17(a) of the Public Utility Holding Compa 30(h) of the Investment Company A						pany	Exchange Act of 1934, ny Act of 1935 or Section				
(Print or Type R	Responses)										
POWELL CYNTHIA A Symbol			Symbol	r Name and Ticker or Trading uto Financial CORP [STFC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	liddle)	3. Date of Earliest Transaction (Check				ck all applicable	k all applicable)			
(Mo			(Month/Day/Year) 02/28/2013					Director 10% Owner X Officer (give title Other (specify below) below) Vice President			
	(Street)			endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
COLUMBU	S, OH 43215							Form filed by I Form filed by I Person			
(City)	(State) (	Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio: any		3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Shares without par value	02/28/2013			А	0	А	\$0	13,990.813 <u>(1)</u>	D		

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.

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 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)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy) NQ	\$ 16.8	02/28/2013		А	19,544	02/28/2014 <u>(2)</u>	02/27/2023	Common Shares	19,5

## **Reporting Owners**

Reporting Owner Name / Address		Relat	tionships				
	Director	10% Owner	Officer	Other			
POWELL CYNTHIA A 518 E. BROAD STREET COLUMBUS, OH 43215			Vice President				
Signatures							
Cynthia A. Powell by James A. Yano, attorney in fact pursuant to POA filed with							

Commission 5/7/07.

\*\*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).

Includes the following acquisitions: 65.736 and 72.106 shares acquired in March 2012, 76.247 and 69.510 shares acquired in June 2012,
(1) 58.901 and 64.608 shares acquired in September 2012, and 45.625 and 50.046 shares acquired in December 2012 under the State Auto Financial CP Reinvestment.

- (2) The options vest in three equal annual installments beginning on February 28, 2014..
- (3) Field should be left blank, but due to a software defect, requires input.

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.

Date