Edgar Filing: State Auto Financial CORP - Form 4

Form 4 March 07, FORI Check if no lo subject Section Form 4 Form 5 obligat may co	VI 4 this box nger to a 16. or filed pu Section 17	MENT OF Irsuant to Se I(a) of the Pu	Wa CHA ection ublic U	ashingto NGES II SECU 16(a) of Utility Ho	n, D.C. 20 N BENEF JRITIES the Securi)549 ICIA ties E	LOWN Exchange y Act of	OMMISSION NERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated burden ho response.	ours per	
	•	Person *	2 Lagu	Nomo o	nd Tielten er	Tradi		5 Relationship of	Reporting Pe	erson(s) to	
RESTREPO ROBERT P JR Sym					nd Ticker or			5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)		State Auto Financial CORP [STFC] 3. Date of Earliest Transaction					(Chec	k all applicab	ole)	
518 E. BR	Month/)3/06/	/Day/Year) 2014				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chairman, President, CEO					
COLUMB	mendment, Date Original 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 Person						
(City)	(State)	(Zip)	Tal	ble I - Nor	-Derivative	Secur	ities Aca	ired, Disposed of	. or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ransaction Date 2A. Deemed			4. Securitie otor Dispose (Instr. 3, 4 Amount	es Acq d of (E	uired (A) D)	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)	
Common Shares without Par Value	03/06/2014			Р	337.589	А	\$ 21.179	3,095.31	I	By 401(k) plan	
Common Shares without Par Value								10,235.894	Ι	By Non-qualified deferred compensation plan	
Common Shares without	03/06/2014			Р	3	А	\$ 21.21	81,582.593	D		

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Par Value									
Common Shares without Par Value	03/06/2014	Р	1,200	A	\$ 21.22	82,782.593	D		
Common Shares without Par Value	03/06/2014	Р	2,439	А	\$ 21.23	85,221.593	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.

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
RESTREPO ROBERT P JR 518 E. BROAD STREET COLUMBUS, OH 43215	Х		Chairman, President, CEO					
Signaturas								

Signatures

/s/Robert P. Restrepo, Jr. by James A. Yano, attorney in fact pursuant to POA filed with Commission 5/7/07.

<u>**</u>Signature of Reporting Person

03/07/2014

Date

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.