

Jones Scott Alan
Form 3
March 12, 2012

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| | | | | |
|---|---------|--|--|--|
| 1. Name and Address of Reporting Person * | | 2. Date of Event Requiring Statement | 3. Issuer Name and Ticker or Trading Symbol | |
| Â Jones Scott Alan | | (Month/Day/Year) | State Auto Financial CORP [STFC] | |
| (Last) | (First) | (Middle) | 03/02/2012 | |
| 518 EAST BROAD STREET | | 4. Relationship of Reporting Person(s) to Issuer | | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| (Street) | | (Check all applicable) | | 6. Individual or Joint/Group Filing(Check Applicable Line) |
| COLUMBUS,Â OHÂ 43215 | | ___ Director ___ 10% Owner | | ___X___ Form filed by One Reporting Person |
| (City) | (State) | (Zip) | ___ Form filed by More than One Reporting Person | |
| | | ___X___ Officer ___ Other | | |
| | | (give title below) (specify below) | | |
| | | Vice President | | |

Table I - Non-Derivative Securities Beneficially Owned

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|------------------------------------|--|---|--|
| Common Shares without par value | 262.949 | D | Â |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---|--|--|--|--|
| | Date Exercisable | Expiration Date | Title | Amount or Number of | |

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| | | | | Shares | | (I) (Instr. 5) | |
|--|---------------------------|------------|------------------|--------|----------|-------------------|---|
| Employee Stock Option (Right to Buy) NQ | 05/03/2008 ⁽¹⁾ | 05/02/2017 | Common Shares | 1,063 | \$ 29.53 | D | Â |
| Employee Stock Option (Right to Buy) NQ | 03/06/2009 ⁽¹⁾ | 03/05/2018 | Common Shares | 790 | \$ 25.81 | D | Â |
| Employee Stock Option (Right to Buy) NQ | 03/05/2010 ⁽¹⁾ | 03/04/2019 | Common Shares | 800 | \$ 14.49 | D | Â |
| Employee Stock Option (Right to Buy) NQ | 03/04/2011 ⁽¹⁾ | 03/03/2020 | Common Shares | 1,356 | \$ 18.78 | D | Â |
| Employee Stock Option (Right to Buy) NQ | 03/03/2012 ⁽¹⁾ | 03/02/2021 | Common Shares | 1,636 | \$ 17.03 | D | Â |
| Employee Stock Option (Right to Buy) NQ | 03/01/2013 ⁽¹⁾ | 02/28/2022 | Common Shares | 3,721 | \$ 13.53 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|------------------|-------|
| | Director | 10% Owner | Officer | Other |
| Jones Scott Alan 518 EAST BROAD STREET COLUMBUS, OH 43215 | Â | Â | Â Vice President | Â |

Signatures

/s/ Scott A. Jones by James A. Yano, attorney in fact, per POA attached

03/12/2012

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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) The options vest in three equal annual installments from date of grant.

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.