

STATE AUTOMOBILE MUTUAL INSURANCE CO
Form SC 13G/A
January 22, 2004

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

SCHEDULE 13G/A

Under the Securities Exchange Act of 1934
(Amendment No. 4)

State Auto Financial Corporation

(Name of Issuer)

Common Shares, without par value

(Title of Class of Securities)

855-707105

(CUSIP Number)

December 31, 2003

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this
Schedule is filed:

- Rule 13d-1(b)
 Rule 13d-1(c)
 Rule 13d-1(d)

Schedule 13G/A (Amendment No. 4)

CUSIP No.: 855-707105

1 NAME OF REPORTING PERSON
I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (entities only)

State Automobile Mutual Insurance Company
I.R.S. Identification No.: 31-4316080

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a)

The reporting person disclaims membership in any group. (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

Ohio

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- 5 SOLE VOTING POWER
26,253,151 (as of December 31, 2003)
- 6 SHARED VOTING POWER
-0- (as of December 31, 2003)
- 7 SOLE DISPOSITIVE POWER
26,253,151 (as of December 31, 2003)
- 8 SHARED DISPOSITIVE POWER
-0- (as of December 31, 2003)
- 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON
26,253,151 (as of December 31, 2003)
- 10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES []
- 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)
66.36% (as of December 31, 2003)
- 12 TYPE OF REPORTING PERSON
IC

Items 1 Through 10
of
Schedule 13G/A (Amendment No. 4)
for
State Automobile Mutual Insurance Company

Item 1.

- (a) Name of Issuer: State Auto Financial Corporation
(b) Address of Issuer's Principal Executive Offices:
518 East Broad Street, Columbus, Ohio 43216

Item 2.

- (a) Name of Person Filing: State Automobile Mutual Insurance Company
(b) Address of Principal Business Office:
518 East Broad Street, Columbus, Ohio 43216
(c) Place of Organization: Ohio
(d) Title of Class of Securities: Common Shares, without par value
(e) CUSIP Number: 855-707105

Item 3. Not Applicable.

Item 4. The information contained in rows 5 through 9, inclusive, and row 11 of the cover page are incorporated herein by reference.

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- Item 5. Not Applicable.
- Item 6. Not Applicable.
- Item 7. Not Applicable.
- Item 8. Not Applicable.
- Item 9. Not Applicable.
- Item 10. Not Applicable.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and accurate.

STATE AUTOMOBILE MUTUAL
INSURANCE COMPANY

January 22, 2004

By /s/ John R. Lowther

John R. Lowther, Senior Vice President,
Secretary, and General Counsel