## Edgar Filing: FARAH ROGER N - Form 4

FARAH ROC	GER N											
Form 4												
April 26, 201	0											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL			
<b>CONVIA</b> UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287				
Check this										January 31,		
subject to <b>STATEMENT OF CHAN</b>				GES IN BENEFICIAL OWNERSHIP				NERSHIP OF	Expires: Estimated a	2005		
Section 16	<b>.</b>	5				SECURITIES				burden hours per		
Form 4 or									response	•		
Form 5 obligation	_ ^						•	e Act of 1934,				
may contin				•	•			f 1935 or Section	n			
<i>See</i> Instruct 1(b).		30(h)	of the In	vestment (	Company	' Act	of 194	40				
(Print or Type R	esponses)											
FARAH ROGER N Symbol			er Name <b>and</b> Ticker or Trading RESSIVE CORP/OH/ [PGR]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
PROGR												
(Last) (First) (Middle) 3. Date of 1				f Earliest Transaction				× • • • •				
6300 WILSON MILLS ROAD (Month/Da 04/23/20				Day/Year) 2010				X_ Director 10% Owner				
								Officer (give title Other (specify below)				
			Amendment, Date Original (Month/Day/Year)				6. Individual or Joint/Group Filing(Check					
							Applicable Line)					
MAYFIELD	VILLAGE, O	OH 44143						_X_ Form filed by C Form filed by M Person	1 0			
(City)	(State)	(Zip)										
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	any		med on Date, if Day/Year)	3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common	04/23/2010			D	10,166	D	\$ 0 (1)	7,500	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)

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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)		Derivative Expiration Date ecurities (Month/Day/Year) acquired (A) r Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deri Secu (Inst
				Code V	(A) (	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Unit / (Rest. Stock)	\$ 0 <u>(2)</u>	04/23/2010		A	10,166		(3)	(3)	Common	10,166	0

## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
FARAH ROGER N 6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143	Х			
Signatures				
David M. Coffey, by Power of Attorney		04/26/2010		
**Signature of Reporting Person		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).

The reporting person elected to defer receipt of previously granted restricted Common Shares upon vesting thereof. This Form 4 reports (1) the disposition of such restricted shares in exchange for an equal number of phantom stock units under the applicable deferred

- compensation plan.
- (2) 1 for 1.

(3) These units will be paid out in an equal number of Common Shares at the time elected by the reporting person, subject to the vesting provisions of the plan.

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.