## Edgar Filing: PROGRESSIVE CORP/OH/ - Form 4

PROGRESSIVE CORP/OH/ Form 4 March 18, 2005							
FORM 4 UNITED STAT					PPROVAL		
UNITEDSIA	TES SECURITIES A Washington		GE COMMISSION	OMB Number:	3235-0287		
Check this box if no longer				Expires:	January 31, 2005		
subject to Section 16. SECURITIES					Estimated average burden hours per		
Form 4 or Form 5 Filed pursuant		о :/: Б	1 4 6 1024	response	0.5		
obligations may continue. Section 17(a) of	to Section 16(a) of the the Public Utility Hol (h) of the Investment	ding Company A	Act of 1935 or Sectio	n			
(Print or Type Responses)							
1. Name and Address of Reporting Person DAVIS CHARLES A	<ul> <li>2. Issuer Name and Symbol</li> <li>PROGRESSIVE</li> </ul>	I Ticker or Trading	Issuer	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)			(Chec	k all applicable	e)		
6300 WILSON MILLS ROAD	3. Date of Earliest 1 (Month/Day/Year) 03/16/2005	ransaction	X Director Officer (give below)	title0th below) Director	o Owner er (specify		
(Street)	4. If Amendment, D	ate Original	6. Individual or Jo	6. Individual or Joint/Group Filing(Check			
MAYFIELD VILLAGE, OH 4414	Filed(Month/Day/Yea	r)	Applicable Line) _X_ Form filed by 0 Form filed by N Person				
(City) (State) (Zip)	Table I - Non-I	Derivative Securiti	ies Acquired, Disposed of	f, or Beneficial	lly Owned		
(Instr. 3) any	cution Date, if Transact Code onth/Day/Year) (Instr. 8)	(A) or	<ul> <li>Securities</li> <li>Beneficially</li> <li>Owned</li> <li>Following</li> <li>Reported</li> <li>Transaction(s)</li> <li>(Instr. 3 and 4)</li> </ul>	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common 03/16/2005	Code V D	1 112 D	S O	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. Number on f Derivative 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 of Underlying Securities (Instr. 3 and 4)		8. Pric Deriva Securi (Instr.
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Unit (Rest. Stock)	\$ 0 <u>(2)</u>	03/16/2005		A	1,113	<u>(3)</u>	<u>(3)</u>	Common	1,113	\$ 0

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
DAVIS CHARLES A 6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143	Х		Director		
Signatures					
David M. Coffey, by Power of Attorney		03/18/2005			
**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 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.