#### CINCINNATI FINANCIAL CORP

Form 4

February 20, 2014

# FORM 4

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005 Estimated average

0.5

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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

burden hours per response...

See Instruction 1(b).

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address of Reporting Person * SCHERER J F | 2. Issuer Name <b>and</b> Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer   |  |  |
|---|--|--|--|--|
|   | CINCINNATI FINANCIAL CORP<br>[CINF]                | (Check all applicable)   |  |  |
| (Last) (First) (Middle)                               | 3. Date of Earliest Transaction                    | Director 10% Owner X Officer (give title Other (specify  |  |  |
| 6200 SOUTH GILMORE RD                                 | (Month/Day/Year)<br>02/18/2014                     | below)  EVP & Chief Ins. Off Sub  6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person  _ Form filed by More than One Reporting Person |  |  |
| (Street)  | 4. If Amendment, Date Original                     |  |  |  |
| FAIRFIELD, OH 45014-5141                              | Filed(Month/Day/Year)                              |  |  |  |

|                                      |   |            |   |              |          |  | i cison  |   |                         |  |
|--------------------------------------|---|------------|---|--------------|----------|--|--|---|-------------------------|--|
| (City)                               | (State)   | Zip) Table | Table I - Non-Derivative Securities Acq   |              |          |  | uired, Disposed of, or Beneficially Owned                            |   |                         |  |
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year) |            | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price |              | d of (D) | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                         |  |
| Common<br>Stock                      | 02/18/2014  |            | Code V M  | Amount 1,031 | (D)      | \$ 0   | 59,406   | I   | By Trust                |  |
| Common<br>Stock                      | 02/18/2014  |            | F   | 353          | D        | \$<br>47.07  | 59,053   | I   | By Trust                |  |
| Common<br>Stock                      |   |            |   |              |          |  | 0  | D   |                         |  |
| Common<br>Stock                      |   |            |   |              |          |  | 2,681 <u>(1)</u>   | I   | By 401(k)<br>Plan       |  |
| Common<br>Stock                      |   |            |   |              |          |  | 50,413   | I   | By<br>Spouse's<br>Trust |  |

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exer<br>Expiration D<br>(Month/Day/ | ate                | 7. Title and A Underlying S (Instr. 3 and | Securities                             | 8. Pr<br>Deriv<br>Secu<br>(Inst |
|---|---|---|---|--|---|---|--------------------|---|--|---------------------------------|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable                         | Expiration<br>Date | Title                                     | Amount<br>or<br>Number<br>of<br>Shares |                                 |
| Restricted<br>Stock<br>Units                        | \$ 0  | 02/18/2014                              |   | M                                      | 1,031   | <u>(2)</u>                                  | (2)                | Common<br>Stock                           | 1,031                                  | \$                              |

### **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |            |       |  |  |  |  |
|--------------------------------|---------------|-----------|------------|-------|--|--|--|--|
|                                | Director      | 10% Owner | Officer    | Other |  |  |  |  |
| SCHERER J F                    |               |           | EVP &      |       |  |  |  |  |
| 6200 SOUTH GILMORE RD          |               |           | Chief Ins. |       |  |  |  |  |
| FAIRFIELD, OH 45014-5141       |               |           | Off Sub    |       |  |  |  |  |

# **Signatures**

Jacob F Scherer 02/19/2014

\*\*Signature of 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).
- (1) The reported stock was acquired under the company's 401(k) plan. The reporting person may transfer the value of his shares into an alternative investment selection within the plan.
- (2) The restricted stock units vested February 18, 2014, as set forth in the grant agreement, if service requirements are met.

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.

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