#### CINCINNATI FINANCIAL CORP

Form 4

Stock

Stock

Common

November 19, 2013

November 19,	2013											
<b>FORM</b>	4									PPROVAL		
Washington, D.C. 20549							OMB Number:	3235-0287				
Check this if no longe		9						Expires:	January 31, 2005			
subject to Section 16.  STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES  Estima burden								Estimated burden hou response	average ırs per			
(Print or Type Re	esponses)											
1. Name and Address of Reporting Person * SCHERER J F			2. Issuer Name and Ticker or Trading Symbol CINCINNATI FINANCIAL CORP [CINF]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction			Director 10% Owner						
			(Month/Da)	•				X Officer (give title Other (specify below)  EVP & Chief Ins. Off Sub				
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
								Person				
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executi any	emed ion Date, if /Day/Year)	3. Transactic Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	(A) of (D	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	11/15/2013			A	10	A	\$0	58,525	I	By Trust		
Common								2,659 (1)	I	By 401(k)		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form

I

50,413

Plan

By

Trust

Spouse's

#### Edgar Filing: CINCINNATI FINANCIAL CORP - Form 4

# 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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. orNumber	6. Date Exerc Expiration D		7. Titl		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e		Under	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

## **Reporting Owners**

Reporting Owner Name / Address			_	
	Director	10% Owner	Officer	Othe

SCHERER J F EVP & 6200 SOUTH GILMORE RD Chief Ins. FAIRFIELD, OH 45014-5141 Off. - Sub

## **Signatures**

Jacob F Scherer 11/15/2013

\*\*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).
- (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.

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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