#### CINCINNATI FINANCIAL CORP

Form 4

March 05, 2014

## FORM 4

if no longer

subject to

Section 16.

Form 4 or

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

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading JOHNSTON STEVEN J Issuer Symbol CINCINNATI FINANCIAL CORP (Check all applicable) [CINF] (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_ Director 10% Owner X\_ Officer (give title \_ Other (specify (Month/Day/Year) below) 6200 SOUTH GILMORE RD 03/03/2014 President & CEO (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

FAIRFIELD, OH 45014-5141

(Ctata)

Filed(Month/Day/Year)	Applicable Line)					
	_X_ Form filed by One Reporting Person					
	Form filed by More than One Reporting					
	Person					
Table I - Non-Derivative Sec	curities Acquired Disposed of or Repeficially Owned					

(City)	(State) (2	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	ly Owned	
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securi		r	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)	, ,	any	Code	Disposed of (D)		Beneficially	(D) or	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
					(A)		Reported Transaction(s)			
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	03/03/2014		M	4,995	A	\$0	33,596	D		
Common Stock	03/03/2014		M	3,059	A	\$0	36,655	D		

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

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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. Transactic Code (Instr. 8)	5. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	f Derivative Expiration Date ecurities (Month/Day/Year) acquired A) or 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	
Restricted Stock Units	\$ 0	03/03/2014		M	4,995	<u>(1)</u>	<u>(1)</u>	Common Stock	4,995	9
Restricted Stock Units	\$ 0	03/03/2014		M	3,059	<u>(1)</u>	<u>(1)</u>	Common Stock	3,059	9
Phantom Stock Shares	\$ 0					(2)	(2)	Common Stock	66,220	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JOHNSTON STEVEN J 6200 SOUTH GILMORE RD FAIRFIELD, OH 45014-5141	X		President & CEO				

### **Signatures**

Steven J
Johnston

\*\*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 restricted stock units became payable on March 3, 2014. The performance goals were met at the maximum level.
- The reported phantom stock shares were acquired under the company's Top Hat Savings Plan, an "Excess Benefits Plan" within the meaning of Rule 16b-3(b)(2), and are to be settled upon the reporting person's retirement or other termination of service. The reporting person may transfer the value of his phantom stock 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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