CINCINNATI FINANCIAL CORP

Form 4 July 26, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

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obligations

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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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * SCHIFF JOHN J JR | | | 2. Issuer Name and Ticker or Trading Symbol CINCINNATI FINANCIAL CORP [CINF] | | | | | _ | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | |
|--|-----------------------------------|---------------|--|--|-------|-------------|------------------|-----------------|--|--|--|
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/15/2016 | | | | | | X Director 10% Owner Officer (give title below) Other (specify below) | | |
| | | | | 4. If Amendment, Date Original Filed(Month/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) | Tab | le I - No | on-D | erivative S | Securi | ties Ac | quired, Disposed | of, or Benefici | ally Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction E (Month/Day/Ye | ar) Execution | | 3. | actic | | ies Ac sposed | equired I of | 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 |
| Common Stock | 07/15/2016 | | | G | V | 39,452 | D | \$0 | 649,461 | Ĭ | Charitable Lead Annuity Trust |
| Common Stock | | | | | | | | | 3,248,469 | D | |
| Common Stock | | | | | | | | | 2,192 | I | By 401(k) |
| Common Stock | | | | | | | | | 124,249 | I | By Schiff Agency |

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| Common Stock | 107,186 | I | By Schiff Agency Pension Plan |
|-----------------|---------|---|-------------------------------|
| Common Stock | 0 | I | By Schiff Trust |
| Common Stock | 563,633 | I | By Spouse |

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.

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 Derivative Security | 2. Conversion or Exercise Price of | 3. Transaction Date (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | 5. orNumber of Derivative | 6. Date Exerc Expiration D (Month/Day/ | ate | 7. Titl Amou Under Securi | nt of lying | 8. Price of Derivative Security | 9. Nu Deriv Secur |
|---------------------------------|------------------------------------|--------------------------------------|-------------------|--------------------------------|---------------------------|--|------------|------------------------------------|----------------|---------------------------------|-------------------------|
| (Instr. 3) | Derivative | | (Mondifibay/Tear) | (111501.0) | Securities | | | | 3 and 4) | (Instr. 5) | Bene |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | | | | Amount | | |
| | | | | | | Date | Expiration | m: .1 | or | | |
| | | | | | | Exercisable | Date | Title | Number | | |
| | | | | | | | | | of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| | Relationships | | | | | | |
|--------------------------------|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| | | | | | | | |

SCHIFF JOHN J JR X 6200 SOUTH GILMORE RD FAIRFIELD, OH 45014-5141

Signatures

/s/ John J. 07/26/2016 Schiff, Jr.

**Signature of Date Reporting Person

Reporting Owners 2

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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).

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.