FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Hollenbeck Martin F</u>						2. Issuer Name and Ticker or Trading Symbol CINCINNATI FINANCIAL CORP [CINF]										ck all applic Directo	cable) or	g Pers	10% Ow	ner
(Last) (First) (Middle) 6200 SOUTH GILMORE RD						3. Date of Earliest Transaction (Month/Day/Year) 11/05/2013										below)	er (give title v) P,Chief Investr		Other (s below) nent Office	
(Street) FAIRFIELD OH 45014-5141					4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(Si	tate)												Person						
		Tab	le I - Noi	n-Deriv	/ative	e Se	ecurit	ies A	cqu	ired,	Dis	posed o	f, or Be	nefi	icially	Owned	l .			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)							2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (II 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securiti Benefici Owned I		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									ĺ	Code	v	Amount	(A) o (D)	r P	rice	Transact (Instr. 3	tion(s)			Instr. 4)
Common Stock 11/05/2						3				M		8,480	A	\$	26.58	28,997		D		
Common Stock 11/05					5/2013	2013				F		1,219	D	\$	49.74	27,778			D	
Common Stock																1,3	1,315(1)			By 401(k)
Common Stock																	26			By Children
		٦	Гable II -						-	-	-	osed of, onvertil			-	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr 8)		of Deri Sec Acq (A) (Disp of (I	oosed D) tr. 3, 4	Exp	Date Exe piration I ponth/Day	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisable		Expiration Date	Title	or Nur of	mber ares					
Employee Stock Option (Right to Buy)	\$26.58	11/05/2013			M			8,480	02/	19/2011 ⁽	2) (02/19/2020	Common Stock	8,4	480	\$0	0		D	
Phantom Stock	\$0									(3)		(3)	Common	4,	218		4,218		D	

Explanation of Responses:

- 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 option vests in three annual installments beginning on the first anniversary of the date of grant.
- 3. 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.

Martin F Hollenbeck

11/06/2013

** Signature of Reporting Person

Date

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

- * 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.

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 Number.