Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

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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>TIMMEL TIMOTHY L</u>						2. Issuer Name and Ticker or Trading Symbol CINCINNATI FINANCIAL CORP [CINF]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(Last) 6200 SO	(F UTH GILM	irst) (Middle)				Date 0 /28/2		iest Tran	saction (M	onth/	Day/Year)	7	below)	Officer (give title Other (specific below) Sr. Vice President-Subsidiary					
(Street) FAIRFIELD OH 45014-5141			4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	state)	(Zip)									Person							
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transa Date (Month/D				saction	ear)	2A. De Execu if any	A. Deemed kecution Date,		3. 4. Securit Transaction Code (Instr.		of, or Beneficially ties Acquired (A) or I Of (D) (Instr. 3, 4 and 5)		5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A) or (D)	Price	Transact	ansaction(s) nstr. 3 and 4)			(11311. 4)	
Common Stock			10/28/2013		.3			M		16,538	3 A	\$38.8	99,	,211	1 I		By Trust		
Common Stock		10/28/2013		.3			F		14,026	14,026 D		85,185		5 I		By Trust			
Common	Stock														0	D			
Common	Stock													3,3	28(1)		I 4	By 401(k) Plan	
Common Stock												3	83		I I	By IRA			
Common Stock												39,	.948		I S	By Spouse's Trust			
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr		5. Number of		6. Date E: Expiratio (Month/D	kercis n Date	able and	ble and 7. Title and An of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$38.8	10/28/2013			М			16,538	01/19/200	₁₅ (2)	01/19/2014	Common Stock	16,538	\$0	0		D		
Phantom Stock	\$0								(3)		(3)	Common	9,569		9,569	,	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 equal 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.

Timothy L Timmel

10/29/2013

** 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.