

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person* <u>SCHIFF JOHN J JR</u> (Last) (First) (Middle) <u>6200 SOUTH GILMORE RD</u> (Street) <u>FAIRFIELD OH 45014-5141</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>CINCINNATI FINANCIAL CORP [CINF]</u> 3. Date of Earliest Transaction (Month/Day/Year) <u>10/15/2004</u> 4. If Amendment, Date of Original Filed (Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <u>PRESIDENT & CEO</u> 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person
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Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock								3,876,113	D	
Common Stock								536,794	I	SPOUSE
Common Stock								108,809	I	CORPORATION
Common Stock								47,203	I	SCHIFF TRUST
Common Stock								102,082	I	CO. PENSION PLAN
Common Stock	10/15/2004	10/15/2004	G	V	56,304	D	\$0	3,591,084	I	CHARITABLE LEAD ANNUITY TRUST
Common Stock 401K								1,350	D	

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock	\$0						08/08/1988	08/08/1988	Common Stock	9,120		9,120	D	
Stock Option	\$28.3						01/25/2001	01/25/2010	Common Stock	52,500		52,500	D	
Stock Option	\$32.14						01/27/2000	01/27/2009	Common Stock	110,250		110,250	D	
Stock Option	\$32.26						08/24/1999	08/24/2008	Common Stock	10,500		10,500	D	
Stock Option	\$34.08						02/01/2004	02/01/2013	Common Stock	52,500		52,500	D	
Stock Option	\$34.46						01/31/2002	01/31/2011	Common Stock	52,500		52,500	D	
Stock Option	\$36.71						01/28/2003	01/28/2012	Common Stock	52,500		52,500	D	
Stock Option	\$43.2						01/05/1999	01/05/2008	Common Stock	110,250		110,250	D	
Employee Stock Option (right to buy)	\$40.75						01/19/2005	01/19/2014	Common Stock	52,500		52,500	D	

Explanation of Responses:

JOHN J SCHIFF, JR.

10/15/2004

** 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.