## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, I	D.C.	20549
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CTATEMENIT	OF CHANCE	S IN BENEFICIA	OWNEDSHID
STATEMENT	OF CHANGE	S IN BENEFICIA	L OWNERSHIP

OMB APPROVAL OMB Number: 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).

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

Name and Address of Reporting Person*     Hoffer Theresa A					2. Issuer Name and Ticker or Trading Symbol  CINCINNATI FINANCIAL CORP [ CINF ]									Check all a	ll applicable) Director		Person(s) to Issuer  10% Owner		
(Last) 6200 SO	st) (First) (Middle) 00 SOUTH GILMORE ROAD				3. Date of Earliest Transaction (Month/Day/Year) 11/10/2017									^ be	fficer (give title elow) Sr Vice Preside		Other (specify below)  nt - Subsidiary		
(Street) FAIRFIE (City)			15014 Zip)		4. If	4. If Amendment, Date of 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				
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally Ow	ned			
Date					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A d Of (D) (Instr. 3,			nd Sec Ben Owi	mount of urities eficially led Following orted	Forn (D) c	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(1	A) or D)	Price	Trai	saction(s) r. 3 and 4)			(	
Common Stock				11/10	/10/2017				A 10		10	A		\$	0	27,659		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)  3. Deemed Execution Date, if any (Month/Day/Year)			of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount	8. Price of Derivativ Security (Instr. 5)		, [	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

**Explanation of Responses:** 

/s/ Theresa A. Hoffer

11/13/2017

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.