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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	ide. See		Filed							ies Exchang npany Act o		1934		nours	s per re	esponse:	0.5
1. Name and Address of Reporting Person* <u>Spray Stephen M</u>					2. Issuer Name and Ticker or Trading Symbol CINCINNATI FINANCIAL CORP [CINF								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				wner	
(Last) (First) (Middle) 6200 SOUTH GILMORE RD					3. Date of Earliest Transaction (Month/Day/Year) 11/17/2023									X Officer (give title Other (special below) President				
(Street) FAIRFIELD OH 45014					4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Forr Forr	al or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	juired,	Dis	posed of	, or Be	enefic	ally Owr	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date		Date,	Transaction Disposed Code (Instr. 5)		Disposed (ties Acquired (A I Of (D) (Instr. 3,		and Secur Benef Owne	icially d Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	Price		action(s) 3 and 4)			(Instr. 4)
Common	Common Stock 11/17/					2023			A		10	A	\$0.	00 4	48,099		D	
		Tal									osed of, convertib				ed .			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		n Date,	4. Transaction Code (Instr. 8) Solution Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative crities critied r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Date		Expiration		Number of							

Explanation of Responses:

Remarks:

/s/ Stephen M Spray

11/20/2023

** Signature of Reporting Person

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.