FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Vashington,	DC	20549
vasilliquui,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1 Name a	nd Address of	Reporting Person*			_	uer Name <b>and</b> Ti				01 1940		5. Rela	ationship	of Reportir	ng Person(s	) to Iss	suer
1. Name and Address of Reporting Person*  KELLINGTON JOHN S						CINCINNATI FINANCIAL CORP [ CINF ]							k all applicable) Director		1	′ 0% Ov	vner
(Last) 6200 SO	.ast) (First) (Middle) 200 SOUTH GILMORE RD					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024						X Officer (give title below) Other (sp. below)  EVP, Chief Info OffSub					specify
						4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) FAIRFIE	ELD O	Н	45014		-							X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)		Rul	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 in satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											intende	ed to					
		Tab	le I - No	n-Deri	ative S	Securities A	cquire	d, Dis	sposed o	of, or Be	enefic	ially	Owne	t			
· · · · · · · · ·   D			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	Code	Transaction Dispos Code (Instr.		ecurities Acquired (A) coosed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect rect )	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								v	Amount	(A) or (D)	Price	)	Transaction(s) (Instr. 3 and 4)				(iiiəu. 4)
Common Stock 03/01/				/2024		М		445	A	\$0	.00	82,2	17.877	D			
Common Stock			03/01	/2024		M		465 A \$		\$0	.00	82,682.877		D			
Common Stock			03/01	/2024		M		555	A	\$0	.00	83,237.877		D	$\perp$		
Common Stock 03/01					-		F	_	132	D	+	8113.36 83,105.877			D	_	
Common Stock 03/01/2							F	_	131	D	\$11			74.877	D	_	
Common Stock 03/01/2024 F 166 D								\$11			08.877	D					
		Т	able II			ecurities Acc alls, warrant							Owned				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, Transcurity or Exercise (Month/Day/Year) if any Cod		Transact Code (In:		6. Date Exercisable and Expiration Date (Month/Day/Year)		е	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (In	8. Price of Derivative Security (Instr. 5)  (Instr. 5)		Own Forn Dire- or In (I) (I	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

\$0.00

\$0.00

\$0.00

1. The restricted stock units vested March 1, 2024, as set forth in the grant agreement providing for ratable vesting over a three year service period ending March 1, 2026.

of (D) (Instr. 3, 4

and 5)

(A) (D)

465

445

555

- 2. The restricted stock units vested March 1, 2024, as set forth in the grant agreement providing for ratable vesting over a three year service period ending March 1, 2025.
- 3. The restricted stock units vested March 1, 2024, as set forth in the grant agreement providing for ratable vesting over a three year service period ending March 1, 2024.

## Remarks:

Restricted

Restricted

Restricted

Stock

Stock

Stock Units

/s/ John S Kellington

03/04/2024

\*\* Signature of Reporting Person

Amount or Number

of Shares

465

445

555

\$0.00

\$0.00

\$0.00

Expiration Date

(1)

(2)

(3)

Title

Common

Stock

Common

Stock

Commor

Stock

Date Exercisable

(1)

(2)

(3)

Date

(Instr. 4)

930

444

0.00

D

D

D

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

03/01/2024

03/01/2024

03/01/2024

Code

M

M

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).