CINCINNATI FINANCIAL CORP

Form 4

February 17, 2015

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB

Number:

3235-0287 January 31,

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

2005 Estimated average burden hours per

Expires:

Form 5 obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

response... 0.5

may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Mullen Martin J

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

CINCINNATI FINANCIAL CORP

(Check all applicable)

[CINF]

(Last) (First) 3. Date of Earliest Transaction

Director 10% Owner _X__ Officer (give title

Sr.VP, Chief Claims Officer-Sub

(Month/Day/Year)

02/13/2015

Other (specify

6200 SOUTH GILMORE RD

(Zip)

(Middle)

4. If Amendment, Date Original

(Instr. 8)

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

below)

FAIRFIELD, OH 45014-5141

(Street)

(State)

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) 5. Amount of 6. Ownership 7. Nature of Securities Beneficially (D) or Owned Following Reported

Form: Direct Indirect Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

Transaction(s) (Instr. 3 and 4)

Price

Code V Amount (D)

(Instr. 3, 4 and 5)

31,879 D

Common Stock

(City)

(Instr. 3)

Common Stock

144 I By Spouse

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

(Month/Day/Year)

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 control number.

SEC 1474 (9-02)

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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. Transactio Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option (Right to Buy)	\$ 52.25	02/13/2015		A	4,782	02/13/2016(1)	02/13/2025	Common Stock	4,782
Restricted Stock Units	\$ 0	02/13/2015		A	9,564	<u>(2)</u>	(2)	Common Stock	9,564
Restricted Stock Units	\$ 0	02/13/2015		A	491	(3)	<u>(3)</u>	Common Stock	491

Reporting Owners

Reporting Owner Name / Address	Keiationsinps			
	Director	10% Owner	Officer	Other

Director 10% Owner Officer

Mullen Martin J 6200 SOUTH GILMORE RD FAIRFIELD, OH 45014-5141

Sr. VP, Chief Claims Officer-Sub

Signatures

/s/ Martin J
Mullen

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The option vests in three annual installments beginning on the first anniversary of the date of grant.
- (2) The restricted stock units vest March 1, 2018, as set forth in the grant agreement, if performance goals are met. The number of restricted stock units shown is the maximum number of such units that may vest.

Reporting Owners 2

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(3) The restricted stock units vest in three annual installments on March 1, as set forth in the grant agreement, if service requirements are met. Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, <i>see</i> Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.