#### CINCINNATI FINANCIAL CORP

Form 4 May 04, 2011

### FORM 4

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

OMB Number: 3235-0287

**OMB APPROVAL** 

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average burden hours per

Form 5 obligations may continue.

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 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

2,364

50,413

45,918

I

I

Ι

See Instruction 1(b).

SCHERER J F

Common

Common

Common

Stock

Stock

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \*

		CINCIN [CINF]	NATI FI	NANCIAL CORP	(Check all applicable)				
(Last)	(First) (M		3. Date of Earliest Transaction			10%	6 Owner		
6200 SOUTH OH MODE DD		`	(Month/Day/Year)			below)	er (specify		
6200 SOUTH GILMORE RD		03/02/20	05/02/2011			Exec Vice President-Subsidiary			
	(Street) 4. ]			te Original	6. Individual or Joint/Group Filing(Check				
		Filed(Mon	th/Day/Year)	)	Applicable Line) _X_ Form filed by One Reporting Person				
EVIBEIEI L	O, OH 45014-5141					More than One R			
TAINTILL	), OII <del>1</del> 301 <del>1-</del> 3141				Person				
(City)	(State)	Zip) Table	e I - Non-D	erivative Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if		onAcquired (A) or	Securities	Form: Direct	Indirect		
(Instr. 3)	· · · · · · · · · · · · · · · · · · ·		Code	Disposed of (D)	Beneficially Owned	(D) or	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
				(A)	Reported	,	,		
				or	Transaction(s)				
			Code V	Amount (D) Price	(Instr. 3 and 4)				
Common					10	D			
Stock					10	D			

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

By 401(k)

Spouse's

By Trust

Plan

By

Trust

#### Edgar Filing: CINCINNATI FINANCIAL CORP - Form 4

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)

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. Transactic Code (Instr. 8)		6. Date Exercisab Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securitie
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shares
Employee Stock Option (Right to Buy)	\$ 31.62	05/02/2011		A	664	05/02/2012(1)	05/02/2021(1)	Common Stock	664
Restricted Stock Units	\$ 0	05/02/2011		A	415	(2)	(2)	Common Stock	415

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SCHERER J F

6200 SOUTH GILMORE RD Exec Vice President-Subsidiary

FAIRFIELD, OH 45014-5141

## **Signatures**

Jacob F Scherer 05/03/2011

\*\*Signature of 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.

Reporting Owners 2

#### Edgar Filing: CINCINNATI FINANCIAL CORP - Form 4

(2) The restricted stock units vest March 1, 2014 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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* 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.