CINCINNATI FINANCIAL CORP

Form 4

February 01, 2008

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

OMB APPROVAL

3235-0287

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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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading SCHIFF THOMAS R Issuer Symbol CINCINNATI FINANCIAL CORP (Check all applicable) [CINF] (Last) (First) (Middle) 3. Date of Earliest Transaction _X__ Director 10% Owner _ Other (specify Officer (give title (Month/Day/Year) below) 6200 SOUTH GILMORE RD 01/30/2008 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting FAIRFIELD, OH 45014-5141 Person

(City)	(State)	(Zip) Tabl	e I - No	n-D	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code		4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	01/18/2008	01/18/2008	G	V	1,220	D	\$0	2,066,498	D	
Common Stock	01/30/2008	01/30/2008	A		1,535 (1)	A	\$0	2,068,033	D	
Common Stock	01/15/2008	01/15/2008	G	V	59,342	D	\$0	3,092,693 (2)	I	By Charitable Lead Annuity Trust
Common Stock								114,249 (3)	I	By Schiff Agency

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By Schiff Common Agency 107,186 (3) Ι Stock Pension Plan

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

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title and	8. Price of	9. Nu
Derivative		Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Number Expiration Date		Amount of	Derivative	Deriv
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlying	Security	Secui
(Instr. 3)		Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	8) Derivative)		Securities	(Instr. 5)	Bene
						Securities Acquired			(Instr. 3 and 4))	Own
											Follo
						(A) or					Repo
						Disposed					Trans
						of (D)				(Instr	
						(Instr. 3,					
						4, and 5)					
									Amoun	.+	
									Amoun	ıı	
								Expiration Date	or Title Numbe		
									of	:1	
				Codo V	(A) (D)						
					Code v	(A) (D)			Shares		

Reporting Owners

Relationships

Reporting Owner Name / Address 10% Director Officer Other Owner

SCHIFF THOMAS R 6200 SOUTH GILMORE RD X FAIRFIELD, OH 45014-5141

Signatures

ThomasRSchiff 02/01/2008 **Signature of Date Reporting Person

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).
- Shares are gifted quarterly from the Charitable Lead Annuity Trust.

Reporting Owners 2

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- (3) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.
- (1) Shares acquired by grant under Non-Employee Director Stock Plan.

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.