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CINCINNA Form 4 March 03, 20	ΓΙ FINANCIA	L CORP										
									OMB AF	PROVAL		
FORM	I 4 UNITE	D STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check the				8 /					Expires:	January 31,		
Subject to Section 16. Form 4 or Form 5 obligations may continue Fort 16. Filed pursuant to Se				CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES ection 16(a) of the Securities Exchange Act of 1934, ublic Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940						Estimated average burden hours per response 0.5		
(Print or Type I	Responses)											
1. Name and A SCHERER	ddress of Reporti J F	ng Person <u>*</u>	Symbol	Name and			-	5. Relationship of Issuer (Check	Reporting Pers k all applicable			
(Last) 6200 SOUT	(First) H GILMORE	(Middle)	3. Date of (Month/D 03/01/20	-	ransaction			Director X_Officer (give below) EVP & C				
EAIDEIEI I	(Street) D, OH 45014-5	171		ndment, Da nth/Day/Year	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	One Reporting Pe	rson		
(City)	(State)	(Zip)	Tabl	a L. Nam D		C	•••••••	Person	Dan official	ha Orana d		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	Date 2A. Deer ar) Executio any	ned	3. Transactic Code (Instr. 8)	4. Securi	ties Adisposed 4 and (A) or	cquired d of (D)	uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of		
Common Stock	03/01/2016			М	277	A	\$0	73,755	Ι	By Trust		
Common Stock	03/01/2016			М	2,700	А	\$0	76,455	Ι	By Trust		
Common Stock	03/01/2016			F	964	D	\$ 63.72	75,491	Ι	By Trust		
Common Stock								2,897 <u>(1)</u>	Ι	By 401(k) Plan		
Common Stock								50,413	I	By Spouse's Trust		

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

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.

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. Transactia Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration E (Month/Day	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	\$ 0	03/01/2016		М	277	(2)	(2)	Common Stock	277	\$
Restricted Stock Units	\$ 0	03/01/2016		М	2,700	<u>(3)</u>	(3)	Common Stock	2,700	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
1.0	Director	10% Owner	Officer	Other			
SCHERER J F 6200 SOUTH GILMORE RD FAIRFIELD, OH 45014-5141			EVP & Chief Ins. Off Sub				

Signatures

/s/ Jacob F Scherer, Jr. 03/02/2016 <u>**</u>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).

(1) The reported stock was acquired under the company's 401(k) plan. The reporting person may transfer the value of his shares into an alternative investment selection within the plan.

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- (2) The restricted stock units vested March 1, 2016, as set forth in the grant agreement providing for ratable vesting over a three year service period ending March 1, 2018.
- (3) The restricted stock units became payable March 1, 2016. The performance goals were met at the threshold level.

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.