CINCINNATI FINANCIAL CORP

Form 4

October 19, 2009

FORM 4

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

OMB 3235-0287 Number:

January 31, Expires:

OMB APPROVAL

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5. Relationship of Reporting Person(s) to

Issuer

27,437

Ι

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

may continue. See Instruction

obligations

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Symbol

2. Issuer Name and Ticker or Trading

1(b).

Common

Stock

(Print or Type Responses)

FORRESTER CRAIG W

1. Name and Address of Reporting Person *

7 074.20 721. 074.20 11			CINCINNATI FINANCIAL CORP [CINF]						(Check all applicable)				
(Last) (First) (Middle) 6200 SOUTH GILMORE RD			3. Date of Earliest Transaction (Month/Day/Year) 10/15/2009						Director 10% Owner X Officer (give title Other (specify below)				
FAIRFIELI	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deen (Month/Day/Year) Execution any (Month/D		on Date, if Transact Code Day/Year) (Instr. 8)			4. Securi n(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Owned Following Reported Transaction(s) (Instr. 3 and 4) 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	10/15/2009			I		358	D	\$ 26.16	822 (1)	I	By 401(k) Plan		
Common Stock									1,233	D			
Common Stock									6,921	I	By Spouse's Trust		

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

By Trust

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SEC 1474

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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. D		4. 5. Number		6. Date Exercisable and		7. Title and Amount of		8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onof	Expiration Date		Underlying Securities		Derivati
Security	or Exercise		any	ry Code Derivative		(Month/Day/Year)		(Instr. 3 and 4)		Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities	ecurities			(Instr. 5	
	Derivative				Acquired					
	Security				(A) or					
					Disposed					
					of (D)					
					(Instr. 3, 4,					
					and 5)					
									Amount	
						_			or	
						Date	Expiration	Title	Number	
						Exercisable	Date		of	
				Code V	(A) (D)				Shares	
Phantom	\$ 0	10/15/2009		P	354	(2)	(2)	Common	354	\$ 26.1
Stock	Ψυ	10/13/2009		1	33 T	<u> </u>	<u> </u>	Stock	334	ψ 20.1

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

FORRESTER CRAIG W 6200 SOUTH GILMORE RD FAIRFIELD, OH 45014-5141

Sr. Vice

President-Subsidiary

Signatures

Craig W
Forrester

**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.
- The reported phantom stock units were acquired under the company's top hat savings plan, an "Excess Benefits Plan" within the meaning (2) of Rule 16b-3(b)(2), and are to be settled upon the reporting person's retirement or other termination of service. The reporting person may transfer the value of his phantom stock units into an alternative investment selection within the 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.

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