



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019

OF THE CONDITION AND AFFAIRS OF THE

THE CINCINNATI CASUALTY COMPANY

NAIC Group Code02440244NAIC Company Code28665Employer's ID Number31-0826946  
(Current)(Prior)

Organized under the Laws ofOHIO, State of Domicile or Port of EntryOH  
Country of DomicileUnited States of America

Incorporated/Organized12/27/1972Commenced Business03/31/1973

Statutory Home Office6200 SOUTH GILMORE ROADFAIRFIELD, OH, US 45014-5141  
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office6200 SOUTH GILMORE ROAD  
(Street and Number)  
FAIRFIELD, OH, US 45014-5141513-870-2000  
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail AddressP.O. BOX 145496CINCINNATI, OH, US 45250-5496  
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records6200 SOUTH GILMORE ROAD  
(Street and Number)  
FAIRFIELD, OH, US 45014-5141513-870-2000  
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website AddressWWW.CINFIN.COM

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OFFICERS

CHIEF EXECUTIVE OFFICER, PRESIDENTSTEVEN JUSTUS JOHNSTONSENIOR VICE PRESIDENT, TREASURERTHERESA ANN HOFFER

CHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENTMICHAEL JAMES SEWELL

OTHER

TERESA CURRIN CRACAS, SENIOR VICE PRESIDENTDONALD JOSEPH DOYLE JR, SENIOR VICE PRESIDENTSEAN MICHAEL GIVLER, SENIOR VICE PRESIDENT

MARTIN FRANCIS HOLLENBECK, SENIOR VICE PRESIDENTJOHN SCOTT KELLINGTON, SENIOR VICE PRESIDENTLISA ANNE LOVE, SENIOR VICE PRESIDENT, CORPORATE SECRETARY

MARTIN JOSEPH MULLEN, SENIOR VICE PRESIDENTSTEPHEN MICHAEL SPRAY, SENIOR VICE PRESIDENTWILLIAM HAROLD VAN DEN HEUVEL, SENIOR VICE PRESIDENT

DIRECTORS OR TRUSTEES

WILLIAM FOREST BAHLGREGORY THOMAS BIERTERESA CURRIN CRACAS

DONALD JOSEPH DOYLE JRSEAN MICHAEL GIVLERMARTIN FRANCIS HOLLENBECK

STEVEN JUSTUS JOHNSTONJOHN SCOTT KELLINGTONLISA ANNE LOVE

WILLIAM RODNEY MCMULLENMARTIN JOSEPH MULLENDAVID PAUL OSBORN

THOMAS REID SCHIFFMICHAEL JAMES SEWELLSTEPHEN MICHAEL SPRAY

KENNETH WILLIAM STECHERJOHN FREDRICK STEELE JRWILLIAM HAROLD VAN DEN HEUVEL

LARRY RUSSEL WEBB

State ofOHIOSS:

County ofBUTLER

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

STEVEN J. JOHNSTONCHIEF EXECUTIVE OFFICER, PRESIDENTMICHAEL J. SEWELLCHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENTTHERESA A. HOFFERSENIOR VICE PRESIDENT, TREASURER

Subscribed and sworn to before me this10THday ofFEBRUARY 2020a. Is this an original filing? ..... Yes [ X ] No [ ]b. If no,1. State the amendment number.....2. Date filed .....3. Number of pages attached.....

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	307,375,444		307,375,444	294,075,871
2. Stocks (Schedule D):				
2.1 Preferred stocks .....				
2.2 Common stocks .....	140,922,452		140,922,452	107,767,463
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ .....				
encumbrances) .....				
4.2 Properties held for the production of income (less				
\$ .....				
encumbrances) .....				
4.3 Properties held for sale (less \$ .....				
encumbrances) .....				
5. Cash (\$ .....	5,411,274			
, Schedule E - Part 1), cash equivalents				
(\$ .....				
, Schedule E - Part 2) and short-term				
investments (\$ .....	5,411,274		5,411,274	6,214,748
, Schedule DA) .....				
6. Contract loans (including \$ .....				
premium notes) .....				
7. Derivatives (Schedule DB) .....				
8. Other invested assets (Schedule BA) .....				
9. Receivable for securities .....				
10. Securities lending reinvested collateral assets (Schedule DL) .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	453,709,169		453,709,169	408,058,081
13. Title plants less \$ .....				
charged off (for Title insurers				
only) .....				
14. Investment income due and accrued .....	3,363,446		3,363,446	3,323,464
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....				
15.2 Deferred premiums and agents' balances and installments booked but				
deferred and not yet due (including \$ .....				
earned but unbilled premiums) .....				
15.3 Accrued retrospective premiums (\$ .....				
) and				
contracts subject to redetermination (\$ .....				
) .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	17,931,040		17,931,040	18,659,379
16.2 Funds held by or deposited with reinsured companies .....				
16.3 Other amounts receivable under reinsurance contracts .....	2,710,554		2,710,554	2,963,358
17. Amounts receivable relating to uninsured plans .....				
18.1 Current federal and foreign income tax recoverable and interest thereon .....				
18.2 Net deferred tax asset .....				
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....	1,787,142	1,787,142		
21. Furniture and equipment, including health care delivery assets				
(\$ .....				
) .....				
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....	8,497,838		8,497,838	2,519,383
24. Health care (\$ .....				
) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....				
26. Total assets excluding Separate Accounts, Segregated Accounts and				
Protected Cell Accounts (Lines 12 to 25) .....	487,999,188	1,787,142	486,212,046	435,523,666
27. From Separate Accounts, Segregated Accounts and Protected Cell				
Accounts .....				
28. Total (Lines 26 and 27)	487,999,188	1,787,142	486,212,046	435,523,666
DETAILS OF WRITE-INS				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501. Equities and Deposits in Pools and Associations .....				
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)				

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....	88,803	
3. Loss adjustment expenses (Part 2A, Line 35, Column 9) .....		
4. Commissions payable, contingent commissions and other similar charges .....		
5. Other expenses (excluding taxes, licenses and fees) .....	5,161	(926)
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....		
7.1 Current federal and foreign income taxes (including \$ .....1,087 on realized capital gains (losses)) .....	20,578	217,681
7.2 Net deferred tax liability .....	19,072,609	12,069,354
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ .....175,641,742 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....		
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	28,973,665	23,943,206
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20) .....		
14. Amounts withheld or retained by company for account of others .....	1,320,598	1,193,014
15. Remittances and items not allocated .....		
16. Provision for reinsurance (including \$ ..... certified) (Schedule F, Part 3, Column 78) .....		
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....		
20. Derivatives .....		
21. Payable for securities .....		
22. Payable for securities lending .....		
23. Liability for amounts held under uninsured plans .....		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....		991
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	49,481,415	37,423,319
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	49,481,415	37,423,319
29. Aggregate write-ins for special surplus funds .....		
30. Common capital stock .....	3,750,000	3,750,000
31. Preferred capital stock .....		
32. Aggregate write-ins for other than special surplus funds .....		
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....	18,000,000	18,000,000
35. Unassigned funds (surplus) .....	414,980,632	376,350,347
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) .....	436,730,632	398,100,347
38. TOTALS (Page 2, Line 28, Col. 3)	486,212,046	435,523,666
DETAILS OF WRITE-INS		
2501. Accounts Payable Other .....		991
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)		991
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....		
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)		
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....		
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)		

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7) .....		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) .....		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) .....		
5. Aggregate write-ins for underwriting deductions .....		
6. Total underwriting deductions (Lines 2 through 5) .....		
7. Net income of protected cells .....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7) .....		
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	14,987,428	14,071,424
10. Net realized capital gains or (losses) less capital gains tax of \$ .....1,002 (Exhibit of Capital Gains (Losses) ) .....	(3,548)	3,841,181
11. Net investment gain (loss) (Lines 9 + 10) .....	14,983,880	17,912,605
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ ..... amount charged off \$ ..... ) .....		
13. Finance and service charges not included in premiums .....		
14. Aggregate write-ins for miscellaneous income .....	243	268
15. Total other income (Lines 12 through 14) .....	243	268
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) .....	14,984,123	17,912,873
17. Dividends to policyholders .....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) .....	14,984,123	17,912,873
19. Federal and foreign income taxes incurred .....	1,810,047	1,638,437
20. Net income (Line 18 minus Line 19)(to Line 22) .....	13,174,076	16,274,436
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) .....	398,100,347	392,286,657
22. Net income (from Line 20) .....	13,174,076	16,274,436
23. Net transfers (to) from Protected Cell accounts .....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ .....7,000,413 .....	26,334,885	(9,515,650)
25. Change in net unrealized foreign exchange capital gain (loss) .....		
26. Change in net deferred income tax .....	(2,842)	(33,789)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) .....	(875,834)	(911,308)
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....		
29. Change in surplus notes .....		
30. Surplus (contributed to) withdrawn from protected cells .....		
31. Cumulative effect of changes in accounting principles .....		
32. Capital changes:		
32.1 Paid in .....		
32.2 Transferred from surplus (Stock Dividend) .....		
32.3 Transferred to surplus .....		
33. Surplus adjustments:		
33.1 Paid in .....		
33.2 Transferred to capital (Stock Dividend) .....		
33.3 Transferred from capital .....		
34. Net remittances from or (to) Home Office .....		
35. Dividends to stockholders .....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) .....		
37. Aggregate write-ins for gains and losses in surplus .....		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37) .....	38,630,285	5,813,690
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	436,730,632	398,100,347
DETAILS OF WRITE-INS		
0501. ....		
0502. ....		
0503. ....		
0598. Summary of remaining write-ins for Line 5 from overflow page .....		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above)		
1401. Miscellaneous Income .....	243	268
1402. ....		
1403. ....		
1498. Summary of remaining write-ins for Line 14 from overflow page .....		
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	243	268
3701. ....		
3702. ....		
3703. ....		
3798. Summary of remaining write-ins for Line 37 from overflow page .....		
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above)		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance .....	5,030,459	(1,262,497)
2. Net investment income .....	16,096,067	14,979,099
3. Miscellaneous income .....	243	268
4. Total (Lines 1 through 3) .....	21,126,768	13,716,870
5. Benefit and loss related payments .....	(1,069,947)	625,979
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		
7. Commissions, expenses paid and aggregate write-ins for deductions .....		
8. Dividends paid to policyholders .....		
9. Federal and foreign income taxes paid (recovered) net of \$ .....317,617 tax on capital gains (losses) .....	2,008,151	2,825,895
10. Total (Lines 5 through 9) .....	938,204	3,451,873
11. Net cash from operations (Line 4 minus Line 10) .....	20,188,564	10,264,996
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	30,048,000	10,745,000
12.2 Stocks .....	350,660	8,328,780
12.3 Mortgage loans .....		
12.4 Real estate .....		
12.5 Other invested assets .....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....		
12.7 Miscellaneous proceeds .....		
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	30,398,660	19,073,780
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	44,663,003	21,195,055
13.2 Stocks .....		5,388,431
13.3 Mortgage loans .....		
13.4 Real estate .....		
13.5 Other invested assets .....		97
13.6 Miscellaneous applications .....		
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	44,663,003	26,583,583
14. Net increase (decrease) in contract loans and premium notes .....		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(14,264,343)	(7,509,803)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....		
16.2 Capital and paid in surplus, less treasury stock .....		
16.3 Borrowed funds .....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....		
16.5 Dividends to stockholders .....		
16.6 Other cash provided (applied) .....	(6,727,695)	1,490,116
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(6,727,695)	1,490,116
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(803,474)	4,245,309
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	6,214,748	1,969,438
19.2 End of period (Line 18 plus Line 19.1) .....	5,411,274	6,214,748

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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Underwriting and Investment Exhibit - Part 1 - Premiums Earned

**N O N E**

Underwriting and Investment Exhibit - Part 1A - Recapitulation of all Premiums

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN						
Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6
	Direct Business (a)	2	3	4	5	Net Premiums Written Cols. 1+2+3-4-5
		From Affiliates	From Non-Affiliates	To Affiliates	To Non-Affiliates	
1. Fire .....	4,502,567			4,502,567		
2. Allied lines .....	4,962,344			4,962,344		
3. Farmowners multiple peril .....						
4. Homeowners multiple peril .....	4,976,231			4,976,231		
5. Commercial multiple peril .....	136,772,256			136,772,256		
6. Mortgage guaranty .....						
8. Ocean marine .....						
9. Inland marine .....	2,484,459			2,484,459		
10. Financial guaranty .....						
11.1 Medical professional liability - occurrence .....	2,951,519			2,951,519		
11.2 Medical professional liability - claims-made .....	337,046			337,046		
12. Earthquake .....	270,016			270,016		
13. Group accident and health .....						
14. Credit accident and health (group and individual) .....						
15. Other accident and health .....						
16. Workers' compensation .....	109,887,786		116	109,887,902		
17.1 Other liability - occurrence .....	38,860,212			38,860,212		
17.2 Other liability - claims-made .....	1,966,167			1,966,167		
17.3 Excess workers' compensation .....						
18.1 Products liability - occurrence .....	10,232,632			10,232,632		
18.2 Products liability - claims-made .....						
19.1, 19.2 Private passenger auto liability .....	1,953,770			1,953,770		
19.3, 19.4 Commercial auto liability .....	39,146,972			39,146,972		
21. Auto physical damage .....	18,033,462			18,033,462		
22. Aircraft (all perils) .....						
23. Fidelity .....						
24. Surety .....	919,179			919,179		
26. Burglary and theft .....	245,811			245,811		
27. Boiler and machinery .....	711,186			711,186		
28. Credit .....						
29. International .....						
30. Warranty .....						
31. Reinsurance - nonproportional assumed property .....	XXX					
32. Reinsurance - nonproportional assumed liability .....	XXX					
33. Reinsurance - nonproportional assumed financial lines .....	XXX					
34. Aggregate write-ins for other lines of business .....						
35. TOTALS	379,213,614		116	379,213,730		
DETAILS OF WRITE-INS						
3401. ....						
3402. ....						
3403. ....						
3498. Summary of remaining write-ins for Line 34 from overflow page .....						
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)						

(a) Does the company's direct premiums written include premiums recorded on an installment basis?    Yes [    ]    No [ X ]

If yes:    1. The amount of such installment premiums \$    .....

              2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$    .....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 -3 )	Net Losses Unpaid Current Year (Part 2A , Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire .....	1,116,747		1,116,747					
2.	Allied lines .....	747,378		747,378					
3.	Farmowners multiple peril .....								
4.	Homeowners multiple peril .....	284,512		284,512					
5.	Commercial multiple peril .....	66,598,364		66,598,364					
6.	Mortgage guaranty .....								
8.	Ocean marine .....								
9.	Inland marine .....	2,044,280		2,044,280					
10.	Financial guaranty .....								
11.1	Medical professional liability - occurrence .....	2,043,980		2,043,980					
11.2	Medical professional liability - claims-made .....								
12.	Earthquake .....								
13.	Group accident and health .....								
14.	Credit accident and health (group and individual) .....								
15.	Other accident and health .....								
16.	Workers' compensation .....	64,435,764	332,404	64,768,168					
17.1	Other liability - occurrence .....	12,053,387		12,053,387					
17.2	Other liability - claims-made .....	448,824		448,824					
17.3	Excess workers' compensation .....								
18.1	Products liability - occurrence .....	2,078,336		2,078,336					
18.2	Products liability - claims-made .....								
19.1, 19.2	Private passenger auto liability .....	425,592		425,592					
19.3, 19.4	Commercial auto liability .....	21,294,239		21,294,239					
21.	Auto physical damage .....	9,642,594		9,642,594					
22.	Aircraft (all perils) .....								
23.	Fidelity .....								
24.	Surety .....								
26.	Burglary and theft .....	137,104		137,104					
27.	Boiler and machinery .....								
28.	Credit .....								
29.	International .....								
30.	Warranty .....								
31.	Reinsurance - nonproportional assumed property .....	XXX							
32.	Reinsurance - nonproportional assumed liability .....	XXX							
33.	Reinsurance - nonproportional assumed financial lines .....	XXX							
34.	Aggregate write-ins for other lines of business .....								
35.	TOTALS	183,351,102	332,404	183,683,506					
DETAILS OF WRITE-INS									
3401.	.....								
3402.	.....								
3403.	.....								
3498.	Summary of remaining write-ins for Line 34 from overflow page .....								
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business		Reported Losses			Incurred But Not Reported			8	9
		1	2	3	4	5	6		
		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)
1.	Fire .....	1,156,986		1,156,986					
2.	Allied lines .....	1,019,595		1,019,595					
3.	Farmowners multiple peril .....								
4.	Homeowners multiple peril .....	653,002		653,002					
5.	Commercial multiple peril .....	71,278,558		71,278,558		13,013,000		13,013,000	
6.	Mortgage guaranty .....								
8.	Ocean marine .....								
9.	Inland marine .....	1,297,737		1,297,737					
10.	Financial guaranty .....								
11.1	Medical professional liability - occurrence .....	2,171,139		2,171,139		1,909,000		1,909,000	
11.2	Medical professional liability - claims-made .....	354,684		354,684					
12.	Earthquake .....								
13.	Group accident and health .....								(a) .....
14.	Credit accident and health (group and individual) .....								
15.	Other accident and health .....								(a) .....
16.	Workers' compensation .....	150,058,014	4,531,000	154,589,014		222,165,000	3,018,224	225,183,224	
17.1	Other liability - occurrence .....	20,130,934		20,130,934		25,489,000		25,489,000	
17.2	Other liability - claims-made .....	552,299		552,299					
17.3	Excess workers' compensation .....								
18.1	Products liability - occurrence .....	5,905,191		5,905,191		6,761,000		6,761,000	
18.2	Products liability - claims-made .....								
19.1, 19.2	Private passenger auto liability .....	202,240		202,240					
19.3, 19.4	Commercial auto liability .....	40,107,818		40,107,818		11,233,000		11,233,000	
21.	Auto physical damage .....	978,541		978,541		60,000		60,000	
22.	Aircraft (all perils) .....								
23.	Fidelity .....								
24.	Surety .....								
26.	Burglary and theft .....								
27.	Boiler and machinery .....								
28.	Credit .....								
29.	International .....								
30.	Warranty .....								
31.	Reinsurance - nonproportional assumed property .....	XXX				XXX			
32.	Reinsurance - nonproportional assumed liability .....	XXX				XXX			
33.	Reinsurance - nonproportional assumed financial lines .....	XXX				XXX			
34.	Aggregate write-ins for other lines of business .....								
35.	TOTALS .....	295,866,736	4,531,000	300,397,737		280,630,000	3,018,224	283,648,224	
DETAILS OF WRITE-INS									
3401.	.....								
3402.	.....								
3403.	.....								
3498.	Summary of remaining write-ins for Line 34 from overflow page .....								
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								

(a) Including \$ ..... for present value of life indemnity claims.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct .....	27,020,275			27,020,275
1.2 Reinsurance assumed .....				
1.3 Reinsurance ceded .....	27,020,275			27,020,275
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) .....				
2. Commission and brokerage:				
2.1 Direct excluding contingent .....		46,821,160		46,821,160
2.2 Reinsurance assumed, excluding contingent .....		15,494		15,494
2.3 Reinsurance ceded, excluding contingent .....		46,836,654		46,836,654
2.4 Contingent - direct .....		10,537,000		10,537,000
2.5 Contingent - reinsurance assumed .....				
2.6 Contingent - reinsurance ceded .....		10,537,000		10,537,000
2.7 Policy and membership fees .....				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) .....				
3. Allowances to managers and agents .....				
4. Advertising .....				
5. Boards, bureaus and associations .....			1	1
6. Surveys and underwriting reports .....				
7. Audit of assureds' records .....				
8. Salary and related items:				
8.1 Salaries .....			90,856	90,856
8.2 Payroll taxes .....			5,094	5,094
9. Employee relations and welfare .....			45,973	45,973
10. Insurance .....				
11. Directors' fees .....				
12. Travel and travel items .....			1,183	1,183
13. Rent and rent items .....			3,357	3,357
14. Equipment .....			115,301	115,301
15. Cost or depreciation of EDP equipment and software .....			4	4
16. Printing and stationery .....			175	175
17. Postage, telephone and telegraph, exchange and express .....			9	9
18. Legal and auditing .....			44,394	44,394
19. Totals (Lines 3 to 18) .....			306,347	306,347
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....				
20.2 Insurance department licenses and fees .....				
20.3 Gross guaranty association assessments .....				
20.4 All other (excluding federal and foreign income and real estate) .....				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....				
21. Real estate expenses .....				
22. Real estate taxes .....				
23. Reimbursements by uninsured plans .....				
24. Aggregate write-ins for miscellaneous expenses .....				
25. Total expenses incurred .....			306,347	(a) 306,347
26. Less unpaid expenses - current year .....			5,161	5,161
27. Add unpaid expenses - prior year .....			(926)	(926)
28. Amounts receivable relating to uninsured plans, prior year .....				
29. Amounts receivable relating to uninsured plans, current year .....				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			300,260	300,260
<b>DETAILS OF WRITE-INS</b>				
2401. ....				
2402. ....				
2403. ....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)				

(a) Includes management fees of \$ ..... to affiliates and \$ ..... to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds .....	(a) .....31,310	.....28,671
1.1	Bonds exempt from U.S. tax .....	(a) .....5,750,636	.....5,928,827
1.2	Other bonds (unaffiliated) .....	(a) .....5,878,020	.....5,728,325
1.3	Bonds of affiliates .....	(a) .....	.....
2.1	Preferred stocks (unaffiliated) .....	(b) .....	.....
2.11	Preferred stocks of affiliates .....	(b) .....	.....
2.2	Common stocks (unaffiliated) .....	.....3,593,825	.....3,607,950
2.21	Common stocks of affiliates .....	.....	.....
3.	Mortgage loans .....	(c) .....	.....
4.	Real estate .....	(d) .....	.....
5	Contract loans .....	.....	.....
6	Cash, cash equivalents and short-term investments .....	(e) .....2	.....2
7	Derivative instruments .....	(f) .....	.....
8.	Other invested assets .....	.....	.....
9.	Aggregate write-ins for investment income .....	.....	.....
10.	Total gross investment income .....	15,253,793	15,293,775
11.	Investment expenses .....		(g) .....306,347
12.	Investment taxes, licenses and fees, excluding federal income taxes .....		(g) .....
13.	Interest expense .....		(h) .....
14.	Depreciation on real estate and other invested assets .....		(i) .....
15.	Aggregate write-ins for deductions from investment income .....		.....
16.	Total deductions (Lines 11 through 15) .....		.....306,347
17.	Net investment income (Line 10 minus Line 16)		14,987,428
DETAILS OF WRITE-INS			
0901.	.....		
0902.	.....		
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page .....		
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)		
1501.	.....		
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page .....		
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		

- (a) Includes \$ .....87,354 accrual of discount less \$ .....1,229,887 amortization of premium and less \$ .....58,214 paid for accrued interest on purchases.
- (b) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued dividends on purchases.
- (c) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (d) Includes \$ ..... for company's occupancy of its own buildings; and excludes \$ ..... interest on encumbrances.
- (e) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (f) Includes \$ ..... accrual of discount less \$ ..... amortization of premium.
- (g) Includes \$ ..... investment expenses and \$ ..... investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ ..... interest on surplus notes and \$ ..... interest on capital notes.
- (i) Includes \$ ..... depreciation on real estate and \$ ..... depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds .....					
1.1	Bonds exempt from U.S. tax .....	8,594		8,594		
1.2	Other bonds (unaffiliated) .....	(231,187)		(231,187)	49,697	
1.3	Bonds of affiliates .....					
2.1	Preferred stocks (unaffiliated) .....					
2.11	Preferred stocks of affiliates .....					
2.2	Common stocks (unaffiliated) .....	220,048		220,048	33,285,601	
2.21	Common stocks of affiliates .....					
3.	Mortgage loans .....					
4.	Real estate .....					
5.	Contract loans .....					
6.	Cash, cash equivalents and short-term investments .....					
7.	Derivative instruments .....					
8.	Other invested assets .....					
9.	Aggregate write-ins for capital gains (losses) .....					
10.	Total capital gains (losses)	(2,545)		(2,545)	33,335,298	
DETAILS OF WRITE-INS						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page .....					
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....			
2. Stocks (Schedule D):			
2.1 Preferred stocks .....			
2.2 Common stocks .....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....			
3.2 Other than first liens.....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....			
4.2 Properties held for the production of income.....			
4.3 Properties held for sale .....			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....			
6. Contract loans .....			
7. Derivatives (Schedule DB) .....			
8. Other invested assets (Schedule BA) .....			
9. Receivables for securities .....			
10. Securities lending reinvested collateral assets (Schedule DL) .....			
11. Aggregate write-ins for invested assets .....			
12. Subtotals, cash and invested assets (Lines 1 to 11) .....			
13. Title plants (for Title insurers only) .....			
14. Investment income due and accrued .....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....			
15.3 Accrued retrospective premiums and contracts subject to redetermination .....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....			
16.2 Funds held by or deposited with reinsured companies .....			
16.3 Other amounts receivable under reinsurance contracts .....			
17. Amounts receivable relating to uninsured plans .....			
18.1 Current federal and foreign income tax recoverable and interest thereon .....			
18.2 Net deferred tax asset .....			
19. Guaranty funds receivable or on deposit .....			
20. Electronic data processing equipment and software .....	1,787,142	911,308	(875,834)
21. Furniture and equipment, including health care delivery assets .....			
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			
23. Receivables from parent, subsidiaries and affiliates .....			
24. Health care and other amounts receivable .....			
25. Aggregate write-ins for other than invested assets .....			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	1,787,142	911,308	(875,834)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
28. Total (Lines 26 and 27) .....	1,787,142	911,308	(875,834)
DETAILS OF WRITE-INS			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)			
2501. ....			
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)			

**NOTES TO FINANCIAL STATEMENTS**

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of The Cincinnati Casualty Company (the Company) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' Accounting Practices and Procedures Manual (NAIC SAP), version effective January 1, 2001 and updates through the current year have been adopted as a component of prescribed or permitted practices by the state of Ohio.

The Company has no prescribed or permitted practices that would result in differences between the NAIC SAP and the state of Ohio basis, as shown below:

	SSAP #	F/S Page	F/S Line #	2019	2018
<b>NET INCOME</b>					
(1) Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 13,174,076	\$ 16,274,436
(2) State Prescribed Practices that increase/(decrease) NAIC SAP	N/A	N/A	N/A	0	0
(3) State Permitted Practices that increase/(decrease) NAIC SAP	N/A	N/A	N/A	0	0
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 13,174,076	\$ 16,274,436
<b>SURPLUS</b>					
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 436,730,632	\$ 398,100,347
(6) State Prescribed Practices that increase/(decrease) NAIC SAP	N/A	N/A	N/A	0	0
(7) State Permitted Practices that increase/(decrease) NAIC SAP	N/A	N/A	N/A	0	0
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 436,730,632	\$ 398,100,347

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policies

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. These reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

1. Cash equivalents, highly liquid debt instruments with original maturities of 90 days or less, and short term investments are carried at amortized cost, which approximates fair value.
2. Fixed maturities (bonds and notes) with an NAIC designation of 1 or 2 are valued and reported in accordance with the NAIC *Purposes and Procedures Manual of the NAIC Investment Analysis Office*, generally at amortized cost using the scientific interest method. Fixed maturities with an NAIC designation 3 through 6 are carried at the lower of amortized cost or fair value, with the difference reflected in assigned surplus.
3. Common stocks of non-affiliates are stated at fair values.
4. The Company does not have any investments in preferred stocks.
5. The Company does not have any investments in mortgage loans.
6. The Company does not have any investments in loan-backed and structured securities.
7. The Company does not have any investments in non-insurance subsidiaries, controlled or affiliated companies.
8. The Company does not have any investments in joint ventures, partnerships, and limited liability entities.
9. The Company does not have any investments in derivatives.
10. In the event that a first-order approximation (excluding anticipated investment income) of estimated future costs related to unearned premium as of a particular evaluation date exceeds the unearned premium as of that date, the Company would incorporate consideration of the related investment income it would expect to earn. However, to date the Company has not had to proceed to this step in order to demonstrate that no premium deficiency exists.
11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

determined.

- 12. The Company has not modified its capitalization policy from a prior period.
- 13. The Company has no pharmaceutical rebate receivables.

D. Going Concern

After review of the Company’s financial condition, management has no doubts about the Company’s ability to continue as a going concern.

2. Accounting Changes and Correction of Errors

The Company had no material changes in accounting principles and/or corrections of errors.

3. Business Combinations and Goodwill – Not applicable

4. Discontinued Operations – Not applicable

5. Investments

- A. Mortgage Loans - Not applicable
- B. Debt Restructuring – Not applicable
- C. Reverse Mortgages - Not applicable
- D. Loan-Backed Securities – Not applicable
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - Not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale – Not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale – Not applicable
- J. Real Estate - Not applicable
- K. Investments in Low-Income Housing Tax Credits (LIHTC) – Not applicable
- L. Restricted Assets

1. Restricted Assets (Including Pledged)

	Gross (Admitted and Nonadmitted) Restricted									Percentage		
	Current Year					6	7	8		9	10	11
	1	2	3	4	5							
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total from Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)	
a. Subject to contractual obligation for which liability is not shown	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.00%	0.00%	
b. Collateral held under security lending agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
c. Subject to repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
d. Subject to reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
e. Subject to dollar repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
g. Placed under option contracts	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
i. FHLB capital stock	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
j. On deposit with states	8,811,178	0	0	0	8,811,178	8,567,115	244,063	0	8,811,178	1.81%	1.81%	
k. On deposit with other regulatory bodies	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
l. Pledged collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
m. Pledged as collateral not captured in other categories	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
n. Other restricted assets	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
o. Total Restricted Assets	\$ 8,811,178	\$ 0	\$ 0	\$ 0	\$ 8,811,178	\$ 8,567,115	\$ 244,063	\$ 0	\$ 8,811,178	1.81%	1.81%	

(a) Subset of column 1  
(b) Subset of column 3  
(c) Column 5 divided by Asset Page, Column 1, Line 28  
(d) Column 9 divided by Asset Page, Column 3, Line 28

- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories – Not applicable
- 3. Detail of Other Restricted Assets – Not applicable
- 4. Collateral Received and Reflected as Assets Within the Reporting Entity’s Financial Statements – Not applicable
- M. Working Capital Finance Investments – Not applicable
- N. Offsetting and Netting of Assets and Liabilities – Not applicable
- O. 5GI Securities – Not applicable
- P. Short Sales – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

Q. Prepayment Penalties and Acceleration Fees

	General Account	Protected Cell
(1) Number of CUSIPs	4	0
(2) Aggregate Amount of Investment Income	\$ 425,128	\$ 0

6. Joint Ventures, Partnerships and Limited Liability Companies – Not applicable

7. Investment Income

- A. The Company does not admit investment income due and accrued if amounts are over 90 days past due.
- B. No amount of investment income was excluded.

8. Derivative Instruments – Not applicable

9. Income Taxes

A. Components of Deferred Tax Assets (DTAs) and Deferred Tax Liabilities (DTLs):

1.

	2019		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 375,300	\$ 0	\$ 375,300
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	375,300	0	375,300
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	375,300	0	375,300
(f) Deferred Tax Liabilities	\$ 394,388	\$ 19,053,521	\$ 19,447,909
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (19,088)	\$ (19,053,521)	\$ (19,072,609)

	2018		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 191,375	\$ 0	\$ 191,375
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	191,375	0	191,375
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	191,375	0	191,375
(f) Deferred Tax Liabilities	\$ 208,400	\$ 12,052,329	\$ 12,260,729
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (17,025)	\$ (12,052,329)	\$ (12,069,354)

	Change		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 183,925	\$ 0	\$ 183,925
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	183,925	0	183,925
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	183,925	0	183,925
(f) Deferred Tax Liabilities	\$ 185,988	\$ 7,001,192	\$ 7,187,180
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (2,063)	\$ (7,001,192)	\$ (7,003,255)

2.

	2019		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 144,626	\$ 0	\$ 144,626
(b)Adjusted Gross Deferred Tax Assets Expected to be Realized (Excluding The Amount of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The lesser of 2(b)1 and 2(b)2 Below)	72,313	0	72,313
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	72,313	0	72,313
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	65,509,595
(c)Adjusted Gross Deferred Tax Assets (Excluding the amount of Deferred Tax Assets from 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	158,361	0	158,361
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c)	\$ 375,300	\$ 0	\$ 375,300

	2018		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 58,577	\$ 0	\$ 58,577
(b)Adjusted Gross Deferred Tax Assets Expected to be Realized (Excluding The Amount of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The lesser of 2(b)1 and 2(b)2 Below)	29,288	0	29,288
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	29,288	0	29,288
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	59,715,052
(c)Adjusted Gross Deferred Tax Assets (Excluding the amount of Deferred Tax Assets from 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	103,510	0	103,510
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c)	\$ 191,375	\$ 0	\$ 191,375



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

Admission Calculation Components SSAP No. 101	Change		
	Ordinary	Capital	Total
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 86,049	\$ 0	\$ 86,049
(b)Adjusted Gross Deferred Tax Assets Expected to be Realized (Excluding The Amount of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The lesser of 2(b)1 and 2(b)2 Below)	43,025	0	43,025
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	43,025	0	43,025
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	5,794,543
(c)Adjusted Gross Deferred Tax Assets (Excluding the amount of Deferred Tax Assets from 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	54,851	0	54,851
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ 183,925	\$ 0	\$ 183,925

3.

(a)Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	2019 Percentage	2018 Percentage
	2346%	2790%
(b)Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 above	\$ 436,730,632	\$ 398,100,347

4.

Impact of Tax Planning Strategies	2019		
	Ordinary	Capital	Total
(a)Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.			
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 375,300	\$ 0	\$ 375,300
2. Percentage of Adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.00%	0.00%	0.00%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 375,300	\$ 0	\$ 375,300
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.00%	0.00%	0.00%
(b)The Company's tax-planning strategies did not include the use of reinsurance-related tax planning strategies.			

Impact of Tax Planning Strategies	2018		
	Ordinary	Capital	Total
(a)Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.			
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 191,375	\$ 0	\$ 191,375
2. Percentage of Adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.00%	0.00%	0.00%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 191,375	\$ 0	\$ 191,375
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.00%	0.00%	0.00%
(b)The Company's tax-planning strategies did not include the use of reinsurance-related tax planning strategies.			

Impact of Tax Planning Strategies	Change		
	Ordinary	Capital	Total
(a)Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.			
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 183,925	\$ 0	\$ 183,925
2. Percentage of Adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.00%	0.00%	0.00%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 183,925	\$ 0	\$ 183,925
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.00%	0.00%	0.00%
(b)The Company's tax-planning strategies did not include the use of reinsurance-related tax planning strategies.			

B. Unrecognized DTLs – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

C. Current Tax and Change in Deferred Tax

1. Current income tax:			
	2019	2018	Change
(a)Federal	\$ 1,707,477	\$ 1,543,050	\$ 164,427
(b)Foreign	102,570	95,387	7,183
(c)Subtotal	1,810,047	1,638,437	171,610
(d)Federal income tax on capital gains/(losses)	1,002	999,631	(998,629)
(e)Utilization of capital loss carryforwards	0	0	0
(f) Other	0	0	0
(g)Federal income taxes incurred	\$ 1,811,049	\$ 2,638,068	\$ (827,019)

2. Deferred tax assets:			
	2019	2018	Change
(a)Ordinary			
1. Unearned premium reserve	\$ 0	\$ 0	\$ 0
2. Unpaid loss reserve	0	0	0
3. Contingent commission	0	0	0
4. Nonadmitted assets	375,300	191,375	183,925
5. Other deferred tax assets	0	0	0
99.Subtotal	\$ 375,300	\$ 191,375	\$ 183,925
(b)Statutory valuation allowance adjustment	0	0	0
(c)Nonadmitted	0	0	0
(d)Admitted ordinary deferred tax assets (2(a)99-2(b)-2(c))	\$ 375,000	\$ 191,375	\$ 183,925
(e)Capital			
1. Investments	\$ 0	\$ 0	\$ 0
2. Unrealized loss on investments	0	0	0
99.Subtotal	\$ 0	\$ 0	\$ 0
(f) Statutory valuation allowance	0	0	0
(g)Nonadmitted	0	0	0
(h)Admitted capital deferred tax assets ((2(e)99- 2(f)-2(g))	\$ 0	\$ 0	\$ 0
(i) Admitted deferred tax assets (2(d)+2(h))	\$ 375,300	\$ 191,375	\$ 183,925

3. Deferred tax liabilities:			
	2019	2018	Change
(a)Ordinary			
1. Commission expense	\$ 0	\$ 0	\$ 0
2. Other, net	394,388	208,400	185,988
99.Subtotal	\$ 394,388	\$ 208,400	\$ 185,988
(b)Capital			
1. Investment	\$ 1,624,136	\$ 1,623,355	\$ 781
2. Unrealized gain on investments	17,429,385	10,428,974	7,000,411
99.Subtotal	\$ 19,053,521	\$ 12,052,329	\$ 7,001,192
(c)Deferred tax liabilities (3(a)99+3(b)99)	\$ 19,447,909	\$ 12,260,729	\$ 7,187,180
4. Net deferred tax assets/(liabilities) (2(i)-3(c)):	\$(19,072,609)	\$(12,069,354)	\$ (7,003,255)

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	December 31, 2019	December 31, 2018	Change
Total deferred tax assets	\$ 375,300	\$ 191,375	\$ 183,925
Total deferred tax liabilities	19,447,909	12,260,729	7,187,180
Net deferred tax asset/(liability)	\$(19,072,609)	\$(12,069,354)	\$ (7,003,255)
Tax effect of unrealized (gains)/losses			7,000,411
Change in net deferred income tax (charge)/benefit			\$ (2,844)

	December 31, 2018	December 31, 2017	Change
Total deferred tax assets	\$ 191,375	\$ 0	\$ 191,375
Total deferred tax liabilities	12,260,729	14,565,042	(2,304,313)
Net deferred tax asset/(liability)	\$(12,069,354)	\$(14,565,042)	\$ 2,495,688
Tax effect of unrealized (gains)/losses			(2,529,476)
Change in net deferred income tax (charge)/benefit			\$ (33,788)

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

Description	As of December 31, 2019		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 14,985,124	\$ 3,146,876	21.00 %
Net tax exempt interest	(4,441,976)	(932,815)	(6.22)%
Net dividends received deduction (DRD)	(1,024,500)	(215,145)	(1.44)%
Other items permanent, net	65	14	0.00 %
DRD on accrued	(5,295)	(1,112)	(0.01)%
Total	\$ 9,513,418	\$ 1,997,818	13.33 %
Federal income tax expense incurred/(benefit)	\$ 8,619,271	\$ 1,810,047	12.08 %
Tax on capital gains/(losses)	4,771	1,002	0.01 %
Change in nonadmitted excluding deferred tax asset	875,833	183,925	1.22 %
Change in net deferred income tax charge/(benefit)	13,543	2,844	0.02 %
Total statutory income taxes incurred/(benefit)	\$ 9,513,418	\$ 1,997,818	13.33 %

Description	As of December 31, 2018		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 18,912,505	\$ 3,971,626	21.00 %
Net tax exempt interest	(4,299,448)	(902,884)	(4.77)%
Net dividends received deduction (DRD)	(967,648)	(203,206)	(1.08)%
Other items permanent, net	18	4	0.00 %
DRD on accrued	(10,995)	(2,309)	(0.01)%
Total	\$ 13,634,432	\$ 2,863,231	15.14 %
Federal income tax expense incurred/(benefit)	\$ 7,802,081	\$ 1,638,437	8.66 %
Tax on capital gains/(losses)	4,760,148	999,631	5.29 %
Change in nonadmitted excluding deferred tax asset	911,308	191,375	1.01 %
Change in net deferred income tax charge/(benefit)	160,895	33,788	0.18 %
Total statutory income taxes incurred/(benefit)	\$ 13,634,432	\$ 2,863,231	15.14 %

# ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

## NOTES TO FINANCIAL STATEMENTS

### E. Operating Loss and Tax Credit Carryforwards

At December 31, 2019 the Company had no net operating loss carryforwards or capital loss carryforwards.

The following is income tax expense for the current and prior years that is available for recoupment in the event of future net losses:

Year	Ordinary	Capital	Total
2019	\$ 1,618,199	\$ 90,279	\$ 1,708,478
2018	1,543,050	999,631	2,542,681
2017	0	1,164,313	1,164,313
Total	\$ 3,161,249	\$ 2,254,223	\$ 5,415,472

At December 31, 2019 the Company had no protective tax deposits under Section 6603 of the Internal Revenue Code.

### F. Consolidated Federal Income Tax Return

- The Company's federal income tax return is consolidated with the following entities:

Cincinnati Financial Corporation (Parent)  
The Cincinnati Insurance Company  
The Cincinnati Life Insurance Company  
The Cincinnati Indemnity Company  
The Cincinnati Specialty Underwriters Insurance Company  
CFC Investment Company  
CSU Producer Resources, Inc.

- The method of allocation between the companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis, with the company receiving a current benefit for losses generated to the extent federal taxes are reduced for the consolidated tax group.

### G. Federal or Foreign Income Tax Loss Contingencies

For the years ended December 31, 2019 and 2018, the Company did not have tax contingencies under the principles of SSAP No. 5, *Liabilities, Contingencies and Impairment of Assets*. This is subject to change but it is not expected to significantly increase in the 12 month period following the balance sheet date. The Company is primarily subject to examination by U.S. federal and various U.S. state and local tax authorities. The statute of limitations for federal tax purposes has closed for tax years 2015 and earlier. In 2019, the IRS began its examination of the tax year ended December 31, 2017. At this time, no adjustments have been proposed. The statute of limitations for state income tax purposes has closed for tax years 2015 and earlier.

- The Company is not subject to Repatriation Transition Tax as outlined under the Tax Cuts and Jobs Act (TCJA).

- There was \$0 of AMT Credit Carryforward as of the beginning of the year. In addition, there were no current year adjustments resulting in \$0 of AMT Credit Carryforward at the end of the year.

## 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

### A. Nature of Relationships

The Company is a wholly-owned subsidiary of The Cincinnati Insurance Company (See Schedule Y, Part 1, Organizational Chart).

- Detail of Transactions Greater than ½% of Admitted Assets – Not applicable

- Change in Terms of Intercompany Agreements – Not Applicable

- Amounts Due to or from Related Parties

At December 31, 2019, the Company reported \$8,497,838 due from the Parent Company, The Cincinnati Insurance Company. The terms of the settlement require that these amounts be settled within 30 days.

- Guarantees or Contingencies for Related Parties – Not applicable

- Management, Service Contracts, Cost Sharing Arrangements

The Company has the following management agreements with related parties:

- Inter-company Benefits and Expense Allocation Agreement.
- Inter-company Cost Sharing and Expense Allocation Agreement.
- Inter-company Tax Sharing Agreement.
- Inter-company Reinsurance Agreement.

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

### NOTES TO FINANCIAL STATEMENTS

#### G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by the Parent Company, The Cincinnati Insurance Company, an insurance company domiciled in the state of Ohio.

#### H. Amount Deducted from Value of an Investment in Upstream Entity – Not applicable

#### I. Investment in an SCA that exceeds 10% of Admitted Assets – Not applicable

#### J. Impairment Writedowns related to Investments in SCA entities – Not applicable

#### K. Investment in Foreign Insurance Subsidiaries – Not applicable

#### L. Investment in Downstream Noninsurance Holding Company – Not applicable

#### M. All SCA Investments (Except 8bi Entities) – Not applicable

#### N. Investment in Insurance SCA Entities Utilizing Permitted or Prescribed Practices – Not applicable

#### O. SCA Loss Tracking – Not applicable

#### 11. Debt – Not applicable

#### 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

##### A. Defined Benefit Plan – Not applicable

##### B. Defined Benefit Plan Assets – Not applicable

##### C. Fair Value Measurement of Defined Benefit Plan Assets – Not Applicable

##### D. Defined Benefit Plan Rate of Return on Assets Assumptions – Not applicable

##### E. Defined Contribution Plans – Not applicable

##### F. Multiemployer Plans – Not applicable

##### G. Consolidated/Holding Company Plans

1. Defined Benefit Pension Plan – The Company participates in a qualified, noncontributory defined benefit pension plan sponsored by Cincinnati Financial Corporation, the Ultimate Parent. The Company has no legal obligations for benefits under the plan.
2. Defined Contribution Plan - The Company participates in a qualified, defined contribution plan sponsored by Cincinnati Financial Corporation, the Ultimate Parent. The Company has no legal obligation for benefits under the plan. Cincinnati Financial Corporation allocates amounts to the Company based on an inter-company management fee. The Company's share of net expense for the defined contribution plan was \$2,819 and \$4,144 for 2019 and 2018, respectively.

##### H. Postemployment Benefits and Compensated Absences – Not applicable

##### I. Impact of Medicare Modernization Act on Postretirement Benefits – Not applicable

#### 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

1. The Company has 2,000 shares authorized, 1,875 shares issued and 1,875 shares outstanding. All shares are Class A shares.
2. Preferred stock issues – Not applicable
3. The maximum amount of dividends or distributions which may be paid to stockholders by property and casualty companies domiciled in the state of Ohio without prior approval or expiration of a 30 day waiting period without disapproval of the Director of Insurance is the greater of net income or 10% of policyholders' surplus as of the preceding December 31, but only to the extent of earned surplus as of the preceding December 31. The maximum amount of ordinary dividends or distributions the Company may pay in 2020 based upon surplus is \$43,673,063.
4. The Company did not pay any dividends during 2019.
5. Within the limitations of item 3 above, there are no specific restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
6. Surplus restrictions – Not applicable
7. Mutual Surplus Advances – Not applicable

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

### NOTES TO FINANCIAL STATEMENTS

8. Company Stock Held for Special Purposes – Not applicable
9. Changes in Special Surplus Funds – Not applicable
10. The portion of unassigned funds (surplus) represented or (reduced) by cumulative unrealized gains/(losses) are \$82,997,075 offset by deferred tax of \$17,429,386 for a net balance of \$65,567,689.
11. Surplus Notes – Not applicable
12. Restatement of Quasi-Reorganization – Not applicable
13. Date of Quasi-Reorganization – Not applicable

#### 14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments – Not applicable
- B. Assessments

The Company was not aware of any material assessments as of December 31, 2019.

- C. Gain Contingencies – Not applicable
- D. Claims Related to Extra Contractual Obligations or Bad Faith Claims Stemming from Lawsuits – Not applicable
- E. Product Warranties – Not applicable
- F. Joint and Several Liabilities – Not applicable
- G. All Other Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company. The Company has no assets it considers impaired.

#### 15. Leases – Not applicable

#### 16. Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk – Not applicable

#### 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities – Not applicable

#### 18. Gain or Loss to the Reporting Entity from Uninsured Plans and Uninsured Portion of Partially Insured Plans – Not applicable

#### 19. Direct Written Premium/Produced by Managing General Agents/Third Party Administrators – Not applicable

#### 20. Fair Value Measurements

- A. Inputs Used for Assets and Liabilities Measured at Fair Value

1. Included in various investment related line items in the financial statements are certain financial instruments carried at fair value. Other financial instruments are periodically measured at fair value, such as when impaired, or, for certain fixed maturities and preferred stock, when carried at the lower of cost or market.

The fair value of an asset is the amount at which that asset could be bought or sold in a current transaction between willing parties, that is, other than in a forced or liquidation sale. The Company does not have any material liabilities carried at fair value.

The Company has categorized its financial instruments, based on the priority of the inputs to the valuation technique, into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). If the inputs used to measure the financial instruments fall within different levels of the hierarchy, the categorization is based on the lowest level that is significant to the fair value measurement of the instrument.

Financial assets that fall within Level 1 and Level 2 are priced according to observable data from identical or similar securities that have traded in the marketplace. Also within Level 2 are securities that are valued by outside services or brokers where the Company has evaluated the pricing methodology and determined that the inputs are observable. Financial assets that fall within Level 3 of the hierarchy are valued based upon unobservable market inputs. Pricing for each Level 3 security is based upon inputs that are market driven, including third-party reviews provided to the issuer or broker quotes. However, the Company places in the Level 3 hierarchy securities for which it is unable to obtain the pricing methodology or it could not consider the price provided as binding. Management ultimately determines the fair value for each Level 3 security that it considers to be the best exit price valuation.

The Company primarily bases fair value estimates for investments in equity and fixed-maturity securities on quoted

NOTES TO FINANCIAL STATEMENTS

market prices or on prices from a nationally recognized pricing vendor, an outside resource that supplies global securities pricing, dividend, corporate action and descriptive information to support fund pricing, securities operations, research and portfolio management. The Company obtains and reviews the pricing service's valuation methodologies and related inputs and validates these prices by replicating a sample across each asset class using a discounted cash flow model. When a price is not available from these sources, as in the case of securities that are not publicly traded, the Company determines the fair value using various inputs including quotes from independent brokers. In these circumstances, the Company has generally obtained and evaluated two nonbinding quotes from brokers; its investment professionals determine the best estimate of fair value. The fair value of investments not priced by a pricing vendor is less than 1 percent of the fair value of the Company's total investment portfolio.

Financial instruments are categorized based upon the following characteristics or inputs to the valuation techniques:

- Level 1—Financial assets and liabilities for which inputs are observable and are obtained from reliable quoted prices for identical assets or liabilities in active markets. This is the most reliable fair value measurement and includes, for example, active exchange-traded equity securities.
- Level 2 – Financial assets and liabilities for which values are based on quoted prices in markets that are not active or for which values are based on similar assets and liabilities that are actively traded. This also includes pricing models for which the inputs are corroborated by market data. The technique used for the Level 2 fixed-maturity securities is the application of market based modeling. The inputs used for all classes of fixed-maturity securities listed in the table below include relevant market information by asset class, trade activity of like securities, marketplace quotes, benchmark yields, spreads off benchmark yields, interest rates, U.S. Treasury or swap curves, yield to maturity and economic events. Level 2 fixed-maturity securities are primarily priced by a nationally recognized pricing vendor.
- Level 3—Financial assets and liabilities for which values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement. Level 3 inputs include the following:
  - Quotes from brokers or other external sources that are not considered binding;
  - Quotes from brokers or other external sources where it cannot be determined that market participants would in fact transact for the asset or liability at the quoted price; or
  - Quotes from brokers or other external sources where the inputs are not deemed observable.

Reclassification of certain financial instruments may occur when input observability changes. Reclassifications are reported as transfers into/out of the Level 3 category.

The following table presents the Company's assets measured and reported at fair value by level within the fair value hierarchy as of December 31, 2019:

Assets at Fair Value:

	Level 1	Level 2	Level 3	Net Asset Value (NAV) Included in Level 2	Total
Common Stocks	\$ 140,922,452	\$ 0	\$ 0	\$ 0	\$ 140,922,452
Total	\$ 140,922,452	\$ 0	\$ 0	\$ 0	\$ 140,922,452

- 2. Fair Value Measurements in Level 3 of the Fair Value Hierarchy – Not applicable
  - 3. Transfers between levels are assumed to occur at the beginning of the period.
  - 4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values – See narrative in Note 20A1.
- B. Other Fair Value Disclosures – Not applicable
- C. Fair Values for all Financial Instruments by Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV) Included in Level 2	Not Practicable (Carrying Value)
Bonds	\$ 324,035,396	\$ 307,375,444	\$ 1,140,670	\$ 322,894,726	\$ 0	\$ 0	\$ 0
Common Stock	140,922,452	140,922,452	140,922,452	0	0	0	0

- D. Reasons Not Practical to Estimate Fair Values – Not applicable

21. Other Items

- A. Unusual or Infrequent Items – Not applicable
- B. Troubled Debt Restructuring – Not applicable
- C. Other Disclosures

# ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

## NOTES TO FINANCIAL STATEMENTS

Assets in the amount of \$8,811,178 and \$8,567,115 at December 31, 2019 and 2018, respectively, were on deposit with government authorities or trustees as required by law.

D. Business Interruption Insurance Recoveries – Not applicable

E. State Transferable and Non-Transferable Tax Credits – Not applicable

F. Subprime-Mortgage-Related Risk Exposure

The Company has no investments in subprime or related areas. This includes direct investments in subprime mortgage loans, RMBS, CMBS, CDO's, hedge funds, credit default swaps or SIVs. Additionally, the Company has no equity investments in SCA entities with subprime exposure nor does it underwrite any form of mortgage guaranty or financial guaranty insurance.

G. Insurance-Linked Securities (ILS) Contracts – Not applicable

## 22. Subsequent Events

The Company has considered subsequent events through February 29, 2020, the date of issuance of these statutory financial statements. There were no events occurring subsequent to December 31, 2019, which may have a material effect on the Company.

## 23. Reinsurance

A. Unsecured Reinsurance Recoverable

The Company does not have an unsecured aggregate recoverable for paid and unpaid losses, loss adjustment expenses and unearned premiums from any individual reinsurer that exceeds 3% of policyholders' surplus.

B. Reinsurance Recoverable in Dispute – Not applicable

C. Reinsurance Assumed and Ceded

1.

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium	Commission	Premium	Commission	Premium	Commission
	Reserve	Equity	Reserve	Equity	Reserve	Equity
a. Affiliates	\$ 0	\$ 0	\$ 175,641,742	\$ 21,382,126	\$(175,641,742)	\$ (21,382,126)
b. All Other	0	0	0	0	0	0
c. Total	\$ 0	\$ 0	\$ 175,641,742	\$ 21,382,126	\$(175,641,742)	\$ (21,382,126)
d. Direct Unearned Premium Reserve			\$ 175,641,742			

2.

REINSURANCE				
	Direct	Assumed	Ceded	Net
a. Contingent Commission	\$ 10,537,000	\$ 0	\$ 10,537,000	\$ 0
b. Sliding Scale Adjustments	0	0	0	0
c. Other Profit Commission Arrangements	0	0	0	0
d. Total	\$ 10,537,000	\$ 0	\$ 10,537,000	\$ 0

3. Protected Cell – Not applicable

D. Uncollectible Reinsurance – Not applicable

E. Commutation of Ceded Reinsurance – Not applicable

F. Retroactive Reinsurance – Not applicable

G. Reinsurance Accounted for as a Deposit – Not applicable

H. Disclosure for the Transfer of Property and Casualty Run-off Agreements – Not applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation – Not applicable

J. Reinsurance Agreement Qualifying for Reinsurer Aggregation – Not applicable

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination – Not applicable**

**25. Changes in Incurred Losses and Loss Adjustment Expense – Not applicable**

**26. Intercompany Pooling Arrangements – Not applicable**

**27. Structured Settlements – Not applicable**

**28. Health Care Receivables – Not applicable**

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

29. Participating Policies – Not applicable

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$0
2. Date of most recent evaluation of this liability	01/15/2020
3. Was anticipated investment income utilized in the calculation	No

31. High Deductibles – Not applicable

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

The Company does not discount unpaid losses or loss adjustment expenses except for income tax purposes.

33. Asbestos and Environmental Reserves

- A. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to asbestos losses? Yes (X) No ( )

The Company's exposure arose from the sale of commercial liability products. The Company tries to estimate the full impact of the asbestos exposures by establishing full case basis reserves on all known losses and computing IBNR based on generally accepted actuarial methodologies.

	ASBESTOS LOSSES	2015	2016	2017	2018	2019
1.	Direct	Direct	Direct	Direct	Direct	Direct
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 23,578	\$ 163,726
	Incurred Loss & LAE	0	0	25,000	196,000	350,000
	Calendar year payments for Loss and LAE	0	0	1,422	55,852	155,263
	Ending Reserves	\$ 0	\$ 0	\$ 23,578	\$ 163,726	\$ 358,463
2.	Assumed	Assumed	Assumed	Assumed	Assumed	Assumed
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments for Loss and LAE	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3.	Net	Net	Net	Net	Net	Net
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments for Loss and LAE	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

- B. Ending Reserves for Asbestos Claims for Bulk and IBNR Losses Included in A above:

	IBNR Reserves	2015	2016	2017	2018	2019
	Direct	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Assumed	0	0	0	0	0
	Net	0	0	0	0	0

- C. Ending Reserves for Asbestos Claims for LAE Included in A above (Case, Bulk and IBNR):

	LAE Reserves	2015	2016	2017	2018	2019
	Direct	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Assumed	0	0	0	0	0
	Net	0	0	0	0	0

- D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to environmental losses? Yes (X) No ( )

The Company's exposure arose from the sale of commercial liability products. The Company tries to estimate the full impact of the environmental exposures by establishing full case basis reserves on all known losses and computing IBNR based on generally accepted actuarial methodologies. The Company's environmental losses for each of the five most recent calendar years were as follows:

	ENVIRONMENTAL LOSSES	2015	2016	2017	2018	2019
1.	Direct	Direct	Direct	Direct	Direct	Direct
	Beginning Reserves	\$ 80,067	\$ 0	\$ 42,166	\$ 86,493	\$ 78,023
	Incurred Loss & LAE	(9,315)	695,632	103,456	27,729	374,395
	Calendar year payments	70,752	653,466	59,129	36,199	326,919
	Ending Reserves	\$ 0	\$ 42,166	\$ 86,493	\$ 78,023	\$ 125,499
2.	Assumed	Assumed	Assumed	Assumed	Assumed	Assumed
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

3.		<b>Net</b>	<b>Net</b>	<b>Net</b>	<b>Net</b>	<b>Net</b>
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

E. Ending Reserves for Environmental Claims for Bulk and IBNR Losses Included in D above:

	<b>IBNR Reserves</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
	Direct	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Assumed	0	0	0	0	0
	Net	0	0	0	0	0

F. Ending Reserves for Environmental Claims for LAE included in D above (Case, Bulk and IBNR):

	<b>LAE Reserves</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
	Direct	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Assumed	0	0	0	0	0
	Net	0	0	0	0	0

34. **Subscriber Savings Accounts** – Not applicable

35. **Multiple Peril Crop Insurance** – Not applicable

36. **Financial Guaranty Insurance** – Not applicable

37. **Other**

Prior year data included in Schedule P is calculated as follows:

Part 1-Payments made in the current year and current reserves for AY's 2009 & prior.

Parts 2&3-The prior line on last year's statement is combined with the year 2009 total. Paid amounts prior to 2010 are then subtracted from this sum to arrive at the prior figure.

Part 4-The sum of the prior year line and the 2009 line from the prior year's Schedule P compose the prior figures for this section.

Part 5 Section 1&3-The prior line is combined with year 2008 from the prior schedule P. Counts for accident year 2009 in the preceding year are then subtracted from this sum to arrive at the prior figure, removing the cumulative effect.

Part 5 Section 2 - The prior line is combined with the 2009 AY of the prior year's Schedule P to arrive at the new prior number.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....  
If yes, complete Schedule Y, Parts 1, 1A and 2

Yes [ X ] No [ ]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....

Yes [ X ] No [ ] N/A [ ]

1.3

State Regulating? .....

Ohio

1.4

Is the reporting entity publicly traded or a member of a publicly traded group? .....

Yes [ X ] No [ ]

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....

0000020286

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....

Yes [ ] No [ X ]

2.2

If yes, date of change: .....

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made. ....

12/31/2014

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....

12/31/2014

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....

10/05/2015

3.4

By what department or departments?  
Ohio .....

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....

Yes [ X ] No [ ] N/A [ ]

3.6

Have all of the recommendations within the latest financial examination report been complied with? .....

Yes [ X ] No [ ] N/A [ ]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.11 sales of new business? .....  
4.12 renewals? .....

Yes [ ] No [ X ]  
Yes [ ] No [ X ]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.21 sales of new business? .....  
4.22 renewals? .....

Yes [ ] No [ X ]  
Yes [ ] No [ X ]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....  
If yes, complete and file the merger history data file with the NAIC.

Yes [ ] No [ X ]

5.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....

Yes [ ] No [ X ]

6.2

If yes, give full information: .....

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....

Yes [ ] No [ X ]

7.2

If yes,  
7.21 State the percentage of foreign control; ..... %  
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [ ] No [ X ]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [ ] No [ X ]

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

Deloitte & Touche; Suite 1900; 250 E. 5th St; PO Box 5340; Cincinnati, OH 45201-5340

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [ ] No [ X ]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [ ] No [ X ]

10.4

If the response to 10.3 is yes, provide information related to this exemption:

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [ X ] No [ ] N/A [ ]

10.6

If the response to 10.5 is no or n/a, please explain

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Greg Chrin; Deloitte Consulting LLP; City Place I, 33rd Floor; 185 Asylum Street; Hartford, CT 06103-3402

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [ ] No [ X ]

12.11

Name of real estate holding company

12.12

Number of parcels involved

12.13

Total book/adjusted carrying value

\$

12.2

If, yes provide explanation:

13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [ ] No [ ]

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [ ] No [ ]

13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [ ] No [ ] N/A [ ]

14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [ X ] No [ ]

a.

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b.

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c.

Compliance with applicable governmental laws, rules and regulations;

d.

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e.

Accountability for adherence to the code.

14.11

If the response to 14.1 is No, please explain:

14.2

Has the code of ethics for senior managers been amended?

Yes [ X ] No [ ]

14.21

If the response to 14.2 is yes, provide information related to amendment(s).

The Code of Ethics for Senior Financial Officers was revised on 2/1/19 to limit the codes to U.S. subsidiaries of Cincinnati Financial Corporation.

14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [ ] No [ X ]

14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [ ] No [ X ]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2  Issuing or Confirming Bank Name	3  Circumstances That Can Trigger the Letter of Credit	4  Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [ X ] No [ ]
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [ X ] No [ ]
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [ X ] No [ ]

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [ ] No [ X ]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers\$

20.12 To stockholders not officers\$

20.13 Trustees, supreme or grand (Fraternal Only)\$
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers\$

20.22 To stockholders not officers\$

20.23 Trustees, supreme or grand (Fraternal Only)\$
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [ ] No [ X ]
- 21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others\$

21.22 Borrowed from others\$

21.23 Leased from others\$

21.24 Other\$
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [ ] No [ X ]
- 22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment\$

22.22 Amount paid as expenses\$

22.23 Other amounts paid\$
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ X ] No [ ]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$8,497,838

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03) Yes [ X ] No [ ]
- 24.02 If no, give full and complete information relating thereto
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [ ] No [ ] N/A [ X ]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs.\$
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs.\$
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [ ] No [ ] N/A [ X ]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [ ] No [ ] N/A [ X ]
- 24.09 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [ ] No [ ] N/A [ X ]

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	
24.102	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	
24.103	Total payable for securities lending reported on the liability page.	\$	

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03).

Yes [ X ] No [ ]

25.2	If yes, state the amount thereof at December 31 of the current year:	25.21 Subject to repurchase agreements	\$	
		25.22 Subject to reverse repurchase agreements	\$	
		25.23 Subject to dollar repurchase agreements	\$	
		25.24 Subject to reverse dollar repurchase agreements	\$	
		25.25 Placed under option agreements	\$	
		25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$	
		25.27 FHLB Capital Stock	\$	
		25.28 On deposit with states	\$	8,811,178
		25.29 On deposit with other regulatory bodies	\$	
		25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$	
		25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$	
		25.32 Other	\$	

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [ ] No [ X ]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes [ ] No [ ] N/A [ X ]

If no, attach a description with this statement.

LINES 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?

Yes [ ] No [ ]

26.4 If the response to 26.3 is YES, does the reporting entity utilize:

26.41 Special accounting provision of SSAP No. 108	Yes [ ] No [ ]
26.42 Permitted accounting practice	Yes [ ] No [ ]
26.43 Other accounting guidance	Yes [ ] No [ ]

26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

Yes [ ] No [ ]

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [ ] No [ X ]

27.2 If yes, state the amount thereof at December 31 of the current year.

\$

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [ X ] No [ ]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Fifth Third Bank	Fifth Third Center; Cincinnati, Ohio 45263

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?..... Yes [   ] No [ X ]

28.04 If yes, give full and complete information relating thereto:

1	2	3	4
Old Custodian	New Custodian	Date of Change	Reason

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1	2
Name of Firm or Individual	Affiliation

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [   ] No [ X ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [   ] No [ X ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? ..... Yes [   ] No [ X ]

29.2 If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
29.2999 - Total		

29.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	Date of Valuation
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	307,375,444	324,035,396	16,659,953
30.2 Preferred stocks .....			
30.3 Totals	307,375,444	324,035,396	16,659,953

30.4 Describe the sources or methods utilized in determining the fair values:  
The majority of fair market values are obtained from Interactive Data Corporation (IDC). For securities IDC is unable to price, the company looks to Bloomberg and uses a recent historical price method. If this cannot be determined the company uses outside brokers to analytically determine the price. ....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ X ] No [ ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ ] No [ X ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
For our private placement securities, the company receives the fair value price from an outside private placement manager's firm. For all other securities not priced by IDC the company looks to outside security brokers who are market makers in that type of security. ....

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ ] No [ X ]

32.2 If no, list exceptions:  
For securities not filed with the SVO, please see the attached on paged 15.5.1 .....

33. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:  
a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  
b. Issuer or obligor is current on all contracted interest and principal payments.  
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.  
Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [ X ]

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:  
a. The security was purchased prior to January 1, 2018.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.  
Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [ X ]

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:  
a. The shares were purchased prior to January 1, 2019.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.  
d. The fund only or predominantly holds bonds in its portfolio.  
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.  
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.  
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

OTHER

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....1,685,003

36.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
.....	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

37.1 Amount of payments for legal expenses, if any? .....\$ .....8,745

37.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
HUNTER WARFIELD INC .....	.....7,645
.....	.....

38.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....

38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....
.....	.....



GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force? .....

Yes [ ] No [ X ]

1.2

If yes, indicate premium earned on U. S. business only. ....

\$ \_\_\_\_\_

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? .....

\$ \_\_\_\_\_

1.31

Reason for excluding .....

.....

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ....

\$ \_\_\_\_\_

1.5

Indicate total incurred claims on all Medicare Supplement Insurance. ....

\$ \_\_\_\_\_

1.6

Individual policies:

Most current three years:

1.61

Total premium earned .....

\$ \_\_\_\_\_

1.62

Total incurred claims .....

\$ \_\_\_\_\_

1.63

Number of covered lives .....

.....

All years prior to most current three years

1.64

Total premium earned .....

\$ \_\_\_\_\_

1.65

Total incurred claims .....

\$ \_\_\_\_\_

1.66

Number of covered lives .....

.....

1.7

Group policies:

Most current three years:

1.71

Total premium earned .....

\$ \_\_\_\_\_

1.72

Total incurred claims .....

\$ \_\_\_\_\_

1.73

Number of covered lives .....

.....

All years prior to most current three years

1.74

Total premium earned .....

\$ \_\_\_\_\_

1.75

Total incurred claims .....

\$ \_\_\_\_\_

1.76

Number of covered lives .....

.....

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator .....

.....

2.2

Premium Denominator .....

.....

2.3

Premium Ratio (2.1/2.2) .....

0.000

.....

0.000

2.4

Reserve Numerator .....

.....

2.5

Reserve Denominator .....

88,803

2.6

Reserve Ratio (2.4/2.5) .....

0.000

.....

0.000

3.1

Does the reporting entity issue both participating and non-participating policies? .....

Yes [ ] No [ X ]

3.2

If yes, state the amount of calendar year premiums written on:

3.21

Participating policies .....

\$ \_\_\_\_\_

3.22

Non-participating policies .....

\$ \_\_\_\_\_

4.

For mutual reporting Entities and Reciprocal Exchanges Only:

4.1

Does the reporting entity issue assessable policies? .....

Yes [ ] No [ ]

4.2

Does the reporting entity issue non-assessable policies? .....

Yes [ ] No [ ]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders? .....

%

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. ....

\$ \_\_\_\_\_

5.

For Reciprocal Exchanges Only:

5.1

Does the Exchange appoint local agents? .....

Yes [ ] No [ ]

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation.....

Yes [ ] No [ ] N/A [ ]

5.22

As a direct expense of the exchange.....

Yes [ ] No [ ] N/A [ ]

5.3

What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? .....

.....

5.4

Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? .....

Yes [ ] No [ ]

5.5

If yes, give full information .....

.....

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GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?  
Protection is provided through several excess reinsurance contracts for workers' compensation coverage.

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.  
The company has engaged with JLT Re, who uses the catastrophe risk models from Risk Management Solutions and Applied Insurance Research to model potential maximum loss exposure.

6.3

What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  
The company has a catastrophe reinsurance program insuring losses to \$500 million in excess of \$100 million, plus co-participation by layer.

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?

Yes ☒ No ☐

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss.

7.1

Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)?

Yes ☐ No ☒

7.2

If yes, indicate the number of reinsurance contracts containing such provisions:

7.3

If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?

Yes ☐ No ☐

8.1

Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?

Yes ☐ No ☒

8.2

If yes, give full information

9.1

Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  
(c) Aggregate stop loss reinsurance coverage;  
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.

Yes ☐ No ☒

9.2

Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.

Yes ☐ No ☒

9.3

If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4

Except for transactions meeting the requirements of paragraph 37 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?

Yes ☐ No ☒

9.5

If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6

The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  
(a) The entity does not utilize reinsurance; or,  
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or  
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.

Yes ☐ No ☒  
Yes ☒ No ☐  
Yes ☐ No ☒

10.

If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?

Yes ☒ No ☐ N/A ☐

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? ..... Yes [ ] No [ X ]

11.2 If yes, give full information  
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:

12.11 Unpaid losses .....\$

12.12 Unpaid underwriting expenses (including loss adjustment expenses) .....\$

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds .....\$

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? ..... Yes [ ] No [ X ] N/A [ ]

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:

12.41 From ..... %

12.42 To ..... %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves , including unpaid losses under loss deductible features of commercial policies? ..... Yes [ ] No [ X ]

12.6 If yes, state the amount thereof at December 31 of the current year:

12.61 Letters of credit .....\$

12.62 Collateral and other funds.....\$

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): .....\$

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? ..... Yes [ ] No [ X ]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. ....

14.1 Is the company a cedant in a multiple cedant reinsurance contract? ..... Yes [ ] No [ X ]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
.....

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? ..... Yes [ ] No [ ]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? ..... Yes [ ] No [ ]

14.5 If the answer to 14.4 is no, please explain:  
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? ..... Yes [ ] No [ X ]

15.2 If yes, give full information  
.....

16.1 Does the reporting entity write any warranty business? ..... Yes [ ] No [ X ]  
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home .....					
16.12 Products .....					
16.13 Automobile .....					
16.14 Other*					

\* Disclose type of coverage:  
.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1

Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? .....

Yes [ ☐ ] No [ ☒ ]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11

Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance .....

\$ .....

17.12

Unfunded portion of Interrogatory 17.11 .....

\$ .....

17.13

Paid losses and loss adjustment expenses portion of Interrogatory 17.11.....

\$ .....

17.14

Case reserves portion of Interrogatory 17.11 .....

\$ .....

17.15

Incurred but not reported portion of Interrogatory 17.11 .....

\$ .....

17.16

Unearned premium portion of Interrogatory 17.11 .....

\$ .....

17.17

Contingent commission portion of Interrogatory 17.11 .....

\$ .....

18.1

Do you act as a custodian for health savings accounts? .....

Yes [ ☐ ] No [ ☒ ]

18.2

If yes, please provide the amount of custodial funds held as of the reporting date. ....

\$ .....

18.3

Do you act as an administrator for health savings accounts? .....

Yes [ ☐ ] No [ ☒ ]

18.4

If yes, please provide the balance of funds administered as of the reporting date. ....

\$ .....

19.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? .....

Yes [ ☒ ] No [ ☐ ]

19.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? .....

Yes [ ☐ ] No [ ☐ ]

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	205,336,220	202,835,882	216,600,602	220,097,059	205,486,152
2. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	30,498,659	23,774,767	23,293,615	20,707,669	16,417,839
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	142,459,673	126,573,678	119,268,026	105,401,780	91,115,297
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	919,179	1,029,681	448,385	206,353	68,210
5. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
6. Total (Line 35) .....	379,213,730	354,214,008	359,610,628	346,412,861	313,087,498
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
12. Total (Line 35) .....					
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8) .....					
14. Net investment gain or (loss) (Line 11) .....	14,983,880	17,912,605	23,877,115	13,725,933	14,683,301
15. Total other income (Line 15) .....	243	268			
16. Dividends to policyholders (Line 17) .....					
17. Federal and foreign income taxes incurred (Line 19) .....	1,810,047	1,638,437	2,844,691	2,632,242	2,454,628
18. Net income (Line 20) .....	13,174,076	16,274,436	21,032,424	11,093,691	12,228,673
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) .....	486,212,046	435,523,666	433,575,884	408,281,041	377,670,966
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1) .....					
20.2 Deferred and not yet due (Line 15.2) .....					
20.3 Accrued retrospective premiums (Line 15.3) .....					
21. Total liabilities excluding protected cell business (Page 3, Line 26) .....	49,481,415	37,423,319	41,289,227	48,382,266	41,167,715
22. Losses (Page 3, Line 1) .....					
23. Loss adjustment expenses (Page 3, Line 3) .....					
24. Unearned premiums (Page 3, Line 9) .....					
25. Capital paid up (Page 3, Lines 30 & 31) .....	3,750,000	3,750,000	3,750,000	3,750,000	3,750,000
26. Surplus as regards policyholders (Page 3, Line 37) .....	436,730,632	398,100,347	392,286,657	359,898,775	336,503,250
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11) .....	20,188,564	10,264,996	5,247,422	13,865,511	12,168,754
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital .....	436,730,632	398,100,347	392,286,657	359,898,775	336,503,250
29. Authorized control level risk-based capital .....	18,618,295	14,269,975	15,038,784	13,243,352	10,130,965
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0</b>					
30. Bonds (Line 1) .....	67.7	72.1	70.4	71.3	74.1
31. Stocks (Lines 2.1 & 2.2) .....	31.1	26.4	29.1	28.0	23.4
32. Mortgage loans on real estate (Lines 3.1 and 3.2) .....					
33. Real estate (Lines 4.1, 4.2 & 4.3) .....					
34. Cash, cash equivalents and short-term investments (Line 5) .....	1.2	1.5	0.5	0.8	2.6
35. Contract loans (Line 6) .....					
36. Derivatives (Line 7) .....					
37. Other invested assets (Line 8) .....				0.0	
38. Receivables for securities (Line 9) .....					
39. Securities lending reinvested collateral assets (Line 10) .....					
40. Aggregate write-ins for invested assets (Line 11) .....					
41. Cash, cash equivalents and invested assets (Line 12) .....	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1) .....					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1) .....					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1) .....					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10) .....					
46. Affiliated mortgage loans on real estate .....					
47. All other affiliated .....					
48. Total of above Lines 42 to 47 .....					
49. Total Investment in Parent included in Lines 42 to 47 above .....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	26,334,885	(9,515,650)	13,077,463	12,297,474	(5,929,819)
52. Dividends to stockholders (Line 35) .....					
53. Change in surplus as regards policyholders for the year (Line 38) .....	38,630,285	5,813,690	32,387,882	23,395,525	6,282,657
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	103,112,526	116,121,759	100,623,127	88,410,815	95,324,902
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	13,688,104	12,005,879	11,937,595	11,879,542	8,485,239
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	66,882,877	60,050,789	65,474,483	59,026,756	39,713,891
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
59. Total (Line 35) .....	183,683,506	188,178,427	178,035,204	159,317,113	143,524,032
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
65. Total (Line 35) .....					
<b>Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0</b>					
66. Premiums earned (Line 1) .....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2) .....					
68. Loss expenses incurred (Line 3) .....					
69. Other underwriting expenses incurred (Line 4) .....					
70. Net underwriting gain (loss) (Line 8) .....					
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....					
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....					
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .....					
<b>One Year Loss Development (\$000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11) .....					
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0).....					
<b>Two Year Loss Development (\$000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .....					
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0) .....					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? .....

Yes [     ] No [     ]

If no, please explain: .....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI CASUALTY COMPANY

**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**

**SCHEDULE P - PART 1 - SUMMARY**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX	XXX	XXX	6,491	6,491	390	390	352	352			XXX
2. 2010.....	156,890	156,890		104,396	104,396	8,215	8,215	10,263	10,263			XXX
3. 2011.....	174,970	174,970		106,397	106,397	7,683	7,683	13,329	13,329			XXX
4. 2012.....	261,587	261,587		139,272	139,272	11,125	11,125	16,021	16,021			XXX
5. 2013.....	299,461	299,461		132,770	132,770	12,120	12,120	15,611	15,611			XXX
6. 2014.....	307,591	307,591		163,719	163,719	15,416	15,416	17,189	17,189			XXX
7. 2015.....	305,080	305,080		116,401	116,401	14,715	14,715	15,940	15,940			XXX
8. 2016.....	329,327	329,327		163,086	163,086	13,010	13,010	17,999	17,999			XXX
9. 2017.....	353,418	353,418		131,058	131,058	10,897	10,897	17,846	17,846			XXX
10. 2018.....	359,390	359,390		143,717	143,717	7,348	7,348	16,064	16,064			XXX
11. 2019.....	363,164	363,164		68,751	68,751	2,655	2,655	9,622	9,622			XXX
12. Totals	XXX	XXX	XXX	1,276,058	1,276,058	103,574	103,574	150,237	150,237			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	42,152	42,152	86,421	86,421			4,582	4,582					XXX
2. 2010.....	5,581	5,581	8,084	8,084			366	366					XXX
3. 2011.....	3,130	3,130	7,476	7,476			466	466					XXX
4. 2012.....	3,564	3,564	9,408	9,408			933	933	4	4			XXX
5. 2013.....	15,055	15,055	7,360	7,360			1,790	1,790	61	61			XXX
6. 2014.....	13,021	13,021	7,640	7,640			2,579	2,579	700	700			XXX
7. 2015.....	18,567	18,567	15,496	15,496			4,112	4,112	1,898	1,898			XXX
8. 2016.....	19,353	19,353	15,622	15,622			7,204	7,204	2,471	2,471			XXX
9. 2017.....	40,309	40,309	26,744	26,744			12,869	12,869	3,170	3,170			XXX
10. 2018.....	45,452	45,452	37,899	37,899			20,078	20,078	4,317	4,317			XXX
11. 2019.....	94,213	94,213	61,498	61,498			27,058	27,058	10,906	10,906			XXX
12. Totals	300,398	300,398	283,648	283,648			82,037	82,037	23,527	23,527			XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....	136,905	136,905		87.3	87.3						
3. 2011.....	138,481	138,481		79.1	79.1						
4. 2012.....	180,327	180,327		68.9	68.9						
5. 2013.....	184,768	184,768		61.7	61.7						
6. 2014.....	220,265	220,265		71.6	71.6						
7. 2015.....	187,129	187,129		61.3	61.3						
8. 2016.....	238,744	238,744		72.5	72.5						
9. 2017.....	242,893	242,893		68.7	68.7						
10. 2018.....	274,875	274,875		76.5	76.5						
11. 2019.....	274,703	274,703		75.6	75.6						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

Schedule P - Part 2 - Summary  
**N O N E**

Schedule P - Part 3 - Summary  
**N O N E**

Schedule P - Part 4 - Summary  
**N O N E**



SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories										
States, Etc.	1	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9	
		2	3							
	Active Status (a)	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)	
1. Alabama	AL	L	10,705,765	10,666,058		4,829,912	2,549,461	8,288,771	895	
2. Alaska	AK	L								
3. Arizona	AZ	L	11,940,073	9,970,563		3,238,279	3,845,797	8,530,326	267	
4. Arkansas	AR	L	6,907,664	7,041,606		3,641,693	3,071,980	5,835,458	805	
5. California	CA	L	1,940,100	1,490,920		156,437	601,082	1,038,699	20	
6. Colorado	CO	L	2,249,328	2,260,878		1,113,573	1,913,661	8,131,598	78	
7. Connecticut	CT	L	1,492,584	1,443,494		340,230	573,812	1,542,860	9	
8. Delaware	DE	L	3,607,438	3,518,241		820,234	1,674,661	3,960,652	478	
9. District of Columbia	DC	L	262,701	197,478		201,723	(15,609)	1,195,166		
10. Florida	FL	L	1,810,733	1,513,528		323,613	114,696	3,221,512	43	
11. Georgia	GA	L	19,646,466	19,748,901		17,952,303	14,794,468	24,481,172	1,441	
12. Hawaii	HI	L	3,785	4,438			754	1,967		
13. Idaho	ID	L	4,595,476	3,941,405		532,803	4,949,778	7,584,674	330	
14. Illinois	IL	L	29,646,782	28,027,246		18,448,674	13,408,311	96,668,878	1,083	
15. Indiana	IN	L	23,068,876	21,364,993		11,922,325	10,956,014	39,548,578	1,190	
16. Iowa	IA	L	5,758,323	5,745,879		5,180,403	(390,384)	13,578,175	367	
17. Kansas	KS	L	6,107,882	5,981,786		3,586,288	3,269,220	6,343,655	1,363	
18. Kentucky	KY	L	10,497,894	9,340,112		4,160,282	4,860,017	9,604,006	993	
19. Louisiana	LA	L	146,189	107,940		44,348	(365)	109,217		
20. Maine	ME	L	24,958	52,599		143,582	156,467	36,854		
21. Maryland	MD	L	5,374,228	5,444,649		3,004,265	1,265,739	14,926,573	337	
22. Massachusetts	MA	L	540,720	139,953		19,802	71,990	155,315		
23. Michigan	MI	L	20,751,739	20,245,194		8,288,747	11,078,581	38,039,036	1,388	
24. Minnesota	MN	L	9,333,129	8,867,947		3,349,536	4,413,350	11,111,978	315	
25. Mississippi	MS	L	193,932	192,790		6,226	(8,287)	277,059		
26. Missouri	MO	L	15,704,425	15,352,130		7,044,023	10,282,706	25,437,496	1,412	
27. Montana	MT	L	2,566,663	2,508,433		1,624,215	2,174,436	1,792,963	198	
28. Nebraska	NE	L	5,130,481	5,928,621		4,343,305	4,198,995	8,894,328	126	
29. Nevada	NV	L	166,223	142,441		12,244	60,674	79,407		
30. New Hampshire	NH	L	1,118,565	1,434,405		593,137	285,027	2,877,257	131	
31. New Jersey	NJ	L	1,079,743	1,027,058		632,659	1,274,292	1,604,988	33	
32. New Mexico	NM	L	2,837,168	2,468,924		1,064,024	1,925,556	2,683,342	45	
33. New York	NY	L	4,600,018	4,011,971		1,722,214	1,035,460	6,027,421	198	
34. North Carolina	NC	L	18,287,791	18,520,932		12,955,277	11,870,669	29,608,385	1,297	
35. North Dakota	ND	L	844,725	889,995		70,806	367,169	790,931	33	
36. Ohio	OH	L	40,204,340	36,841,179		16,353,906	27,569,967	32,795,593	7,656	
37. Oklahoma	OK	L	261,901	286,250		33,465	57,855	532,111		
38. Oregon	OR	L	11,435,462	10,789,499		2,549,425	5,998,905	9,473,764	101	
39. Pennsylvania	PA	L	32,902,765	32,788,706		14,149,152	14,901,366	50,183,445	2,833	
40. Rhode Island	RI	L	350,039	149,901		29,804	13,115	147,410		
41. South Carolina	SC	L	3,301,438	3,704,185		1,844,471	1,807,243	6,890,882	149	
42. South Dakota	SD	L	1,291,961	1,185,270		824,382	1,247,431	2,712,560	26	
43. Tennessee	TN	L	10,103,223	10,021,759		4,059,655	2,264,898	16,199,797	603	
44. Texas	TX	L	10,449,897	10,407,815	178,117	3,154,223	4,428,618	11,337,142	82	
45. Utah	UT	L	5,913,667	5,198,675		2,519,472	2,233,452	5,687,018	292	
46. Vermont	VT	L	2,960,170	3,147,672		1,366,286	853,439	6,070,938	195	
47. Virginia	VA	L	14,563,712	14,312,760		6,775,186	12,079,099	27,983,107	863	
48. Washington	WA	L	3,042,700	2,646,994		363,534	697,338	1,232,720	56	
49. West Virginia	WV	L	2,162,947	2,168,811		3,493,791	3,633,912	2,683,797	168	
50. Wisconsin	WI	L	10,905,495	9,593,488		4,421,574	8,896,581	18,364,470	592	
51. Wyoming	WY	L	421,332	327,630		45,593	85,648	193,288	55	
52. American Samoa	AS	N								
53. Guam	GU	N								
54. Puerto Rico	PR	N								
55. U.S. Virgin Islands	VI	N								
56. Northern Mariana Islands	MP	N								
57. Canada	CAN	N								
58. Aggregate other alien	OT	XXX								
59. Totals	XXX		379,213,614	363,164,100	178,117	183,351,102	203,399,045	576,496,736	28,546	
DETAILS OF WRITE-INS										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX									
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX									

(a) Active Status Counts:  
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....51 R - Registered - Non-domiciled RRGs.....  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... Q - Qualified - Qualified or accredited reinsurer. ....  
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus business in the state .....6  
lines in the state of domicile.....  
(b) Explanation of basis of allocation of premiums by states, etc.  
Premiums received on all classes are booked to the state in which the risk is located.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

	Domiciliary Location	FEIN	NAIC Co. Code
Cincinnati Financial Group (Parent)	OH	31-0746871	
CFC Investment Company	OH	31-0790388	
The Cincinnati Insurance Company (Insurer)	OH	31-0542366	10677
The Cincinnati Casualty Company (Insurer)	OH	31-0826946	28665
The Cincinnati Indemnity Company (Insurer)	OH	31-1241230	23280
The Cincinnati Life Insurance Company (Insurer)	OH	31-1213778	76236
CLIC District Invesments I, LLC	OH	82-5173506	
CLIC BP Investments B, LLC	OH	81-1908205	
CLIC BP Investments H, LLC	OH	81-4633687	
CLIC WSD Investments I, LLC	OH	82-1587731	
CLIC Uptown Investments I, LLC	OH	82-3254447	
CLIC DS Investments I, LLC	OH	81-3640769	
The Cincinnati Specialty Underwriters Insurance Company (Insurer)	DE	65-1316588	13037
CIC Uptown Investments I, LLC	OH	83-1627569	
CIC Danamont Invesments I, LLC	OH	61-1936938	
CIC Icon Investments I, LLC	OH	32-0613415	
CSU Producer Resources, Inc	OH	11-3823180	
Cincinnati Global Underwriting LTD.	GBR	98-1489371	
Cincinnati Global Dedicated No 1 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 2 Limited (Insurer)*	GBR		
Cincinnati Global Dedicated No 3 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 4 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 5 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 6 Limited (Insurer)	GBR		
Cincinnati Global Underwriting Agency Limited	GBR		
Cincinnati Global Underwriting Services Limited	GBR		

\* Participant in Lloyd's Syndicate 0318



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