



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF MARCH 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
THE CINCINNATI CASUALTY COMPANY

NAIC Group Code 0244 (Current) 0244 (Prior) NAIC Company Code 28665 Employer's ID Number 31-0826946
Organized under the Laws of OHIO, State of Domicile or Port of Entry OH
Country of Domicile United States of America
Incorporated/Organized 12/27/1972 Commenced Business 03/31/1973
Statutory Home Office 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, US 45014-5141
Main Administrative Office 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, US 45014-5141
Mail Address P.O. BOX 145496, CINCINNATI, OH, US 45250-5496
Internet Website Address WWW.CINFIN.COM
Statutory Statement Contact ANDREW SCHNELL, 513-870-2000

OFFICERS

Table with 2 columns: Officer Name and Title. Includes CHAIRMAN, CHIEF EXECUTIVE OFFICER STEVEN JUSTUS JOHNSTON; SENIOR VICE PRESIDENT, TREASURER THERESA ANN HOFFER; CHIEF FINANCIAL OFFICER, EXECUTIVE VICE PRESIDENT MICHAEL JAMES SEWELL; PRESIDENT STEPHEN MICHAEL SPRAY.

OTHER

Table with 3 columns: Name and Title. Includes TERESA CURRIN CRACAS, CHIEF RISK OFFICER, EXECUTIVE VICE PRESIDENT; ANGELA OSSELLO DELANEY, SENIOR VICE PRESIDENT; DONALD JOSEPH DOYLE JR, SENIOR VICE PRESIDENT; LISA ANNE LOVE, CHIEF LEGAL OFFICER, EXECUTIVE VICE PRESIDENT, CORPORATE SECRETARY; SEAN MICHAEL GIVLER, SENIOR VICE PRESIDENT; JOHN SCOTT KELLINGTON, CHIEF INFORMATION OFFICER, EXECUTIVE VICE PRESIDENT; ANTHONY STEVEN SOLORIA, CHIEF INVESTMENT OFFICER, SENIOR VICE PRESIDENT; WILLIAM HAROLD VAN DEN HEUVEL, SENIOR VICE PRESIDENT.

DIRECTORS OR TRUSTEES

Table with 3 columns: Name. Includes THOMAS JEFFREY AARON, JOHN DIRK DEBBINK, SEAN MICHAEL GIVLER, LISA ANNE LOVE, MARC JON SCHAMBOW, ANTHONY STEVEN SOLORIA, WILLIAM HAROLD VAN DEN HEUVEL; NANCY CUNNINGHAM BENACCI, ANGELA OSSELLO DELANEY, STEVEN JUSTUS JOHNSTON, JILL PRATT MEYER, CHARLES ODELL SCHIFF, STEPHEN MICHAEL SPRAY, LARRY RUSSEL WEBB; TERESA CURRIN CRACAS, DONALD JOSEPH DOYLE JR, JOHN SCOTT KELLINGTON, DAVID PAUL OSBORN, MICHAEL JAMES SEWELL, JOHN FREDRICK STEELE JR.

State of OHIO
County of BUTLER SS:

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.

Signatures of Stephen M. Spray (Chief Executive Officer, President), Michael J. Sewell (Chief Financial Officer, Executive Vice President), and Theresa A. Hoffer (Senior Vice President, Treasurer).

Subscribed and sworn to before me this 15th day of May 2024 by Stephen M. Spray and Michael J. Sewell.

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....



Tiffany L. McAbee
Notary Public, State of Ohio
My Commission Expires May 15, 2028

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	372,945,318		372,945,318	363,623,975
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks	182,834,757		182,834,757	170,549,141
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens.....				
4. Real estate:				
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 (\$ 3,543,310), cash equivalents (\$) and short-term investments (\$)	3,543,310		3,543,310	5,219,310
6. Contract loans (including \$ premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	559,323,385		559,323,385	539,392,426
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	4,145,110		4,145,110	4,770,533
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 (including \$ earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	49,121,429		49,121,429	50,129,602
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts	16,748,708		16,748,708	8,899,801
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				81,357
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	1,092,595	1,092,595		
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	35,946,089		35,946,089	28,297,410
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)	666,377,316	1,092,595	665,284,721	631,571,128
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	666,377,316	1,092,595	665,284,721	631,571,128
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 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 through 2503 plus 2598)(Line 25 above)				

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$)		
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	7,049	5,050
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ 110,824 on realized capital gains (losses))	608,568	
7.2 Net deferred tax liability	27,815,508	25,292,975
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$590,796,827 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)	100,913,288	86,139,604
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others	3,101,209	2,621,663
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		2,810
20. Derivatives		
21. Payable for securities	1,500,000	
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	14,576	142,170
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	133,960,199	114,204,273
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	133,960,199	114,204,273
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)	509,574,523	495,616,856
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)	531,324,523	517,366,856
38. Totals (Page 2, Line 28, Col. 3)	665,284,721	631,571,128
DETAILS OF WRITE-INS		
2501. Accounts Payable Other	14,576	142,170
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	14,576	142,170
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 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 through 3203 plus 3298)(Line 32 above)		

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 323,917,203)	271,268,332	193,983,597	879,826,878
1.2 Assumed (written \$ 13)	13	32	109
1.3 Ceded (written \$ 323,917,216)	271,268,345	193,983,628	879,826,987
1.4 Net (written \$)			
DEDUCTIONS:			
2. Losses incurred (current accident year \$):			
2.1 Direct	160,949,090	159,813,339	608,599,362
2.2 Assumed	13,146	11,350	(201,866)
2.3 Ceded	160,962,236	159,824,690	608,397,496
2.4 Net			
3. Loss adjustment expenses incurred			
4. Other underwriting expenses incurred			
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 (loss) (Line 1 minus Line 6 + Line 7)			
INVESTMENT INCOME			
9. Net investment income earned	4,461,722	4,090,436	17,137,621
10. Net realized capital gains (losses) less capital gains tax of \$ 133,670	502,869	(505,680)	(1,549,895)
11. Net investment gain (loss) (Lines 9 + 10)	4,964,592	3,584,757	15,587,727
OTHER INCOME			
12. Net gain or (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			57
15. Total other income (Lines 12 through 14)			57
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	4,964,592	3,584,757	15,587,783
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)	4,964,592	3,584,757	15,587,783
19. Federal and foreign income taxes incurred	631,659	549,199	2,400,762
20. Net income (Line 18 minus Line 19)(to Line 22)	4,332,932	3,035,558	13,187,022
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	517,366,856	494,639,823	494,639,823
22. Net income (from Line 20)	4,332,932	3,035,558	13,187,022
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ 2,518,940	9,476,012	(1,543,680)	8,664,879
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	(3,593)	102,983	214,850
27. Change in nonadmitted assets	152,316	108,443	660,282
28. Change in provision for reinsurance			
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			
37. Aggregate write-ins for gains and losses in surplus			
38. Change in surplus as regards policyholders (Lines 22 through 37)	13,957,667	1,703,304	22,727,032
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	531,324,523	496,343,128	517,366,856
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)			
1401. Miscellaneous Income			57
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)			57
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	14,773,684	6,216,656	23,933,431
2. Net investment income	5,429,985	4,813,934	17,974,688
3. Miscellaneous income			57
4. Total (Lines 1 to 3)	20,203,669	11,030,590	41,908,176
5. Benefit and loss related payments	6,840,733	13,355,067	15,332,454
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 \$ 5,701 tax on capital gains (losses)	75,405	31,243	2,357,578
10. Total (Lines 5 through 9)	6,916,138	13,386,310	17,690,032
11. Net cash from operations (Line 4 minus Line 10)	13,287,532	(2,355,720)	24,218,144
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	4,660,000	7,855,000	20,455,000
12.2 Stocks	1,479,966		346,477
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	1,500,000		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	7,639,966	7,855,000	20,801,477
13. Cost of investments acquired (long-term only):			
13.1 Bonds	14,306,160	14,274,827	39,175,688
13.2 Stocks	1,150,116		
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	15,456,276	14,274,827	39,175,688
14. Net increase (or decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(7,816,310)	(6,419,827)	(18,374,210)
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)	(7,147,222)	7,418,540	(7,879,858)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(7,147,222)	7,418,540	(7,879,858)
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)	(1,676,000)	(1,357,007)	(2,035,924)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	5,219,310	7,255,234	7,255,234
19.2 End of period (Line 18 plus Line 19.1)	3,543,310	5,898,227	5,219,310

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

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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 as of March 31, 2024 and December 31, 2023:

	SSAP #	F/S Page	F/S Line #	2024	2023
NET INCOME					
(1) Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 4,332,932	\$ 13,187,022
(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	\$ 4,332,932	\$ 13,187,022
SURPLUS					
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 531,324,523	\$ 517,366,856
(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	\$ 531,324,523	\$ 517,366,856

B. Use of Estimates in the Preparation of the Financial Statements – No significant change

C. Accounting Policies – No significant change

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 – No significant change

3. Business Combinations and Goodwill – Not applicable

4. Discontinued Operations – Not applicable

5. Investments – No significant change

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

7. Investment Income – No significant change

8. Derivative Instruments – Not applicable

9. Income Taxes

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

1.

	March 31, 2024		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 229,445	\$ 0	\$ 229,445
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	229,445	0	229,445
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	229,445	0	229,445
(f) Deferred Tax Liabilities	\$ 254,748	\$ 27,790,205	\$ 28,044,953
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (25,303)	\$ (27,790,205)	\$ (27,815,508)

	December 31, 2023		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 261,431	\$ 0	\$ 261,431
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	261,431	0	261,431
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	261,431	0	261,431
(f) Deferred Tax Liabilities	\$ 285,491	\$ 25,268,915	\$ 25,554,406
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (24,060)	\$ (25,268,915)	\$ (25,292,975)

	Change		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ (31,986)	\$ 0	\$ (31,986)
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	(31,986)	0	(31,986)
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	(31,986)	0	(31,986)
(f) Deferred Tax Liabilities	\$ (30,743)	\$ 2,521,290	\$ 2,490,547
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (1,243)	\$ (2,521,290)	\$ (2,522,533)

STATEMENT AS OF MARCH 31, 2024 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

2.

	March 31, 2024		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 124,554	\$ 0	\$ 124,554
(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)	21,586	0	21,586
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	21,586	0	21,586
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	79,698,678
(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	83,305	0	83,305
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ 229,445	\$ 0	\$ 229,445

	December 31, 2023		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 190,445	\$ 0	\$ 190,445
(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)	47,410	0	47,410
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	47,410	0	47,410
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	77,605,028
(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	23,576	0	23,576
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ 261,431	\$ 0	\$ 261,431

	Change		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ (65,891)	\$ 0	\$ (65,891)
(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)	(25,824)	0	(25,824)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	(25,824)	0	(25,824)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	2,093,650
(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	59,729	0	59,729
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ (31,986)	\$ 0	\$ (31,986)

3.

	2024 Percentage	2023 Percentage
(a)Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	2246%	2246%
(b)Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 above	\$ 517,366,856	\$ 517,366,856

4.

	March 31, 2024		
	Ordinary	Capital	Total
Impact of Tax Planning Strategies			
(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)	\$ 229,445	\$ 0	\$ 229,445
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)	\$ 229,445	\$ 0	\$ 229,445
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.			

STATEMENT AS OF MARCH 31, 2024 OF THE CINCINNATI CASUALTY COMPANY

NOTES TO FINANCIAL STATEMENTS

Impact of Tax Planning Strategies	December 31, 2023		
	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)	\$ 261,431	\$ 0	\$ 261,431
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)	\$ 261,431	\$ 0	\$ 261,431
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)	\$ (31,986)	\$ 0	\$ (31,986)
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)	\$ (31,986)	\$ 0	\$ (31,986)
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

C. Current Tax and Change in Deferred Tax

1. Current income tax:

	March 31, 2024	December 31, 2023	Change
(a) Federal	\$ 600,355	\$ 2,279,188	\$ (1,678,833)
(b) Foreign	31,305	121,574	(90,269)
(c) Subtotal	631,660	2,400,762	(1,769,102)
(d) Federal income tax on capital gains/(losses)	133,670	(125,445)	259,115
(e) Utilization of capital loss carryforwards	0	0	0
(f) Other	0	0	0
(g) Federal income taxes incurred	\$ 765,330	\$ 2,275,317	\$ (1,509,987)

2. Deferred tax assets:

	March 31, 2024	December 31, 2023	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	229,445	261,431	(31,986)
5. Other deferred tax assets	0	0	0
99. Subtotal	\$ 229,445	\$ 261,431	\$ (31,986)
(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))	\$ 229,445	\$ 261,431	\$ (31,986)
(e) Capital			
1. Investments	\$ 0	\$ 0	\$ 0
2. Unrealized loss on investments	0	0	0
99. Subtotal	\$ 0	\$ 0	\$ 0
(f) Statutory valuation allowance adjustment	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))	\$ 229,445	\$ 261,431	\$ (31,986)

3. Deferred tax liabilities:

	March 31, 2024	December 31, 2023	Change
(a) Ordinary			
1. Commission expense	\$ 0	\$ 0	\$ 0
2. Other, net	254,748	285,491	(30,743)
99. Subtotal	\$ 254,748	\$ 285,491	\$ (30,743)
(b) Capital			
1. Investment	\$ 1,421,015	\$ 1,418,665	\$ 2,350
2. Unrealized gain on investments	26,369,190	23,850,250	2,518,940
99. Subtotal	\$ 27,790,205	\$ 25,268,915	\$ 2,521,290
(c) Deferred tax liabilities (3(a)99+3(b)99)	\$ 28,044,953	\$ 25,554,406	\$ 2,490,547
4. Net deferred tax assets/(liabilities) (2(i)-3(c)):	\$(27,815,508)	\$(25,292,975)	\$ (2,522,533)

NOTES TO FINANCIAL STATEMENTS

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):

	March 31, 2024	December 31, 2023	Change
Total deferred tax assets	\$ 229,445	\$ 261,431	\$ (31,986)
Total deferred tax liabilities	28,044,953	25,554,406	2,490,547
Net deferred tax asset/(liability)	\$(27,815,508)	\$(25,292,975)	\$ (2,522,533)
Tax effect of unrealized (gains)/losses			2,518,940
Change in net deferred income tax (charge)/benefit			\$ (3,593)
	December 31, 2023	December 31, 2022	Change
Total deferred tax assets	\$ 261,431	\$ 400,090	\$ (138,659)
Total deferred tax liabilities	25,554,406	23,604,594	1,949,812
Net deferred tax asset/(liability)	\$(25,292,975)	\$(23,204,504)	\$ (2,088,471)
Tax effect of unrealized (gains)/losses			2,303,322
Change in net deferred income tax (charge)/benefit			\$ 214,851

The Inflation Reduction Act (Tax Act) was enacted on August 16, 2022. Along with other changes, the Tax Act created a new corporate alternative minimum tax (CAMT) for certain corporations based on 15% of adjusted financial statement income for the taxable year. The effective date of this enacted legislation was January 1, 2023. This reporting entity is a member of a tax-controlled group of corporations that is an applicable corporation for purposes of the CAMT. This reporting entity is included in a consolidated Federal income tax return with other members of the tax-controlled group and is a party to a tax sharing agreement that is in effect for 2024. Pursuant to the terms of the tax sharing agreement, this reporting entity is excluded from charges for any portion of the group's CAMT and is not allocated any portion of the group's utilization of CAMT credit carryover.

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 March 31, 2024		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 5,098,262	\$ 1,070,635	21.00 %
Net tax-exempt interest	(1,245,495)	(261,554)	(5.13)%
Net dividends received deduction (DRD)	(340,005)	(71,401)	(1.40)%
Other items permanent, net	15	3	0.00 %
DRD on accrued	(3,552)	(746)	(0.02)%
Total	\$ 3,509,225	\$ 736,937	14.45 %
Federal income tax expense incurred/(benefit)	\$ 3,007,905	\$ 631,660	12.39 %
Tax on capital gains/(losses)	636,524	133,670	2.62 %
Change in nonadmitted excluding deferred tax asset	(152,314)	(31,986)	(0.63)%
Change in net deferred income tax charge/(benefit)	17,110	3,593	0.07 %
Total statutory income taxes incurred/(benefit)	\$ 3,509,225	\$ 736,937	14.45 %

Description	As of December 31, 2023		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 15,462,338	\$ 3,247,091	21.00 %
Net tax-exempt interest	(4,989,395)	(1,047,773)	(6.78)%
Net dividends received deduction (DRD)	(1,315,933)	(276,346)	(1.78)%
Other items permanent, net	10	2	0.00 %
DRD on accrued	(5,557)	(1,167)	(0.01)%
Total	\$ 9,151,463	\$ 1,921,807	12.43 %
Federal income tax expense incurred/(benefit)	\$ 11,432,200	\$ 2,400,762	15.53 %
Tax on capital gains/(losses)	(597,357)	(125,445)	(0.81)%
Change in nonadmitted excluding deferred tax asset	(660,280)	(138,659)	(0.90)%
Change in net deferred income tax charge/(benefit)	(1,023,100)	(214,851)	(1.39)%
Total statutory income taxes incurred/(benefit)	\$ 9,151,463	\$ 1,921,807	12.43 %

E. Operating Loss and Tax Credit Carryforwards

At March 31, 2024 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
2024	\$ 600,355	\$ 133,670	\$ 734,025
2023	2,279,188	0	2,279,188
2022	0	25,693	25,693
Total	\$ 2,879,543	\$ 159,363	\$ 3,038,906

At March 31, 2024 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,

NOTES TO FINANCIAL STATEMENTS

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

As of March 31, 2024 the Company did not have tax contingencies under the principles of SSAP No. 5R, *Liabilities, Contingencies and Impairments of Assets*.

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 2019 and earlier. In 2022, the IRS began its examination of the tax years ended December 31, 2020 and December 31, 2021. At this time no adjustments have been proposed. The statute of limitations for state income tax purposes has closed for tax years ended December 31, 2020 and earlier.

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

I. 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 – No significant change

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

C. Transactions with Related Party Who Are Not Reported on Schedule Y – Not applicable

D. Amounts Due to or from Related Parties

At March 31, 2024, the Company reported \$35,946,089 due from the Parent Company, The Cincinnati Insurance Company. The terms of the settlement require that these amounts be settled within 30 days.

E. Management, Service Contracts, Cost Sharing Arrangements – No significant change

F. Guarantees or Contingencies for Related Parties – Not applicable

G. Nature of Relationships that Could Affect Operations – No significant change

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 or SSAP No. 48 Entity Loss Tracking – Not applicable

11. Debt – Not applicable**12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans – No significant change****13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

A. Shares authorized, issued and outstanding – No significant change

B. Preferred stock issues – Not applicable

C. Dividend restrictions – No significant change

D. Dividends paid – Not applicable

E. Portion of profits that may be paid as ordinary dividends – No significant change

F. Surplus restrictions – Not applicable

G. Mutual Surplus Advances – Not applicable

H. Company Stock Held for Special Purposes – Not applicable

NOTES TO FINANCIAL STATEMENTS

- I. Changes in Special Surplus Funds – Not applicable
- J. The portion of unassigned funds (surplus) represented or (reduced) by cumulative unrealized gains/(losses) are \$125,567,570 offset by deferred tax of \$26,369,190 for a net balance of \$99,198,380.
- K. Surplus Notes – Not applicable
- L. Restatement of Quasi-Reorganization – Not applicable
- M. Date of Quasi-Reorganization – Not applicable

14. Liabilities, Contingencies and Assessments – No significant change

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.

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.

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.

NOTES TO FINANCIAL STATEMENTS

The Company primarily bases fair value estimates for investments in equity and fixed-maturity securities on quoted 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 a price comparison report that includes prices from multiple industry leading pricing sources. 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.

The following table presents the Company's assets measured and reported at fair value by level within the fair value hierarchy as of March 31, 2024:

Assets at Fair Value:

	Level 1	Level 2	Level 3	Net Asset Value (NAV) Included in Level 2	Total
Bonds	\$ 0	\$ 3,250,514	\$ 0	\$ 0	\$ 3,250,514
Common Stock	182,834,757	0	0	0	182,834,757
Total	\$182,834,757	\$ 3,250,514	\$ 0	\$ 0	\$ 186,085,271

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.
5. Derivative Assets and Liabilities – Not applicable

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	\$353,159,626	\$372,945,318	\$ 1,887,287	\$351,272,339	\$ 0	\$ 0	\$ 0
Common Stock	182,834,757	182,834,757	182,834,757	0	0	0	0

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

E. Nature and Risk of Investments Measured Using NAV Practical Expedient – Not applicable

21. Other Items – No significant change

22. Subsequent Events

The Company has considered subsequent events through May 15, 2024, the date of issuance of these statutory financial statements. There were no events occurring subsequent to March 31, 2024, which may have a material effect on the Company.

23. Reinsurance – No significant change

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

29. Participating Policies – Not applicable

30. Premium Deficiency Reserves – No significant change

31. High Deductibles – Not applicable

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses – No significant change

33. Asbestos and Environmental Reserves – No significant change

34. Subscriber Savings Accounts – Not applicable

35. Multiple Peril Crop Insurance – Not applicable

36. Financial Guaranty Insurance – Not applicable

37. Other – No significant change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 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 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? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [X] No []
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0000020286
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 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 | 2 | 3 |
|----------------|-------------------|-------------------|
| Name of Entity | NAIC Company Code | State of Domicile |
| | | |
5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2019
- 6.2 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. 12/31/2019
- 6.3 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). 05/28/2021
- 6.4 By what department or departments?
Ohio
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 7.1 Has this 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]
- 7.2 If yes, give full information:
.....
- 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

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

GENERAL INTERROGATORIES

- 9.1 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.
- 9.11 If the response to 9.1 is No, please explain:

- 9.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 35,946,089

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
- 11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]
- 14.2 If yes, please complete the following:
- | | 1 | 2 |
|---|---|--|
| | Prior Year-End
Book/Adjusted
Carrying Value | Current Quarter
Book/Adjusted
Carrying Value |
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$ | \$ |
| 14.24 Short-Term Investments | \$ | \$ |
| 14.25 Mortgage Loans on Real Estate | \$ | \$ |
| 14.26 All Other | \$ | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$ | \$ |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
 If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$
- 16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
- 16.3 Total payable for securities lending reported on the liability page. \$

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY
GENERAL INTERROGATORIES

17. 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 [] No []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

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

- 17.2 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 Name(s)	2 Location(s)	3 Complete Explanation(s)

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No []

- 17.4 If yes, give full information relating thereto:

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

- 17.5 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 Name of Firm or Individual	2 Affiliation

- 17.5097 For those firms/individuals listed in the table for Question 17.5, 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 []

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No []

- 17.6 For those firms or individuals listed in the table for 17.5 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

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

- 18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for 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 []

20. 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 []

21. 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 []

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [X] N/A []
 If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]
 If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]

3.2 If yes, give full and complete information thereto.

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? Yes [] No [X]

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL										

5. Operating Percentages:

5.1 A&H loss percent %

5.2 A&H cost containment percent %

5.3 A&H expense percent excluding cost containment expenses %

6.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

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

6.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

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

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

7.1 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 []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
NONE						

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid		
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date	
1. Alabama	AL	L	9,783,247	7,372,636	7,900,704	4,668,657	19,159,276	17,650,162
2. Alaska	AK	L						
3. Arizona	AZ	L	9,507,694	5,167,817	1,150,322	1,423,724	18,187,475	17,141,220
4. Arkansas	AR	L	6,411,511	3,542,580	1,599,053	2,906,395	8,745,437	12,617,574
5. California	CA	L	157,020	249,364	164,378	203,464	3,268,369	2,708,369
6. Colorado	CO	L	1,115,443	592,010	109,084	238,352	1,854,278	2,456,549
7. Connecticut	CT	L	3,615,718	1,281,581	533,674	232,687	3,736,113	2,920,160
8. Delaware	DE	L	1,690,582	1,288,278	556,878	312,240	5,545,855	4,766,114
9. District of Columbia	DC	L	60,985	132,562	12,472	397	793,686	512,665
10. Florida	FL	L	2,466,832	2,246,833	1,898,469	(523,251)	7,026,441	7,613,794
11. Georgia	GA	L	14,555,956	11,492,826	8,593,738	7,290,705	34,884,921	32,689,377
12. Hawaii	HI	L	34,280	76,319			68,188	36,750
13. Idaho	ID	L	1,178,305	1,745,930	329,928	2,525,358	4,688,931	5,188,309
14. Illinois	IL	L	31,189,391	21,543,757	16,217,101	16,489,827	127,137,052	101,245,892
15. Indiana	IN	L	19,265,993	14,214,719	5,142,380	4,862,838	57,959,026	55,810,009
16. Iowa	IA	L	3,492,013	1,469,855	3,087,923	955,802	24,540,285	15,278,084
17. Kansas	KS	L	7,727,948	4,682,715	2,879,312	1,975,180	12,863,903	10,717,013
18. Kentucky	KY	L	13,755,646	9,387,995	4,208,250	5,829,608	22,226,792	20,642,880
19. Louisiana	LA	L	12,135	17,126			134,621	116,663
20. Maine	ME	L	1,204,524	399,315	422,862	6,647	354,768	82,356
21. Maryland	MD	L	7,383,996	4,138,672	2,260,288	3,490,360	21,715,394	13,318,581
22. Massachusetts	MA	L	1,968,366	2,358,798	325,579	282,992	6,092,225	3,143,457
23. Michigan	MI	L	16,716,831	8,888,540	4,796,825	1,913,690	43,656,056	42,737,134
24. Minnesota	MN	L	4,975,606	3,889,722	2,193,836	1,828,831	18,826,173	18,467,310
25. Mississippi	MS	L	314,580	233,118	30,308	1,077	729,261	473,873
26. Missouri	MO	L	22,710,007	14,152,449	6,375,728	4,869,936	52,719,419	33,495,412
27. Montana	MT	L	1,972,930	1,232,420	149,647	851,573	3,102,684	2,731,974
28. Nebraska	NE	L	907,560	1,410,226	943,734	321,108	11,216,456	13,486,544
29. Nevada	NV	L	2,733,846	1,147,569	1,831,545	358,234	4,464,411	1,822,010
30. New Hampshire	NH	L	530,752	484,926	69,726	112,342	3,312,690	3,229,634
31. New Jersey	NJ	L	1,100,564	1,181,912	314,738	(61,343)	4,460,376	3,563,468
32. New Mexico	NM	L	1,237,774	1,062,079	553,484	655,037	3,125,493	2,461,129
33. New York	NY	L	2,479,770	2,649,243	889,708	1,248,877	14,361,618	16,417,812
34. North Carolina	NC	L	8,502,509	4,847,845	1,295,886	1,736,739	34,424,467	33,959,884
35. North Dakota	ND	L	89,421	172,872	(16,645)	1,602	122,978	417,333
36. Ohio	OH	L	47,154,957	34,068,404	16,601,651	14,197,293	57,728,718	50,501,229
37. Oklahoma	OK	L	461,837	201,808	52,170	12,168	860,875	834,181
38. Oregon	OR	L	4,844,300	3,246,142	2,454,073	1,625,222	16,163,313	13,831,545
39. Pennsylvania	PA	L	13,168,673	9,749,556	6,095,230	3,074,725	60,436,653	61,056,453
40. Rhode Island	RI	L	1,931,625	1,312,322	743,172	785,251	2,551,676	1,072,417
41. South Carolina	SC	L	4,336,739	2,801,675	1,370,254	1,293,249	8,683,355	7,956,091
42. South Dakota	SD	L	360,620	261,416	73,426	15,531	2,136,881	1,903,407
43. Tennessee	TN	L	10,372,257	7,872,385	6,534,240	3,298,237	24,672,267	20,966,606
44. Texas	TX	L	11,338,380	4,992,479	2,250,435	1,711,864	17,238,801	11,623,870
45. Utah	UT	L	5,069,462	2,939,526	801,969	539,738	16,781,560	10,792,702
46. Vermont	VT	L	1,404,925	1,369,044	323,594	206,371	8,171,276	7,565,532
47. Virginia	VA	L	9,069,723	6,010,896	2,532,369	2,737,430	27,445,427	27,677,653
48. Washington	WA	L	4,168,545	3,790,649	1,516,084	447,085	11,270,279	12,658,385
49. West Virginia	WV	L	991,014	843,608	678,445	51,547	3,504,919	3,561,375
50. Wisconsin	WI	L	7,655,977	5,317,909	2,151,284	2,445,339	22,118,914	25,843,599
51. Wyoming	WY	L	738,434	619,127	269,308	1,007	557,541	662,625
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		323,917,203	220,151,554	121,268,616	99,451,743	855,827,574	758,427,165
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:

- | | | |
|--|----|--|
| 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... | 51 | 4. Q - Qualified - Qualified or accredited reinsurer..... |
| 2. R - Registered - Non-domiciled RRGs..... | | 5. D - Domestic Surplus Lines Insurer (DSL) - Reporting entities authorized to write surplus lines in the state of domicile..... |
| 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... | | 6. N - None of the above - Not allowed to write business in the state..... |

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 Investments 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 DS Investments I, LLC	OH	81-3640769	
CLIC CSP Investments I, LLC	OH	99-0881697	
The Cincinnati Specialty Underwriters Insurance Company (Insurer)	DE	65-1316588	13037
CIC Uptown Investments I, LLC	OH	83-1627569	
CIC Danamont Investments I, LLC	OH	61-1936938	
CIC BP Investments G, LLC	OH	35-2698966	
CIC Hickory Investments I, LLC	OH	35-2780794	
CIC Pimlico Investments I, LLC	OH	36-5051894	
CIC District Investments II, LLC	OH	36-5050938	
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

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0244	CINCINNATI INS GRP	00000	31-0746871		0000020286	NASDAQ	CINCINNATI FINANCIAL CORPORATION	OH	UIP	CINCINNATI FINANCIAL CORPORATION	Board of Directors		BOARD	NO	
.0244	CINCINNATI INS GRP	10677	31-0542366		0001279885		THE CINCINNATI INSURANCE COMPANY	OH	UDP	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	76236	31-1213778		0001279887		THE CINCINNATI LIFE INSURANCE COMPANY	OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	28665	31-0826946		0001279888		THE CINCINNATI CASUALTY COMPANY	OH	RE	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	23280	31-1241230		0001279886		THE CINCINNATI INDEMNITY COMPANY	OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
							THE CINCINNATI SPECIALTY UNDERWRITERS INSURANCE COMPANY	DE	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	13037	65-1316588		0001426763		CFC INVESTMENT COMPANY	OH	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	31-0790388				CSU PRODUCER RESOURCES, INC	OH	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	11-3823180		0001534469		CLIC BP INVESTMENTS B, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	81-1908205				CLIC BP INVESTMENTS H, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	81-4633687				CLIC DS INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	81-3640769				CLIC WSD INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	82-1587731				CLIC DISTRICT INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	99-0881697				CLIC CSP INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	82-5173506				C1C DISTRICT INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	83-1627569				C1C UPTOWN INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	61-1936938				C1C DANAMONT INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	35-2698966				C1C BP INVESTMENTS G, LLC	OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	35-2780794				C1C HICKORY INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	36-5051894				C1C PIMLICO INVESTMENTS I, LLC	OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	36-5050938				C1C DISTRICT INVESTMENTS II, LLC	OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000	98-1489371				CINCINNATI GLOBAL UNDERWRITING LTD.		NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL DEDICATED NO. 1 LIMITED		IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL DEDICATED NO. 2 LIMITED		IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL DEDICATED NO. 3 LIMITED		IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL DEDICATED NO. 4 LIMITED		IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL DEDICATED NO. 5 LIMITED		IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL DEDICATED NO. 6 LIMITED		IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL UNDERWRITING AGENCY LIMITED		NIA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	
.0244	CINCINNATI INS GRP	00000					CINCINNATI GLOBAL UNDERWRITING SERVICES LIMITED		NIA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	NO	

Asterisk	Explanation
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STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

PART 1 - LOSS EXPERIENCE

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	1,526,194	506,780	33.2	9.3
2.1 Allied Lines	2,211,589	181,446	8.2	181.2
2.2 Multiple peril crop				
2.3 Federal flood				
2.4 Private crop				
2.5 Private flood	358,734	77,500	21.6	
3. Farmowners multiple peril				
4. Homeowners multiple peril	80,364,364	59,309,505	73.8	117.8
5.1 Commercial multiple peril (non-liability portion)	27,539,300	13,302,990	48.3	91.5
5.2 Commercial multiple peril (liability portion)	17,034,182	8,724,738	51.2	49.1
6. Mortgage guaranty				
8. Ocean marine				
9.1 Inland marine	13,046,001	4,232,822	32.4	27.9
9.2 Pet insurance				
10. Financial guaranty				
11.1 Medical professional liability - occurrence	518,027	47,402	9.2	41.3
11.2 Medical professional liability - claims-made	175,081	(7,830)	(4.5)	91.0
12. Earthquake	2,260,369			
13.1 Comprehensive (hospital and medical) individual				
13.2 Comprehensive (hospital and medical) group				
14. Credit accident and health				
15.1 Vision only				
15.2 Dental only				
15.3 Disability income				
15.4 Medicare supplement				
15.5 Medicaid Title XIX				
15.6 Medicare Title XVIII				
15.7 Long-term care				
15.8 Federal employees health benefits plan				
15.9 Other health				
16. Workers' compensation	19,411,558	6,733,541	34.7	41.1
17.1 Other liability - occurrence	23,974,780	13,532,363	56.4	125.5
17.2 Other liability - claims-made	608,736	36,165	5.9	32.3
17.3 Excess workers' compensation				
18.1 Products liability - occurrence	2,928,394	1,011,641	34.5	69.3
18.2 Products liability - claims-made				
19.1 Private passenger auto no-fault (personal injury protection)	1,519,149	571,040	37.6	61.4
19.2 Other private passenger auto liability	27,280,132	21,812,831	80.0	81.9
19.3 Commercial auto no-fault (personal injury protection)	258,361	(19,627)	(7.6)	28.7
19.4 Other commercial auto liability	11,161,563	5,691,966	51.0	62.0
21.1 Private passenger auto physical damage	32,077,303	21,366,807	66.6	87.0
21.2 Commercial auto physical damage	4,842,929	3,364,557	69.5	70.4
22. Aircraft (all perils)				
23. Fidelity				
24. Surety	1,807,223	453,754	25.1	30.6
26. Burglary and theft	69,456	27,541	39.7	16.9
27. Boiler and machinery	294,906	(8,842)	(3.0)	45.5
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business				
35. Totals	271,268,332	160,949,090	59.3	82.4
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	1,621,239	1,621,239	1,327,510
2.1	Allied Lines	1,950,116	1,950,116	1,623,287
2.2	Multiple peril crop			
2.3	Federal flood			
2.4	Private crop			
2.5	Private flood	332,533	332,533	196,023
3.	Farmowners multiple peril			
4.	Homeowners multiple peril	99,539,983	99,539,983	50,437,588
5.1	Commercial multiple peril (non-liability portion)	28,058,047	28,058,047	27,149,626
5.2	Commercial multiple peril (liability portion)	18,218,475	18,218,475	17,294,433
6.	Mortgage guaranty			
8.	Ocean marine			
9.1	Inland marine	13,521,422	13,521,422	9,763,472
9.2	Pet insurance			
10.	Financial guaranty			
11.1	Medical professional liability - occurrence	599,960	599,960	220,932
11.2	Medical professional liability - claims-made	274,035	274,035	238,016
12.	Earthquake	2,377,550	2,377,550	1,603,293
13.1	Comprehensive (hospital and medical) individual			
13.2	Comprehensive (hospital and medical) group			
14.	Credit accident and health			
15.1	Vision only			
15.2	Dental only			
15.3	Disability income			
15.4	Medicare supplement			
15.5	Medicaid Title XIX			
15.6	Medicare Title XVIII			
15.7	Long-term care			
15.8	Federal employees health benefits plan			
15.9	Other health			
16.	Workers' compensation	23,832,858	23,832,858	26,094,485
17.1	Other liability - occurrence	28,138,983	28,138,983	21,270,360
17.2	Other liability - claims-made	678,470	678,470	645,686
17.3	Excess workers' compensation			
18.1	Products liability - occurrence	2,854,182	2,854,182	3,205,638
18.2	Products liability - claims-made			
19.1	Private passenger auto no-fault (personal injury protection)	2,040,245	2,040,245	673,196
19.2	Other private passenger auto liability	35,878,611	35,878,611	18,219,506
19.3	Commercial auto no-fault (personal injury protection)	290,872	290,872	276,521
19.4	Other commercial auto liability	12,090,998	12,090,998	12,581,406
21.1	Private passenger auto physical damage	44,006,323	44,006,323	19,975,630
21.2	Commercial auto physical damage	5,627,058	5,627,058	5,525,544
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety	1,609,326	1,609,326	1,491,401
26.	Burglary and theft	71,513	71,513	69,535
27.	Boiler and machinery	304,404	304,404	268,465
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business			
35.	Totals	323,917,203	323,917,203	220,151,554
DETAILS OF WRITE-INS				
3401.			
3402.			
3403.			
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

PART 3 (\$000 OMITTED)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2024 Loss and LAE Payments on Claims Reported as of Prior Year-End	2024 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2024 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2021 + Prior													
2. 2022													
3. Subtotals 2022 + Prior													
4. 2023													
5. Subtotals 2023 + Prior													
6. 2024	XXX	XXX	XXX	XXX			XXX				XXX	XXX	XXX
7. Totals													
8. Prior Year-End Surplus As Regards Policyholders											Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1.	2.	3.
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4.

NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

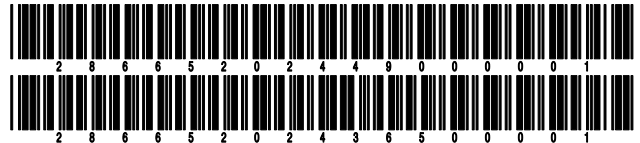
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	YES
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	YES
AUGUST FILING	
5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A

Explanations:

- 1.
- 3.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]
3. Medicare Part D Coverage Supplement [Document Identifier 365]



NONE

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase/(decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest points and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase/(decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	534,173,117	507,952,947
2. Cost of bonds and stocks acquired	15,456,276	39,175,688
3. Accrual of discount	23,707	92,422
4. Unrealized valuation increase/(decrease)	11,994,952	10,968,201
5. Total gain (loss) on disposals	636,540	(18,619)
6. Deduct consideration for bonds and stocks disposed of	6,139,966	20,801,477
7. Deduct amortization of premium	364,549	1,539,324
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		1,656,720
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	555,780,077	534,173,117
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	555,780,077	534,173,117

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	288,654,634	14,306,160	4,652,769	534,783	298,842,807			288,654,634
2. NAIC 2 (a)	71,329,116			(881,011)	70,448,105			71,329,116
3. NAIC 3 (a)	3,241,202			9,312	3,250,514			3,241,202
4. NAIC 4 (a)	399,023			4,869	403,892			399,023
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	363,623,975	14,306,160	4,652,769	(332,047)	372,945,318			363,623,975
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	363,623,975	14,306,160	4,652,769	(332,047)	372,945,318			363,623,975

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$; NAIC 2 \$; NAIC 3 \$ NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

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SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Premium	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
7709999999 Totals					

NONE

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of short-term investments acquired		
3. Accrual of discount		
4. Unrealized valuation increase/(decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals		
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)		

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

Schedule E - Part 2 - Verification - Cash Equivalents

NONE

Schedule A - Part 2 - Real Estate Acquired and Additions Made

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation, NAIC Designation Modifier and SVO Admini- strative Symbol
91282C-HV-6	UNITED STATES TREASURY		02/22/2024	Bank of America		556,409	555,000	13,418	1.A
0109999999. Subtotal - Bonds - U.S. Governments								13,418	XXX
3130AY-ZJ-8	FEDERAL HOME LOAN BANKS		02/13/2024	CAPITAL INSTITUTIONAL SERVICES		3,000,000	3,000,000		1.B FE
3130B0-NC-9	FEDERAL HOME LOAN BANKS		03/26/2024	CAPITAL INSTITUTIONAL SERVICES		1,500,000	1,500,000		1.A
3133EP-3W-3	FEDERAL FARM CREDIT BANKS FUNDING CORP		02/22/2024	CAPITAL INSTITUTIONAL SERVICES		3,285,000	3,285,000		1.B FE
3133EP-Z2-4	FEDERAL FARM CREDIT BANKS FUNDING CORP		01/25/2024	CAPITAL INSTITUTIONAL SERVICES		3,000,000	3,000,000		1.B FE
3134H1-SJ-3	FEDERAL HOME LOAN MORTGAGE CORP		02/08/2024	CAPITAL INSTITUTIONAL SERVICES		2,000,000	2,000,000		1.B FE
692647-DS-6	OZARK MO R-6 SCH DIST LEASE CTF PARTN		01/10/2024	Stifel Nicolaus & Co.		218,860	220,000		1.C FE
892871-AT-1	TRAILS PUB IMPT DIST N MEX SPL LEVY REV		02/22/2024	Piper Jaffray & CO/ALGO		745,890	750,000		1.C FE
0909999999. Subtotal - Bonds - U.S. Special Revenues						13,749,750	13,755,000		XXX
2509999997. Total - Bonds - Part 3						14,306,160	14,310,000	13,418	XXX
2509999998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
2509999999. Total - Bonds						14,306,160	14,310,000	13,418	XXX
4509999997. Total - Preferred Stocks - Part 3							XXX		XXX
4509999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks							XXX		XXX
7591EP-10-0	REGIONS FINANCIAL ORD		02/16/2024	PIPER & JAFFRAY & CO	37,440,000	692,505			
957638-10-9	WESTERN ALLIANCE ORD		02/16/2024	PIPER & JAFFRAY & CO	7,405,000	457,611			
5019999999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded						1,150,116	XXX		XXX
5989999997. Total - Common Stocks - Part 3						1,150,116	XXX		XXX
5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks						1,150,116	XXX		XXX
5999999999. Total - Preferred and Common Stocks						1,150,116	XXX		XXX
6009999999 - Totals						15,456,276	XXX	13,418	XXX

STATEMENT AS OF MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	For-foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	
..036269-BR-8	ANOKA CNTY MINN REGL RR AUTH		02/01/2024	Call @ 100.00		1,800,000	1,800,000	1,784,538	1,792,679		.91		.91		1,792,769		7,231	7,231	30,375	02/01/2030	1.B FE	
..038106-RB-8	APPLETON WIS AREA SCH DIST		03/01/2024	Call @ 100.00		1,860,000	1,860,000	1,860,000	1,860,000						1,860,000				27,900	03/01/2027	1.B FE	
..258165-TV-1	DORCHESTER CNTY S C SCH DIST NO 002		03/01/2024	Call @ 100.00		1,000,000	1,000,000	1,068,940	1,001,315		(1,315)		(1,315)		1,000,000				20,000	03/01/2027	1.C FE	
0709999999	Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					4,660,000	4,660,000	4,713,478	4,653,994		(1,224)		(1,224)		4,652,769		7,231	7,231	78,275		XXX XXX	
2509999997	Total - Bonds - Part 4					4,660,000	4,660,000	4,713,478	4,653,994		(1,224)		(1,224)		4,652,769		7,231	7,231	78,275		XXX XXX	
2509999998	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX XXX
2509999999	Total - Bonds					4,660,000	4,660,000	4,713,478	4,653,994		(1,224)		(1,224)		4,652,769		7,231	7,231	78,275		XXX XXX	
4509999997	Total - Preferred Stocks - Part 4						XXX														XXX XXX	
4509999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX XXX
4509999999	Total - Preferred Stocks						XXX														XXX XXX	
..693475-10-5	PNC FINANCIAL SERVICES GROUP ORD		02/07/2024	PIPER & JAFFRAY & CO ...	10,000,000	1,479,966		850,657	1,548,500	(697,843)			(697,843)		850,657		629,309	629,309	15,500			
5019999999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded					1,479,966	XXX	850,657	1,548,500	(697,843)			(697,843)		850,657		629,309	629,309	15,500		XXX XXX	
5989999997	Total - Common Stocks - Part 4					1,479,966	XXX	850,657	1,548,500	(697,843)			(697,843)		850,657		629,309	629,309	15,500		XXX XXX	
5989999998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX XXX
5989999999	Total - Common Stocks					1,479,966	XXX	850,657	1,548,500	(697,843)			(697,843)		850,657		629,309	629,309	15,500		XXX XXX	
5999999999	Total - Preferred and Common Stocks					1,479,966	XXX	850,657	1,548,500	(697,843)			(697,843)		850,657		629,309	629,309	15,500		XXX XXX	
6009999999	Totals					6,139,966	XXX	5,564,135	6,202,494	(697,843)	(1,224)		(699,067)		5,503,426		636,540	636,540	93,775		XXX XXX	

E05

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

N O N E

Medicare Part D Coverage Supplement

N O N E



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

Designate the type of health care providers reported on this page:
Physicians, including surgeons and osteopaths

**SUPPLEMENT A TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 No. of Claims		6 Amount Reported	7 No. of Claims	
1. AlabamaAL								
2. AlaskaAK								
3. ArizonaAZ								
4. ArkansasAR								
5. CaliforniaCA								
6. ColoradoCO								
7. ConnecticutCT								
8. DelawareDE								
9. District of ColumbiaDC								
10. FloridaFL								
11. GeorgiaGA	2,113	1,047			(581)			7,191
12. HawaiiHI								
13. IdahoID								
14. IllinoisIL								
15. IndianaIN	4,238	5,169			2,591			12,508
16. IowaIA								
17. KansasKS								
18. KentuckyKY	1	3,607			414			2,513
19. LouisianaLA								
20. MaineME								
21. MarylandMD	(1,000)	2,350			(329)			12,207
22. MassachusettsMA								
23. MichiganMI								
24. MinnesotaMN	3,684	623			129			2,413
25. MississippiMS								
26. MissouriMO		480						
27. MontanaMT								
28. NebraskaNE								
29. NevadaNV								
30. New HampshireNH								
31. New JerseyNJ								
32. New MexicoNM								
33. New YorkNY								
34. North CarolinaNC	7,343	2,272			190			7,079
35. North DakotaND								
36. OhioOH	17,120	4,161			21,729	20,000	1	15,308
37. OklahomaOK								
38. OregonOR								
39. PennsylvaniaPA					(43)			199
40. Rhode IslandRI								
41. South CarolinaSC								
42. South DakotaSD								
43. TennesseeTN								
44. TexasTX		4,034			(44)			5
45. UtahUT								
46. VermontVT								
47. VirginiaVA	88,339	21,828			(24,656)			1,178
48. WashingtonWA	6,503	1,581			1,104			4,204
49. West VirginiaWV								
50. WisconsinWI								
51. WyomingWY								
52. American SamoaAS								
53. GuamGU								
54. Puerto RicoPR								
55. U.S. Virgin IslandsVI								
56. Northern Mariana IslandsMP								
57. CanadaCAN								
58. Aggregate Other AliensOT								
59. Totals	128,341	47,152			503	20,000	1	64,804
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)								



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

Designate the type of health care providers reported on this page:
Hospitals

**SUPPLEMENT A TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 No. of Claims		6 Amount Reported	7 No. of Claims	
1. AlabamaAL								
2. AlaskaAK								
3. ArizonaAZ								
4. ArkansasAR								
5. CaliforniaCA								
6. ColoradoCO								
7. ConnecticutCT								
8. DelawareDE								
9. District of ColumbiaDC								
10. FloridaFL								
11. GeorgiaGA								
12. HawaiiHI								
13. IdahoID								
14. IllinoisIL								
15. IndianaIN					(8)			
16. IowaIA								
17. KansasKS								
18. KentuckyKY								
19. LouisianaLA								
20. MaineME								
21. MarylandMD								
22. MassachusettsMA								
23. MichiganMI								
24. MinnesotaMN								
25. MississippiMS								
26. MissouriMO								
27. MontanaMT								
28. NebraskaNE								
29. NevadaNV								
30. New HampshireNH								
31. New JerseyNJ								
32. New MexicoNM								
33. New YorkNY								
34. North CarolinaNC								
35. North DakotaND								
36. OhioOH								
37. OklahomaOK								
38. OregonOR								
39. PennsylvaniaPA								
40. Rhode IslandRI								
41. South CarolinaSC								
42. South DakotaSD								
43. TennesseeTN								
44. TexasTX								
45. UtahUT								
46. VermontVT								
47. VirginiaVA					(47)			(14)
48. WashingtonWA								
49. West VirginiaWV								
50. WisconsinWI								
51. WyomingWY								
52. American SamoaAS								
53. GuamGU								
54. Puerto RicoPR								
55. U.S. Virgin IslandsVI								
56. Northern Mariana IslandsMP								
57. CanadaCAN								
58. Aggregate Other AliensOT								
59. Totals					(55)			(14)
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)								



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

Designate the type of health care providers reported on this page:
Other health care professionals, including dentists, chiropractors, and podiatrists

**SUPPLEMENT A TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 No. of Claims		6 Amount Reported	7 No. of Claims	
1. AlabamaAL	2,866	4,844			34,717	35,000	1	21,136
2. AlaskaAK								
3. ArizonaAZ	561	12,174			1,217			49,472
4. ArkansasAR	4,536	3,095			273			13,982
5. CaliforniaCA								
6. ColoradoCO	5,262	2,207			(305)			9,895
7. ConnecticutCT	5,464	1,378			520			4,922
8. DelawareDE	33,796	17,082			1,957			75,847
9. District of ColumbiaDC	9,326	2,842			(3,456)			17,214
10. FloridaFL					(52)			1
11. GeorgiaGA	29,936	15,185			17,997	559,742	3	65,837
12. HawaiiHI								
13. IdahoID	7,056	8,349			(85,205)			33,834
14. IllinoisIL	33,297	21,832			(30,121)			99,221
15. IndianaIN	17,446	11,699			29,636	150,307	3	45,910
16. IowaIA	5,298	2,804			484	5,970	1	11,687
17. KansasKS	42,357	48,508	350,000	1	100,568	758,559	9	228,080
18. KentuckyKY	18,637	49,972			102,070	393,134	6	208,044
19. LouisianaLA								
20. MaineME					(5)			4
21. MarylandMD	5,655	6,539			843			21,685
22. MassachusettsMA								
23. MichiganMI	44,181	43,634			4,665			182,027
24. MinnesotaMN	29,477	23,617			7,115			86,170
25. MississippiMS								
26. MissouriMO	10,822	18,389			3,032			50,418
27. MontanaMT	9,468	4,480			(52)			20,736
28. NebraskaNE	6,837	3,191			141			15,018
29. NevadaNV								
30. New HampshireNH	3,108	3,999			11,134	10,000	1	15,439
31. New JerseyNJ								
32. New MexicoNM		569			(666)			5,415
33. New YorkNY		7,178			4,076			20,710
34. North CarolinaNC	31,880	25,464			2,511			104,965
35. North DakotaND								
36. OhioOH	121,136	74,871			54,831	62,165	2	347,268
37. OklahomaOK								
38. OregonOR		837			(1,080)			7,447
39. PennsylvaniaPA	15,940	34,004			(1,979)	193,432	3	139,531
40. Rhode IslandRI								
41. South CarolinaSC	1,606	594			(208)			3,587
42. South DakotaSD		1,203			545			2,243
43. TennesseeTN	44,383	31,147			(5,424)	148,848	3	141,350
44. TexasTX	4,444	6,761			(2,031)			12,212
45. UtahUT	1,670	1,576			(3,968)	67,416	1	8,323
46. VermontVT	2	1,444			745			4,315
47. VirginiaVA	104,015	31,474			(1,073)			44,103
48. WashingtonWA	39,434	16,205			4,754	130,835	2	57,145
49. West VirginiaWV	9,428	3,821			10,548	42,282	1	19,226
50. WisconsinWI	380	3,512			(709)			18,974
51. WyomingWY		548			(38,929)			3,929
52. American SamoaAS								
53. GuamGU								
54. Puerto RicoPR								
55. U.S. Virgin IslandsVI								
56. Northern Mariana IslandsMP								
57. CanadaCAN								
58. Aggregate Other AliensOT								
59. Totals	699,704	547,028	350,000	1	219,117	2,557,691	36	2,217,323
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)								



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

Designate the type of health care providers reported on this page:
Other health care facilities

**SUPPLEMENT A TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 No. of Claims		6 Amount Reported	7 No. of Claims	
1. AlabamaAL		42,752			(11,720)	114,179	1	5,387
2. AlaskaAK								
3. ArizonaAZ								
4. ArkansasAR								
5. CaliforniaCA								
6. ColoradoCO								
7. ConnecticutCT								
8. DelawareDE								
9. District of ColumbiaDC								
10. FloridaFL								
11. GeorgiaGA								
12. HawaiiHI								
13. IdahoID	45,953	10,783			(123)			1,944
14. IllinoisIL					(1,154)			2,187
15. IndianaIN					(12)			50
16. IowaIA								
17. KansasKS								
18. KentuckyKY					(23)			12
19. LouisianaLA								
20. MaineME								
21. MarylandMD								
22. MassachusettsMA								
23. MichiganMI					(1,083)			2,547
24. MinnesotaMN								
25. MississippiMS								
26. MissouriMO								
27. MontanaMT	(3)	20,101			(2,282)			3,260
28. NebraskaNE								
29. NevadaNV								
30. New HampshireNH								
31. New JerseyNJ								
32. New MexicoNM								
33. New YorkNY								
34. North CarolinaNC					(139,671)			559,797
35. North DakotaND								
36. OhioOH			(25,000)	1	(17,846)	257,768	1	83,144
37. OklahomaOK								
38. OregonOR					(793)			1,507
39. PennsylvaniaPA					(5,263)	94,096	1	8,021
40. Rhode IslandRI								
41. South CarolinaSC								
42. South DakotaSD								
43. TennesseeTN		25,293						
44. TexasTX								
45. UtahUT								
46. VermontVT								
47. VirginiaVA								
48. WashingtonWA								
49. West VirginiaWV								
50. WisconsinWI					(24)			32
51. WyomingWY								
52. American SamoaAS								
53. GuamGU								
54. Puerto RicoPR								
55. U.S. Virgin IslandsVI								
56. Northern Mariana IslandsMP								
57. CanadaCAN								
58. Aggregate Other AliensOT								
59. Totals	45,950	98,929	(25,000)	1	(179,994)	466,043	3	667,887
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)								

Trusted Surplus - Cover

N O N E

Trusted Surplus Statement - Assets

N O N E

Trusted Surplus Statement - Liabilities and Trusted Surplus

N O N E

OVERFLOW PAGE FOR WRITE-INS

NONE



SUPPLEMENT FOR THE QUARTER ENDING MARCH 31, 2024 OF THE THE CINCINNATI CASUALTY COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For The Period Ended MARCH 31, 2024

NAIC Group Code 0244

NAIC Company Code 28665

Company Name THE CINCINNATI CASUALTY COMPANY

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies

1 Direct Written Premium	2 Direct Earned Premium	3 Direct Losses Incurred
\$ 1,368	\$ 1,784	\$

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [X] No []
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [X] No []
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies
 - 2.31 Amount quantified:.....\$ 14,872
 - 2.32 Amount estimated using reasonable assumptions:.....\$
- 2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case reserves) for the D&O liability coverage provided in CMP packaged policies.\$