



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019
OF THE CONDITION AND AFFAIRS OF THE

THE CINCINNATI INDEMNITY COMPANY

NAIC Group Code 0244 (Current) 0244 (Prior) NAIC Company Code 23280 Employer's ID Number 31-1241230

Organized under the Laws of OHIO, State of Domicile or Port of Entry OH
Country of Domicile United States of America

Incorporated/Organized 05/19/1988 Commenced Business 01/01/1989

Statutory Home Office 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, US 45014-5141
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, US 45014-5141
(Street and Number) (City or Town, State, Country and Zip Code)
513-870-2000 (Area Code) (Telephone Number)

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

Primary Location of Books and Records 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, US 45014-5141
(Street and Number) (City or Town, State, Country and Zip Code)
513-870-2000 (Area Code) (Telephone Number)

Internet Website Address WWW.CINFIN.COM

Statutory Statement Contact ANDREW SCHNELL, 513-870-2000
(Name) (Area Code) (Telephone Number)
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OFFICERS

CHIEF EXECUTIVE OFFICER, PRESIDENT STEVEN JUSTUS JOHNSTON
CHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENT MICHAEL JAMES SEWELL
SENIOR VICE PRESIDENT, TREASURER THERESA ANN HOFFER

OTHER

TERESA CURRIN CRACAS, SENIOR VICE PRESIDENT
MARTIN FRANCIS HOLLENBECK, SENIOR VICE PRESIDENT
MARTIN JOSEPH MULLEN, SENIOR VICE PRESIDENT
DONALD JOSEPH DOYLE JR, SENIOR VICE PRESIDENT
JOHN SCOTT KELLINGTON, SENIOR VICE PRESIDENT
STEPHEN MICHAEL SPRAY, SENIOR VICE PRESIDENT
SEAN MICHAEL GIVLER, SENIOR VICE PRESIDENT
LISA ANNE LOVE, SENIOR VICE PRESIDENT, CORPORATE SECRETARY
WILLIAM HAROLD VAN DEN HEUVEL, SENIOR VICE PRESIDENT

DIRECTORS OR TRUSTEES

WILLIAM FORREST BAHL, DONALD JOSEPH DOYLE JR, STEVEN JUSTUS JOHNSTON, WILLIAM RODNEY MCMULLEN, THOMAS REID SCHIFF, KENNETH WILLIAM STECHER, LARRY RUSSEL WEBB
GREGORY THOMAS BIER, SEAN MICHAEL GIVLER, JOHN SCOTT KELLINGTON, MARTIN JOSEPH MULLEN, MICHAEL JAMES SEWELL, JOHN FREDERICK STEELE JR
TERESA CURRIN CRACAS, MARTIN FRANCIS HOLLENBECK, LISA ANNE LOVE, DAVID PAUL OSBORN, STEPHEN MICHAEL SPRAY, WILLIAM HAROLD VAN DEN HEUVEL

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.

STEVEN J. JOHNSTON
CHIEF EXECUTIVE OFFICER, PRESIDENT

MICHAEL J. SEWELL
CHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENT

THERESA A. HOFFER
SENIOR VICE PRESIDENT, TREASURER

Subscribed and sworn to before me this 10TH day of FEBRUARY 2020

- 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.....

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

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	79,471,428		79,471,428	76,344,308
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	33,004,640		33,004,640	25,595,797
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$				
encumbrances)				
4.2 Properties held for the production of income (less				
\$				
encumbrances)				
4.3 Properties held for sale (less \$				
encumbrances)				
5. Cash (\$				
2,293,506 , Schedule E - Part 1), cash equivalents				
(\$				
, Schedule E - Part 2) and short-term				
investments (\$	2,293,506		2,293,506	2,334,044
, Schedule DA)				
6. Contract loans (including \$				
premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivable for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	114,769,575		114,769,575	104,274,148
13. Title plants less \$				
charged off (for Title insurers				
only)				
14. Investment income due and accrued	977,977		977,977	929,360
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection				
15.2 Deferred premiums and agents' balances and installments booked but				
deferred and not yet due (including \$				
earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$				
) and				
contracts subject to redetermination (\$				
)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	16,067,053		16,067,053	22,137,837
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts	3,077,265		3,077,265	3,465,375
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon	174		174	
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
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	11,628,712		11,628,712	4,802,928
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)	146,520,755		146,520,755	135,609,648
27. From Separate Accounts, Segregated Accounts and Protected Cell				
Accounts				
28. Total (Lines 26 and 27)	146,520,755		146,520,755	135,609,648
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)				

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	6,413	
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	3,831	1,923
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		147,777
7.2 Net deferred tax liability	3,604,493	2,045,421
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$190,688,909 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)	30,480,275	30,108,899
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14. Amounts withheld or retained by company for account of others	1,336,956	1,187,349
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 3, Column 78)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	35,431,968	33,491,369
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	35,431,968	33,491,369
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	3,600,000	3,600,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	21,600,000	21,600,000
35. Unassigned funds (surplus)	85,888,787	76,918,279
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	111,088,787	102,118,279
38. TOTALS (Page 2, Line 28, Col. 3)	146,520,755	135,609,648
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)		
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)		

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7).....		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....		
5. Aggregate write-ins for underwriting deductions.....		
6. Total underwriting deductions (Lines 2 through 5).....		
7. Net income of protected cells.....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....		
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	3,659,556	3,553,407
10. Net realized capital gains or (losses) less capital gains tax of \$ (10,941) (Exhibit of Capital Gains (Losses)).....	(41,160)	2,041,159
11. Net investment gain (loss) (Lines 9 + 10).....	3,618,396	5,594,566
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$).....		
13. Finance and service charges not included in premiums.....		
14. Aggregate write-ins for miscellaneous income.....	518	933
15. Total other income (Lines 12 through 14).....	518	933
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	3,618,914	5,595,499
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).....	3,618,914	5,595,499
19. Federal and foreign income taxes incurred.....	498,177	470,357
20. Net income (Line 18 minus Line 19)(to Line 22).....	3,120,737	5,125,141
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	102,118,279	99,999,393
22. Net income (from Line 20).....	3,120,737	5,125,141
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 1,555,857.....	5,852,986	(3,003,524)
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(3,215)	(2,731)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....		
33.2 Transferred to capital (Stock Dividend).....		
33.3 Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	8,970,508	2,118,886
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	111,088,787	102,118,279
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page.....		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....		
1401. Miscellaneous Income.....	518	933
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page.....		
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	518	933
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page.....		
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....		

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

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	371,376	1,192,037
2. Net investment income	3,838,218	3,723,315
3. Miscellaneous income	518	933
4. Total (Lines 1 through 3)	4,210,112	4,916,284
5. Benefit and loss related payments	(6,465,308)	(3,528,216)
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 \$137,531 tax on capital gains (losses)	635,186	1,032,644
10. Total (Lines 5 through 9)	(5,830,122)	(2,495,572)
11. Net cash from operations (Line 4 minus Line 10)	10,040,234	7,411,856
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	6,539,949	6,751,262
12.2 Stocks		4,482,436
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		640,000
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,539,949	11,873,698
13. Cost of investments acquired (long-term only):		
13.1 Bonds	9,944,544	9,851,500
13.2 Stocks		5,866,402
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		97
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	9,944,544	15,717,999
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(3,404,595)	(3,844,301)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	(6,676,177)	(4,340,146)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(6,676,177)	(4,340,146)
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)	(40,538)	(772,591)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	2,334,044	3,106,635
19.2 End of period (Line 18 plus Line 19.1)	2,293,506	2,334,044

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

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Underwriting and Investment Exhibit - Part 1 - Premiums Earned

NONE

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

NONE

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	14,655,524			14,655,524		
2. Allied lines	18,143,435			18,143,435		
3. Farmowners multiple peril						
4. Homeowners multiple peril						
5. Commercial multiple peril	92,837,630			92,837,630		
6. Mortgage guaranty						
8. Ocean marine						
9. Inland marine	7,382,988			7,382,988		
10. Financial guaranty						
11.1 Medical professional liability - occurrence	2,295,188			2,295,188		
11.2 Medical professional liability - claims-made	53,498			53,498		
12. Earthquake	291,335			291,335		
13. Group accident and health						
14. Credit accident and health (group and individual)						
15. Other accident and health						
16. Workers' compensation	110,459,676		4	110,459,680		
17.1 Other liability - occurrence	62,943,084			62,943,084		
17.2 Other liability - claims-made	1,394,972			1,394,972		
17.3 Excess workers' compensation						
18.1 Products liability - occurrence	6,339,564			6,339,564		
18.2 Products liability - claims-made						
19.1, 19.2 Private passenger auto liability	21,128			21,128		
19.3, 19.4 Commercial auto liability	68,612,129			68,612,129		
21. Auto physical damage	28,736,530			28,736,530		
22. Aircraft (all perils)						
23. Fidelity						
24. Surety						
26. Burglary and theft	1,168,322			1,168,322		
27. Boiler and machinery	1,719,828			1,719,828		
28. Credit						
29. International						
30. Warranty						
31. Reinsurance - nonproportional assumed property	XXX					
32. Reinsurance - nonproportional assumed liability	XXX					
33. Reinsurance - nonproportional assumed financial lines	XXX					
34. Aggregate write-ins for other lines of business						
35. TOTALS	417,054,830		4	417,054,834		
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page						
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)						

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

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

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

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A , Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 -3)				
1. Fire	5,722,220		5,722,220					
2. Allied lines	8,455,370		8,455,370					
3. Farmowners multiple peril								
4. Homeowners multiple peril								
5. Commercial multiple peril	43,300,275		43,300,275					
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine	1,669,406		1,669,406					
10. Financial guaranty								
11.1 Medical professional liability - occurrence	2,263,463		2,263,463					
11.2 Medical professional liability - claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation	43,998,144	16,417	44,014,562					
17.1 Other liability - occurrence	17,110,498		17,110,498					
17.2 Other liability - claims-made	504,471		504,471					
17.3 Excess workers' compensation								
18.1 Products liability - occurrence	1,852,600		1,852,600					
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability	3,857		3,857					
19.3, 19.4 Commercial auto liability	39,663,155		39,663,155					
21. Auto physical damage	13,390,116		13,390,116					
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft	124,673		124,673					
27. Boiler and machinery	67,313		67,313					
28. Credit								
29. International								
30. Warranty								
31. Reinsurance - nonproportional assumed property	XXX							
32. Reinsurance - nonproportional assumed liability	XXX							
33. Reinsurance - nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business								
35. TOTALS	178,125,560	16,417	178,141,978					
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								

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

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	3,982,001		3,982,001						
2. Allied lines	4,725,350		4,725,350						
3. Farmowners multiple peril									
4. Homeowners multiple peril									
5. Commercial multiple peril	32,075,840		32,075,840		10,535,000		10,535,000		
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine	742,504		742,504						
10. Financial guaranty									
11.1 Medical professional liability - occurrence	3,115,417		3,115,417		1,718,000		1,718,000		
11.2 Medical professional liability - claims-made	5,748		5,748						
12. Earthquake									
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)								(a)	
15. Other accident and health								(a)	
16. Workers' compensation	101,336,470	188,115	101,524,586		117,593,000	153,085	117,746,085		
17.1 Other liability - occurrence	26,431,201		26,431,201		38,626,000		38,626,000		
17.2 Other liability - claims-made	315,948		315,948						
17.3 Excess workers' compensation									
18.1 Products liability - occurrence	7,020,785		7,020,785		4,841,000		4,841,000		
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability	5,000		5,000						
19.3, 19.4 Commercial auto liability	51,613,205		51,613,205		20,836,000		20,836,000		
21. Auto physical damage	515,546		515,546		116,000		116,000		
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft	115,151		115,151						
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional assumed property	XXX				XXX				
32. Reinsurance - nonproportional assumed liability	XXX				XXX				
33. Reinsurance - nonproportional assumed financial lines	XXX				XXX				
34. Aggregate write-ins for other lines of business									
35. TOTALS	232,000,167	188,115	232,188,282		194,265,000	153,085	194,418,085		
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498.	Summary of remaining write-ins for Line 34 from overflow page								
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								

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

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	22,232,002			22,232,002
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	22,232,002			22,232,002
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2. Commission and brokerage:				
2.1 Direct excluding contingent		55,731,268		55,731,268
2.2 Reinsurance assumed, excluding contingent		710		710
2.3 Reinsurance ceded, excluding contingent		55,731,977		55,731,977
2.4 Contingent - direct		12,012,000		12,012,000
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded		12,012,000		12,012,000
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3. Allowances to managers and agents				
4. Advertising				
5. Boards, bureaus and associations			1	1
6. Surveys and underwriting reports				
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries			29,242	29,242
8.2 Payroll taxes			1,875	1,875
9. Employee relations and welfare			12,522	12,522
10. Insurance				
11. Directors' fees				
12. Travel and travel items			339	339
13. Rent and rent items			1,159	1,159
14. Equipment			76,022	76,022
15. Cost or depreciation of EDP equipment and software			4	4
16. Printing and stationery			58	58
17. Postage, telephone and telegraph, exchange and express			6	6
18. Legal and auditing			20,604	20,604
19. Totals (Lines 3 to 18)			141,832	141,832
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$				
20.2 Insurance department licenses and fees				
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses				
25. Total expenses incurred			141,832 (a)	141,832
26. Less unpaid expenses - current year			3,831	3,831
27. Add unpaid expenses - prior year			1,923	1,923
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			139,925	139,925
DETAILS OF WRITE-INS				
2401.				
2402.				
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)				

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

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 23,539	..... 23,527
1.1 Bonds exempt from U.S. tax	(a) 1,385,323	..... 1,427,124
1.2 Other bonds (unaffiliated)	(a) 1,524,697	..... 1,524,553
1.3 Bonds of affiliates	(a) .....	.....
2.1 Preferred stocks (unaffiliated)	(b) .....	.....
2.11 Preferred stocks of affiliates	(b) .....	.....
2.2 Common stocks (unaffiliated) .....	..... 819,111	..... 826,084
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans	(c) .....	.....
4. Real estate	(d) .....	.....
5. Contract loans .....	.....	.....
6. Cash, cash equivalents and short-term investments	(e) 101	..... 100
7. Derivative instruments	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	.....	.....
10. Total gross investment income	3,752,770	3,801,388
11. Investment expenses .....	.....	(g) 141,832
12. Investment taxes, licenses and fees, excluding federal income taxes .....	.....	(g)
13. Interest expense .....	.....	(h)
14. Depreciation on real estate and other invested assets .....	.....	(i)
15. Aggregate write-ins for deductions from investment income .....	.....	.....
16. Total deductions (Lines 11 through 15) .....	.....	..... 141,832
17. Net investment income (Line 10 minus Line 16) .....	.....	3,659,556
DETAILS OF WRITE-INS		
0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.....	.....
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	.....
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....	.....	.....

- (a) Includes \$28,486 accrual of discount less \$253,858 amortization of premium and less \$12,593 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds
1.1 Bonds exempt from U.S. tax
1.2 Other bonds (unaffiliated) .....	..... (52,102)	.....	..... (52,102)	.....	.....
1.3 Bonds of affiliates
2.1 Preferred stocks (unaffiliated)
2.11 Preferred stocks of affiliates
2.2 Common stocks (unaffiliated) 7,408,843	.....
2.21 Common stocks of affiliates
3. Mortgage loans
4. Real estate
5. Contract loans
6. Cash, cash equivalents and short-term investments
7. Derivative instruments
8. Other invested assets
9. Aggregate write-ins for capital gains (losses)
10. Total capital gains (losses) .....	..... (52,102)	.....	..... (52,102)	..... 7,408,843	.....
DETAILS OF WRITE-INS					
0901.
0902.
0903.
0998. Summary of remaining write-ins for Line 9 from overflow page
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)

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

EXHIBIT OF NON-ADMITTED ASSETS

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

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

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

	SSAP #	F/S Page	F/S Line #	2019	2018
NET INCOME					
(1) Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 3,120,737	\$ 5,125,141
(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	\$ 3,120,737	\$ 5,125,141
SURPLUS					
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 111,088,787	\$ 102,118,279
(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	\$ 111,088,787	\$ 102,118,279

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

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

C. Accounting Policies

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

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

In addition, the Company uses the following accounting policies:

1. Cash equivalents, highly liquid debt instruments with original maturities of 90 days or less, and short term investments are carried at amortized cost, which approximates fair value.
2. Fixed maturities (bonds and notes) with an NAIC designation of 1 or 2 are valued and reported in accordance with the NAIC *Purposes and Procedures Manual of the NAIC Investment Analysis Office*, generally at amortized cost using the scientific interest method. Fixed maturities with an NAIC designation 3 through 6 are carried at the lower of amortized cost or fair value, with the difference reflected in assigned surplus.
3. Common stocks of non-affiliates are stated at fair values.
4. The Company does not have any investments in preferred stocks.
5. The Company does not have any investments in mortgage loans.
6. The Company does not have any investments in loan-backed and structured securities.
7. The Company does not have any investments in non-insurance subsidiaries, controlled or affiliated companies.
8. The Company does not have any investments in joint ventures, partnerships, and limited liability entities.
9. The Company does not have any investments in derivatives.
10. In the event that a first-order approximation (excluding anticipated investment income) of estimated future costs related to unearned premium as of a particular evaluation date exceeds the unearned premium as of that date, the Company would incorporate consideration of the related investment income it would expect to earn. However, to date the Company has not had to proceed to this step in order to demonstrate that no premium deficiency exists.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
12. The Company has not modified its capitalization policy from a prior period.
13. The Company has no pharmaceutical rebate receivables.

D. Going Concern

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

2. Accounting Changes and Correction of Errors

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

3. Business Combinations and Goodwill – Not applicable

4. Discontinued Operations – Not applicable

5. Investments

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

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted and Nonadmitted) Restricted							Total Monadmitted Restricted	Total Admitted Restricted (5 minus 8)	Percentage		
	Current Year					Total from Prior Year	Increase/ (Decrease) (5 minus 6)			Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
	1	2	3	4	5							
a. Subject to contractual obligation for which liability is not shown	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.00%	0.00%	
b. Collateral held under security lending agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
c. Subject to repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
d. Subject to reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
e. Subject to dollar repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
g. Placed under option contracts	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
i. FHLB capital stock	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
j. On deposit with states bodies	11,223,736	0	0	0	11,223,736	11,281,659	(57,923)	0	11,223,736	7.66%	7.66%	
k. Pledged collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
l. Pledged as collateral not captured in other categories	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
m. Other restricted assets	0	0	0	0	0	0	0	0	0	0.00%	0.00%	
n. Total Restricted Assets	\$ 11,223,736	\$ 0	\$ 0	\$ 0	\$ 11,223,736	\$ 11,281,659	\$ (57,923)	\$ 0	\$ 11,223,736	7.66%	7.66%	

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

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories – Not applicable
3. Detail of Other Restricted Assets – Not applicable
4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements – Not applicable

M. Working Capital Finance Investments – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

N. Offsetting and Netting of Assets and Liabilities – Not applicable

O. 5* Securities – Not applicable

P. Short Sales – Not applicable

Q. Prepayment Penalties and Acceleration Fees

	General Account	Protected Cell
(1) Number of CUSIPs	1	0
(2) Aggregate Amount of Investment Income	\$ 64,067	\$ 0

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

7. Investment Income

A. The Company does not admit investment income due and accrued if amounts are over 90 days past due.

B. No amount of investment income was excluded.

8. Derivative Instruments – Not applicable

9. Income Taxes

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

1.

	2019		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 0	\$ 0	\$ 0
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	0	0	0
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	0	0	0
(f) Deferred Tax Liabilities	\$ 10,399	\$ 3,594,095	\$ 3,604,494
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (10,399)	\$ (3,594,095)	\$ (3,604,494)

	2018		
	Capital	Capital	Capital
(a) Gross Deferred Tax Assets	\$ 0	\$ 0	\$ 0
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	0	0	0
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	0	0	0
(f) Deferred Tax Liabilities	\$ 9,459	\$ 2,035,962	\$ 2,045,421
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (9,459)	\$ (2,035,962)	\$ (2,045,421)

	Change		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ 0	\$ 0	\$ 0
(b) Statutory Valuation Allowance Adjustments	0	0	0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	0	0	0
(d) Deferred Tax Assets Nonadmitted	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	0	0	0
(f) Deferred Tax Liabilities	\$ 940	\$ 1,558,133	\$ 1,559,073
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (940)	\$ (1,558,133)	\$ (1,559,073)

2.

	2019		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 0	\$ 0	\$ 0
(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)	0	0	0
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	0	0	0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	16,663,318
(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	0	0	0
(d) Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ 0	\$ 0	\$ 0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

	2018		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 0	\$ 0	\$ 0
(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)	0	0	0
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	0	0	0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	15,317,742
(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	0	0	0
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ 0	\$ 0	\$ 0

	Change		
	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101			
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 0	\$ 0	\$ 0
(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)	0	0	0
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	0	0	0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	1,345,576
(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	0	0	0
(d)Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	\$ 0	\$ 0	\$ 0

3.

	2019 Percentage	2018 Percentage
(a)Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	2315%	3089%
(b)Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 above	\$ 111,088,787	\$ 102,118,279

4.

	2019		
	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)	\$ 0	\$ 0	\$ 0
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)	\$ 0	\$ 0	\$ 0
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.			

	2018		
	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)	\$ 0	\$ 0	\$ 0
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)	\$ 0	\$ 0	\$ 0
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.			

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

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

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

Description	As of December 31, 2019		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 3,607,971	\$ 757,674	21.00 %
Net tax exempt interest	(1,069,633)	(224,623)	(6.23)%
Net dividends received deduction (DRD)	(200,381)	(42,080)	(1.17)%
Other items permanent, net	28	6	0.00 %
DRD on accrued	(2,500)	(525)	(0.01)%
Total	\$ 2,335,485	\$ 490,452	13.59 %
Federal income tax expense incurred/(benefit)	\$ 2,372,271	\$ 498,177	13.81 %
Tax on capital gains/(losses)	(52,100)	(10,941)	(0.30)%
Change in nonadmitted excluding deferred tax asset	0	0	0.00 %
Change in net deferred income tax charge/(benefit)	15,314	3,216	0.08 %
Total statutory income taxes incurred/(benefit)	\$ 2,335,485	\$ 490,452	13.59 %

Description	As of December 31, 2018		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 6,138,085	\$ 1,288,998	21.00 %
Net tax exempt interest	(1,083,095)	(227,450)	(3.71)%
Net dividends received deduction (DRD)	(213,190)	(44,770)	(0.73)%
Other items permanent, net	13	3	0.00 %
DRD on accrued	(5,276)	(1,108)	(0.02)%
Total	\$ 4,836,537	\$ 1,015,673	16.54 %
Federal income tax expense incurred/(benefit)	\$ 2,239,797	\$ 470,357	7.66 %
Tax on capital gains/(losses)	2,583,745	542,587	8.84 %
Change in nonadmitted excluding deferred tax asset	0	0	0.00 %
Change in net deferred income tax charge/(benefit)	12,995	2,729	0.04 %
Total statutory income taxes incurred/(benefit)	\$ 4,836,537	\$ 1,015,673	16.54 %

E. Operating Loss and Tax Credit Carryforwards

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

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

Year	Ordinary	Capital	Total
2019	\$ 468,413	\$ 2,513	\$ 470,926
2018	455,190	542,587	997,777
2017	0	177,320	177,320
Total	\$ 923,603	\$ 722,420	\$ 1,646,023

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

F. Consolidated Federal Income Tax Return

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

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

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

G. Federal or Foreign Income Tax Loss Contingencies

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

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

C. Change in Terms of Intercompany Agreements – Not applicable

D. Amounts Due to or from Related Parties

At December 31, 2019, the Company reported \$11,628,712 due from the Parent Company, The Cincinnati Insurance Company. The terms of the settlement require that these amounts be settled within 30 days.

E. Guarantees or Contingencies for Related Parties – Not applicable

F. Management, Service Contracts, Cost Sharing Arrangements

The Company has the following management agreements with related parties:

1. Inter-company Benefits and Expense Allocation Agreement.
2. Inter-company Cost Sharing and Expense Allocation Agreement.
3. Inter-company Tax Sharing Agreement.
4. Inter-company Reinsurance Agreement.

G. Nature of Relationships that Could Affect Operations

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

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

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

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

K. Investment in Foreign Insurance Subsidiaries – Not applicable

L. Investment in Downstream Noninsurance Holding Company – Not applicable

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

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

O. SCA Loss Tracking – Not applicable

11. Debt – Not applicable

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

A. Defined Benefit Plan – Not applicable

B. Defined Benefit Plan Assets – Not applicable

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

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

E. Defined Contribution Plans – Not applicable

F. Multiemployer Plans – Not applicable

G. Consolidated/Holding Company Plans

1. Defined Benefit Pension Plan – The Company participates in a qualified, noncontributory defined benefit pension plan sponsored by Cincinnati Financial Corporation, the Ultimate Parent. The Company has no legal obligations for benefits under the plan.
2. Defined Contribution Plan - The Company participates in a qualified, defined contribution plan sponsored by Cincinnati Financial Corporation, the Ultimate Parent. The Company has no legal obligation for benefits under the plan. Cincinnati Financial Corporation allocates amounts to the Company based on an inter-company management fee. The Company's share of net expense for the defined contribution plan was \$1,023 and \$2,684 for 2019 and 2018, respectively.

H. Postemployment Benefits and Compensated Absences – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

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

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

1. The Company has 2,000 shares authorized, 1,800 shares issued and 1,800 shares outstanding. All shares are Class A shares.
2. Preferred stock issues – Not applicable
3. The maximum amount of dividends or distributions which may be paid to stockholders by property and casualty companies domiciled in the state of Ohio without prior approval or expiration of a 30 day waiting period without disapproval of the Director of Insurance is the greater of net income or 10% of policyholders' surplus as of the preceding December 31, but only to the extent of earned surplus as of the preceding December 31. The maximum amount of ordinary dividends or distributions the Company may pay in 2020 based upon surplus is \$11,108,879.
4. The Company did not pay any dividends during 2019.
5. Within the limitations of item 3 above, there are no specific restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
6. Surplus restrictions – Not applicable
7. Mutual Surplus Advances – Not applicable
8. Company Stock Held for Special Purposes – Not applicable
9. Changes in Special Surplus Funds – Not applicable
10. The portion of unassigned funds (surplus) represented or (reduced) by cumulative unrealized gains/(losses) are \$16,472,065 offset by deferred tax of \$3,459,134 for a net balance of \$13,012,931.
11. Surplus Notes – Not applicable
12. Restatement of Quasi-Reorganization – Not applicable
13. Date of Quasi-Reorganization – Not applicable

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments – Not applicable

- B. Assessments

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

- C. Gain Contingencies – Not applicable

- D. Claims Related to Extra Contractual Obligations or Bad Faith Claims Stemming from Lawsuits – Not applicable

- E. Product Warranties – Not applicable

- F. Joint and Several Liabilities – Not applicable

- G. All Other Contingencies

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

- 15. Leases – Not applicable**

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

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

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

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

20. Fair Value Measurements

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

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

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

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

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

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

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

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

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

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

Assets at Fair Value:

	Level 1	Level 2	Level 3	Net Asset Value (NAV) Included in Level 2	Total
Common Stock	\$ 33,004,640	\$ 0	\$ 0	\$ 0	\$ 33,004,640

2. Fair Value Measurements in Level 3 of the Fair Value Hierarchy – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

- 3. Transfers between levels are assumed to occur at the beginning of the period.
- 4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values – See narrative in Note 20A1.

B. Other Fair Value Disclosures – Not applicable

C. Fair Values for all Financial Instruments by Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable
Bonds	\$ 83,782,743	\$ 79,471,428	\$ 988,043	\$ 82,794,700	\$ 0	\$ 0	\$ 0
Common Stock	33,004,640	33,004,640	33,004,640	0	0	0	0

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

21. Other Items

A. Unusual or Infrequent Items – Not applicable

B. Troubled Debt Restructuring – Not applicable

C. Other Disclosures

Assets in the amount of \$11,223,736 and \$11,281,659 at December 31, 2019 and 2018, respectively, were on deposit with government authorities or trustees as required by law.

D. Business Interruption Insurance Recoveries – Not applicable

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

F. Subprime-Mortgage-Related Risk Exposure

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

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

22. Subsequent Events

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

23. Reinsurance

A. Unsecured Reinsurance Recoverable

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

B. Reinsurance Recoverable in Dispute – Not applicable

C. Reinsurance Assumed and Ceded

1.

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium	Commission	Premium	Commission	Premium	Commission
	Reserve	Equity	Reserve	Equity	Reserve	Equity
a. Affiliates	\$ 0	\$ 0	\$ 190,688,909	\$ 25,148,196	\$ (190,688,909)	\$ (25,148,196)
b. All Other	0	0	0	0	0	0
c. Total	\$ 0	\$ 0	\$ 190,688,909	\$ 25,148,196	\$ (190,688,909)	\$ (25,148,196)
d. Direct Unearned Premium Reserve			\$ 190,688,909			

2.

REINSURANCE				
	Direct	Assumed	Ceded	Net
a. Contingent Commission	\$ 12,012,000	\$ 0	\$ 12,012,000	\$ 0
b. Sliding Scale Adjustments	0	0	0	0
c. Other Profit Commission Arrangements	0	0	0	0
d. Total	\$ 12,012,000	\$ 0	\$ 12,012,000	\$ 0

3. Protected Cell – Not applicable

D. Uncollectible Reinsurance – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

- E. Commutation of Ceded Reinsurance – Not applicable
- F. Retroactive Reinsurance – Not applicable
- G. Reinsurance Accounted for as a Deposit – Not applicable
- H. Disclosure for the Transfer of Property and Casualty Run-off Agreements – Not applicable
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation – Not applicable
- J. Reinsurance Agreement Qualifying for Reinsurer Aggregation – Not applicable

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

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

26. Intercompany Pooling Arrangements – Not applicable

27. Structured Settlements – Not applicable

28. Health Care Receivables – Not applicable

29. Participating Policies – Not applicable

30. Premium Deficiency Reserves

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

31. High Deductibles – Not applicable

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

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

33. Asbestos and Environmental Reserves

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

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

	ASBESTOS LOSSES	2015	2016	2017	2018	2019
1.	Direct	Direct	Direct	Direct	Direct	Direct
	Beginning Reserves	\$ 80,327	\$ 71,775	\$ 7,500	\$ 0	\$ 0
	Incurred Loss & LAE	29,936	(64,275)	(7,500)	3,716	0
	Calendar year payments for Loss and LAE	38,488	0	0	3,716	0
	Ending Reserves	\$ 71,775	\$ 7,500	\$ 0	\$ 0	\$ 0
2.	Assumed	Assumed	Assumed	Assumed	Assumed	Assumed
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments for Loss and LAE	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3.	Net	Net	Net	Net	Net	Net
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments for Loss and LAE	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

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

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

	ENVIRONMENTAL LOSSES	2015	2016	2017	2018	2019
1.	Direct					
	Beginning Reserves	\$ 108,542	\$ 225,083	\$ 452,961	\$ 447,255	\$ 426,612
	Incurred Loss & LAE	234,334	777,894	576,058	633,641	1,159,256
	Calendar year payments for Loss and LAE	117,793	550,016	581,764	654,284	1,310,577
	Ending Reserves	\$ 225,083	\$ 452,961	\$ 447,255	\$ 426,612	\$ 275,292
2.	Assumed					
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments for Loss and LAE	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3.	Net					
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0
	Calendar year payments for Loss and LAE	0	0	0	0	0
	Ending Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

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

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

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

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

34. Subscriber Savings Accounts – Not applicable

35. Multiple Peril Crop Insurance – Not applicable

36. Financial Guaranty Insurance – Not applicable

37. Other

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

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

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

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

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

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1, 1A and 2
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? Ohio
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [X] No []
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0000020286
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2014
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2014
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 10/05/2015
- 3.4 By what department or departments?
Ohio
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] N/A []
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information:
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
7.21 State the percentage of foreign control; %
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 Deloitte & Touche; Suite 1900; 250 E. 5th St; PO Box 5340; Cincinnati, OH 45201-5340
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
 10.2 If the response to 10.1 is yes, provide information related to this exemption:

- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
 10.4 If the response to 10.3 is yes, provide information related to this exemption:

- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
 10.6 If the response to 10.5 is no or n/a, please explain

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
 Greg Chrin, Deloitte Consulting LLP, City Place I, 33rd Floor, 185 Asylum Street, Hartford, CT, 06103-3402
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
 12.11 Name of real estate holding company
 12.12 Number of parcels involved
 12.13 Total book/adjusted carrying value \$
- 12.2 If, yes provide explanation:

- 13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
 a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 c. Compliance with applicable governmental laws, rules and regulations;
 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:

- 14.2 Has the code of ethics for senior managers been amended? Yes [X] No []
 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
 The Code of Ethics for Senior Financial Officers was revised on 2/1/19 to limit the codes to U.S. subsidiaries of Cincinnati Financial Corporation.
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

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

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

BOARD OF DIRECTORS

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

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- | | |
|---|----------|
| 20.11 To directors or other officers..... | \$ |
| 20.12 To stockholders not officers..... | \$ |
| 20.13 Trustees, supreme or grand (Fraternal Only) | \$ |
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- | | |
|---|----------|
| 20.21 To directors or other officers..... | \$ |
| 20.22 To stockholders not officers..... | \$ |
| 20.23 Trustees, supreme or grand (Fraternal Only) | \$ |
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- | | |
|---------------------------------|----------|
| 21.21 Rented from others..... | \$ |
| 21.22 Borrowed from others..... | \$ |
| 21.23 Leased from others | \$ |
| 21.24 Other | \$ |
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- | |
|---|
| 22.21 Amount paid as losses or risk adjustment \$ |
| 22.22 Amount paid as expenses |
| 22.23 Other amounts paid |
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 11,628,712

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [X] No []
- 24.02 If no, give full and complete information relating thereto

- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

- 24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] N/A [X]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 24.09 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

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

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

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03) Yes [X] No []

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

25.21 Subject to repurchase agreements\$
 25.22 Subject to reverse repurchase agreements\$
 25.23 Subject to dollar repurchase agreements\$
 25.24 Subject to reverse dollar repurchase agreements\$
 25.25 Placed under option agreements\$
 25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock\$
 25.27 FHLB Capital Stock\$
 25.28 On deposit with states\$11,223,736
 25.29 On deposit with other regulatory bodies\$
 25.30 Pledged as collateral - excluding collateral pledged to an FHLB\$
 25.31 Pledged as collateral to FHLB - including assets backing funding agreements\$
 25.32 Other\$

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
 If no, attach a description with this statement.

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

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? .. Yes [] No []

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

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

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

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

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

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

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [X] No []

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

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

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

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

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

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

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

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

1 Name of Firm or Individual	2 Affiliation

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

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

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

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

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

29.2 If yes, complete the following schedule:

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	79,471,428	83,782,743	4,311,315
30.2 Preferred stocks			
30.3 Totals	79,471,428	83,782,743	4,311,315

30.4 Describe the sources or methods utilized in determining the fair values:

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

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

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

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

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

32.2 If no, list exceptions:

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

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

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

OTHER

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$1,372,308

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

1 Name	2 Amount Paid
.....	

GENERAL INTERROGATORIES

37.1 Amount of payments for legal expenses, if any?\$7,705

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

1 Name	2 Amount Paid
HUNTER WARFIELD INC	7,165
.....

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

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

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

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]

1.2 If yes, indicate premium earned on U. S. business only. \$ _____

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ _____
 1.31 Reason for excluding

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

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. \$ _____

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$ _____

1.62 Total incurred claims \$ _____

1.63 Number of covered lives

All years prior to most current three years

1.64 Total premium earned \$ _____

1.65 Total incurred claims \$ _____

1.66 Number of covered lives

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$ _____

1.72 Total incurred claims \$ _____

1.73 Number of covered lives

All years prior to most current three years

1.74 Total premium earned \$ _____

1.75 Total incurred claims \$ _____

1.76 Number of covered lives

2. Health Test:

	1	2
	Current Year	Prior Year
2.1 Premium Numerator		
2.2 Premium Denominator		
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator		
2.5 Reserve Denominator	6,413	
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

3.1 Does the reporting entity issue both participating and non-participating policies? Yes [] No [X]

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

3.21 Participating policies \$ _____

3.22 Non-participating policies \$ _____

4. For mutual reporting Entities and Reciprocal Exchanges Only:

4.1 Does the reporting entity issue assessable policies? Yes [] No []

4.2 Does the reporting entity issue non-assessable policies? Yes [] No []

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? % _____

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

5. For Reciprocal Exchanges Only:

5.1 Does the Exchange appoint local agents? Yes [] No []

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation..... Yes [] No [] N/A []

5.22 As a direct expense of the exchange..... Yes [] No [] N/A []

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

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No []

5.5 If yes, give full information

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
Protection is provided through several excess reinsurance contracts for workers' compensation coverage.
- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.
The company has engaged with JLT Re, who uses the catastrophe risk models from Risk Management Solutions and Applied Insurance Research to model potential maximum loss exposure.
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
The company has a catastrophe reinsurance program insuring losses to \$500 million in excess of \$100 million, plus co-participation by layer. .
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [X] No []
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.
- 7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)? Yes [] No [X]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions:
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No []
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]
- 8.2 If yes, give full information
.....
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [] No [X]
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 37 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or, Yes [] No [X]
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [X] No []
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [] No [X]
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [X] No [] N/A []

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]
- 11.2 If yes, give full information
.....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
 12.11 Unpaid losses\$
 12.12 Unpaid underwriting expenses (including loss adjustment expenses)\$
- 12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds\$
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [X] N/A []
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
 12.41 From %
 12.42 To %
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]
- 12.6 If yes, state the amount thereof at December 31 of the current year:
 12.61 Letters of credit\$
 12.62 Collateral and other funds\$
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation):\$
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
.....
- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No []
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []
- 14.5 If the answer to 14.4 is no, please explain:
.....
- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]
- 15.2 If yes, give full information
.....
- 16.1 Does the reporting entity write any warranty business? Yes [] No [X]
 If yes, disclose the following information for each of the following types of warranty coverage:

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

* Disclose type of coverage:
.....

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [X]

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

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance\$
 17.12 Unfunded portion of Interrogatory 17.11\$
 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11...\$
 17.14 Case reserves portion of Interrogatory 17.11\$
 17.15 Incurred but not reported portion of Interrogatory 17.11\$
 17.16 Unearned premium portion of Interrogatory 17.11\$
 17.17 Contingent commission portion of Interrogatory 17.11\$

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

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

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

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

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

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

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

FIVE-YEAR HISTORICAL DATA

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

	1 2019	2 2018	3 2017	4 2016	5 2015
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	252,119,243	251,875,096	248,982,970	257,419,571	264,980,707
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	70,378,133	68,643,606	68,510,573	65,837,757	63,047,366
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	94,557,458	98,793,664	101,675,545	105,191,271	107,394,896
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	417,054,834	419,312,366	419,169,088	428,448,599	435,422,969
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)					
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)					
14. Net investment gain or (loss) (Line 11)	3,618,396	5,594,566	4,724,313	4,783,180	3,232,051
15. Total other income (Line 15)	518	933			
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	498,177	470,357	742,651	655,743	572,946
18. Net income (Line 20)	3,120,737	5,125,141	3,981,662	4,127,437	2,659,105
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	146,520,755	135,609,648	132,971,976	130,336,161	124,381,586
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)					
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	35,431,968	33,491,369	32,972,583	37,156,801	36,626,033
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	3,600,000	3,600,000	3,600,000	3,600,000	3,600,000
26. Surplus as regards policyholders (Page 3, Line 37)	111,088,787	102,118,279	99,999,393	93,179,360	87,755,553
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	10,040,234	7,411,856	(7,614,632)	(793,193)	1,251,620
Risk-Based Capital Analysis					
28. Total adjusted capital	111,088,787	102,118,279	99,999,393	93,179,360	87,755,553
29. Authorized control level risk-based capital	4,798,228	3,305,874	3,248,575	2,937,983	2,813,895
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	69.2	73.2	71.6	73.3	73.7
31. Stocks (Lines 2.1 & 2.2)	28.8	24.5	24.8	24.6	23.4
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	2.0	2.2	3.0	2.2	2.9
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)				0.0	
38. Receivables for securities (Line 9)			0.6		
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	5,852,986	(3,003,524)	3,048,079	1,357,898	(476,637)
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	8,970,508	2,118,886	6,820,033	5,423,807	2,176,299
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	105,412,605	101,221,450	104,474,768	85,891,934	79,566,415
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	29,361,785	36,854,369	29,778,730	24,903,571	28,520,720
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	43,367,587	38,776,316	44,729,777	44,415,482	32,511,866
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	178,141,978	176,852,135	178,983,276	155,210,987	140,599,001
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)					
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)					
68. Loss expenses incurred (Line 3)					
69. Other underwriting expenses incurred (Line 4)					
70. Net underwriting gain (loss) (Line 8)					
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)					
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)					
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)					
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0).....					
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)					
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)					

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



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0244

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2019

NAIC Company Code 23280

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 63,992

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Cols. 6 + 7	9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
0499999. Total - U.S. Non-Pool														
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates														
AA-9992118	00000	National Workers Comp Reins Pool	NY		6	188	195							
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools														
1299999. Total - Pools and Associations														
9999999 Totals														

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
NONE					

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

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
31-0542366	10677	The Cincinnati Insurance Company	OH		417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	
0399999		Total Authorized - Affiliates - U.S. Non-Pool - Other			417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	
0499999		Total Authorized - Affiliates - U.S. Non-Pool			417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	
0799999		Total Authorized - Affiliates - Other (Non-U.S.)																	
0899999		Total Authorized - Affiliates			417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	
1499999		Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	
1899999		Total Unauthorized - Affiliates - U.S. Non-Pool																	
2199999		Total Unauthorized - Affiliates - Other (Non-U.S.)																	
2299999		Total Unauthorized - Affiliates																	
2899999		Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																	
3299999		Total Certified - Affiliates - U.S. Non-Pool																	
3599999		Total Certified - Affiliates - Other (Non-U.S.)																	
3699999		Total Certified - Affiliates																	
4299999		Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																	
4399999		Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)			417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	
4499999		Total Protected Cells (Sum of 1399999, 2799999 and 4199999)																	
9999999		Totals			417,055	12,180	3,887	232,188		194,418	85,681	190,689	12,012	731,055		30,480		700,575	

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
31-0542366	The Cincinnati Insurance Company					30,480	700,575		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other			XXX		30,480	700,575		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX		30,480	700,575		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX											XXX		
0899999	Total Authorized - Affiliates			XXX		30,480	700,575								XXX		
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX		30,480	700,575								XXX		
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX											XXX		
2299999	Total Unauthorized - Affiliates			XXX											XXX		
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX											XXX		
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX											XXX		
3699999	Total Certified - Affiliates			XXX											XXX		
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX											XXX		
4399999	Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)			XXX		30,480	700,575								XXX		
4499999	Total Protected Cells (Sum of 1399999, 2799999 and 4199999)			XXX											XXX		
9999999	Totals			XXX		30,480	700,575								XXX		

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	Overdue					43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41											
.31-0542366 ...	The Cincinnati Insurance Company	16,067						16,067		16,067								
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		16,067						16,067		16,067								XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool		16,067						16,067		16,067								XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																		XXX
0899999. Total Authorized - Affiliates		16,067						16,067		16,067								XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		16,067						16,067		16,067								XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																		XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																		XXX
2299999. Total Unauthorized - Affiliates																		XXX
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		XXX
3299999. Total Certified - Affiliates - U.S. Non-Pool																		XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)																		XXX
3699999. Total Certified - Affiliates																		XXX
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		XXX
4399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)		16,067						16,067		16,067								XXX
4499999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)																		XXX
9999999 Totals		16,067						16,067		16,067								XXX

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
31-0542366	The Cincinnati Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999	Total Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX				XXX	XXX									
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX				XXX	XXX									
3699999	Total Certified - Affiliates			XXX				XXX	XXX									
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX				XXX	XXX									
4399999	Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)			XXX				XXX	XXX									
4499999	Total Protected Cells (Sum of 1399999, 2799999 and 4199999)			XXX				XXX	XXX									
9999999	Totals			XXX				XXX	XXX									

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
31-0542366	The Cincinnati Insurance Company		XXX	XXX				XXX	XXX	
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other		XXX	XXX				XXX	XXX	
0499999	Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX				XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX				XXX	XXX	
0899999	Total Authorized - Affiliates		XXX	XXX				XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX				XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX		XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX		XXX	
2299999	Total Unauthorized - Affiliates				XXX	XXX	XXX		XXX	
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX		XXX	
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4399999	Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)									
4499999	Total Protected Cells (Sum of 1399999, 2799999 and 4199999)									
9999999	Totals									

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

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
NONE				
Total				

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

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.
2.
3.
4.
5.

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	The Cincinnati Ins Co	731,055	417,055	Yes [X] No []
7.	Yes [] No []
8.	Yes [] No []
9.	Yes [] No []
10.	Yes [] No []

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	114,769,575		114,769,575
2. Premiums and considerations (Line 15)			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	16,067,053	(16,067,053)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	15,684,128		15,684,128
6. Net amount recoverable from reinsurers		688,563,054	688,563,054
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	146,520,755	672,496,001	819,016,757
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	6,413	512,287,367	512,293,780
10. Taxes, expenses, and other obligations (Lines 4 through 8)	3,608,324		3,608,324
11. Unearned premiums (Line 9)		190,688,909	190,688,909
12. Advance premiums (Line 10)			
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	30,480,275	(30,480,275)	
15. Funds held by company under reinsurance treaties (Line 13)			
16. Amounts withheld or retained by company for account of others (Line 14)	1,336,956		1,336,956
17. Provision for reinsurance (Line 16)			
18. Other liabilities			
19. Total liabilities excluding protected cell business (Line 26)	35,431,968	672,496,001	707,927,969
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	111,088,787	XXX	111,088,787
22. Totals (Line 38)	146,520,755	672,496,001	819,016,756

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [X] No []

If yes, give full explanation: The Company has a 100% quota share reinsurance agreement with the parent, The Cincinnati Insurance Company.

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4	5	6	7	8	9			
1. Prior.....	XXX	XXX	XXX	2,304	2,304	98	98	162	162		XXX	
2. 2010.....	67,932	67,932		33,417	33,417	3,080	3,080	5,656	5,656		XXX	
3. 2011.....	94,275	94,275		46,772	46,772	4,341	4,341	10,495	10,495		XXX	
4. 2012.....	233,507	233,507		117,140	117,140	10,391	10,391	19,040	19,040		XXX	
5. 2013.....	312,989	312,989		130,804	130,804	15,114	15,114	20,167	20,167		XXX	
6. 2014.....	375,993	375,993		155,525	155,525	17,366	17,366	24,266	24,266		XXX	
7. 2015.....	426,973	426,973		155,449	155,449	16,726	16,726	23,059	23,059		XXX	
8. 2016.....	432,819	432,819		167,953	167,953	15,028	15,028	22,180	22,180		XXX	
9. 2017.....	421,630	421,630		140,758	140,758	10,408	10,408	20,166	20,166		XXX	
10. 2018.....	420,770	420,770		123,689	123,689	6,537	6,537	17,629	17,629		XXX	
11. 2019.....	414,313	414,313		64,815	64,815	2,631	2,631	9,864	9,864		XXX	
12. Totals	XXX	XXX	XXX	1,138,626	1,138,626	101,722	101,722	172,685	172,685		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Unpaid				
	13	14	15	16	17	18	19	20	21	22			
1. Prior.....	20,862	20,862	40,263	40,263			2,254	2,254					XXX
2. 2010.....	2,045	2,045	3,920	3,920			185	185					XXX
3. 2011.....	2,856	2,856	3,728	3,728			242	242					XXX
4. 2012.....	3,155	3,155	5,063	5,063			917	917	7	7			XXX
5. 2013.....	4,090	4,090	4,517	4,517			1,925	1,925	99	99			XXX
6. 2014.....	12,576	12,576	5,364	5,364			3,367	3,367	842	842			XXX
7. 2015.....	13,550	13,550	11,415	11,415			5,745	5,745	2,254	2,254			XXX
8. 2016.....	23,953	23,953	12,905	12,905			9,345	9,345	2,895	2,895			XXX
9. 2017.....	31,467	31,467	19,788	19,788			14,826	14,826	3,685	3,685			XXX
10. 2018.....	48,103	48,103	32,393	32,393			21,098	21,098	5,050	5,050			XXX
11. 2019.....	69,530	69,530	55,062	55,062			25,777	25,777	12,683	12,683			XXX
12. Totals	232,188	232,188	194,418	194,418			85,681	85,681	27,515	27,515			XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....	48,304	48,304		71.1	71.1						
3. 2011.....	68,435	68,435		72.6	72.6						
4. 2012.....	155,713	155,713		66.7	66.7						
5. 2013.....	176,716	176,716		56.5	56.5						
6. 2014.....	219,307	219,307		58.3	58.3						
7. 2015.....	228,199	228,199		53.4	53.4						
8. 2016.....	254,258	254,258		58.7	58.7						
9. 2017.....	241,098	241,098		57.2	57.2						
10. 2018.....	254,499	254,499		60.5	60.5						
11. 2019.....	240,362	240,362		58.0	58.0						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

Schedule P - Part 2 - Summary

NONE

Schedule P - Part 3 - Summary

NONE

Schedule P - Part 4 - Summary

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....												
3. 2011.....												
4. 2012.....												
5. 2013.....												
6. 2014.....												
7. 2015.....												
8. 2016.....												
9. 2017.....												
10. 2018.....												
11. 2019.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....													
5. 2013.....													
6. 2014.....													
7. 2015.....													
8. 2016.....													
9. 2017.....													
10. 2018.....													
11. 2019.....													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2010.....											
3. 2011.....											
4. 2012.....											
5. 2013.....											
6. 2014.....											
7. 2015.....											
8. 2016.....											
9. 2017.....											
10. 2018.....											
11. 2019.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....												
3. 2011.....	1	1		2	2			1	1			1
4. 2012.....	29	29		9	9			2	2			3
5. 2013.....	40	40		4	4			1	1			2
6. 2014.....	40	40		5	5			3	3			4
7. 2015.....	34	34										
8. 2016.....	36	36		14	14			1	1			3
9. 2017.....	36	36		34	34			3	3			2
10. 2018.....	29	29		13	13			4	4			2
11. 2019.....	23	23										1
12. Totals	XXX	XXX	XXX	80	80			16	16			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....													
5. 2013.....													
6. 2014.....													
7. 2015.....													
8. 2016.....													
9. 2017.....													
10. 2018.....													
11. 2019.....	5	5											1
12. Totals	5	5											1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....											
3. 2011.....	3	3		300.0	300.0						
4. 2012.....	11	11		37.9	37.9						
5. 2013.....	5	5		12.5	12.5						
6. 2014.....	8	8		20.0	20.0						
7. 2015.....											
8. 2016.....	15	15		41.7	41.7						
9. 2017.....	37	37		101.7	101.7						
10. 2018.....	17	17		56.2	56.2						
11. 2019.....	5	5		23.4	23.4						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....	794	794		451	451	145	145	53	53			34
3. 2011.....	3,958	3,958		2,691	2,691	352	352	707	707			167
4. 2012.....	28,718	28,718		19,454	19,454	1,418	1,418	2,527	2,527			1,919
5. 2013.....	42,662	42,662		21,482	21,482	2,421	2,421	3,482	3,482			2,584
6. 2014.....	51,204	51,204		29,303	29,303	3,351	3,351	3,763	3,763			3,805
7. 2015.....	55,545	55,545		30,226	30,226	2,203	2,203	3,490	3,490			3,053
8. 2016.....	56,078	56,078		37,422	37,422	2,449	2,449	4,046	4,046			3,074
9. 2017.....	58,965	58,965		32,738	32,738	1,641	1,641	3,916	3,916			3,032
10. 2018.....	62,959	62,959		18,107	18,107	764	764	3,300	3,300			2,748
11. 2019.....	66,623	66,623		7,431	7,431	225	225	1,435	1,435			2,168
12. Totals	XXX	XXX	XXX	199,306	199,306	14,968	14,968	26,720	26,720			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....	(1)	(1)	9	9			20	20	7	7			
5. 2013.....	194	194	(150)	(150)			65	65	82	82			6
6. 2014.....	1,141	1,141	58	58			163	163	341	341			12
7. 2015.....	3,394	3,394	(29)	(29)			457	457	57	57			17
8. 2016.....	6,455	6,455	(185)	(185)			1,109	1,109	66	66			70
9. 2017.....	11,184	11,184	1,389	1,389			2,159	2,159	181	181			141
10. 2018.....	13,064	13,064	6,090	6,090			3,403	3,403	561	561			259
11. 2019.....	16,183	16,183	13,654	13,654			4,089	4,089	2,547	2,547			658
12. Totals	51,613	51,613	20,836	20,836			11,465	11,465	3,842	3,842			1,163

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
2. 2010.....	649	649		81.7	81.7						
3. 2011.....	3,750	3,750		94.7	94.7						
4. 2012.....	23,435	23,435		81.6	81.6						
5. 2013.....	27,576	27,576		64.6	64.6						
6. 2014.....	38,120	38,120		74.4	74.4						
7. 2015.....	39,798	39,798		71.6	71.6						
8. 2016.....	51,362	51,362		91.6	91.6						
9. 2017.....	53,208	53,208		90.2	90.2						
10. 2018.....	45,289	45,289		71.9	71.9						
11. 2019.....	45,564	45,564		68.4	68.4						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	2,305	2,305	96	96	156	156			XXX
2. 2010	63,931	63,931		31,108	31,108	2,726	2,726	5,261	5,261			4,220
3. 2011	75,348	75,348		34,017	34,017	3,035	3,035	8,301	8,301			5,081
4. 2012	94,081	94,081		41,955	41,955	3,229	3,229	7,886	7,886			5,783
5. 2013	107,741	107,741		43,668	43,668	3,454	3,454	6,486	6,486			5,844
6. 2014	120,140	120,140		45,924	45,924	3,961	3,961	7,982	7,982			6,123
7. 2015	133,549	133,549		45,518	45,518	4,170	4,170	7,824	7,824			6,313
8. 2016	131,607	131,607		43,138	43,138	3,403	3,403	7,333	7,333			5,616
9. 2017	118,105	118,105		29,059	29,059	2,258	2,258	6,153	6,153			4,899
10. 2018	116,882	116,882		27,987	27,987	1,849	1,849	5,666	5,666			4,848
11. 2019	110,911	110,911		14,299	14,299	775	775	3,668	3,668			4,407
12. Totals	XXX	XXX	XXX	358,977	358,977	28,956	28,956	66,717	66,717			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	20,858	20,858	40,263	40,263			2,254	2,254					170
2. 2010	1,789	1,789	3,920	3,920			185	185					18
3. 2011	2,856	2,856	3,728	3,728			242	242					12
4. 2012	2,500	2,500	4,700	4,700			311	311					37
5. 2013	1,909	1,909	3,374	3,374			418	418	14	14			34
6. 2014	2,552	2,552	3,851	3,851			570	570	351	351			62
7. 2015	5,083	5,083	7,545	7,545			846	846	1,198	1,198			100
8. 2016	11,560	11,560	6,785	6,785			1,319	1,319	1,558	1,558			186
9. 2017	7,480	7,480	12,041	12,041			2,066	2,066	1,365	1,365			224
10. 2018	17,232	17,232	13,391	13,391			3,331	3,331	1,668	1,668			538
11. 2019	27,706	27,706	18,148	18,148			5,126	5,126	3,302	3,302			2,001
12. Totals	101,525	101,525	117,746	117,746			16,668	16,668	9,456	9,456			3,382

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010	44,989	44,989		70.4	70.4						
3. 2011	52,179	52,179		69.3	69.3						
4. 2012	60,580	60,580		64.4	64.4						
5. 2013	59,323	59,323		55.1	55.1						
6. 2014	65,191	65,191		54.3	54.3						
7. 2015	72,184	72,184		54.1	54.1						
8. 2016	75,095	75,095		57.1	57.1						
9. 2017	60,423	60,423		51.2	51.2						
10. 2018	71,125	71,125		60.9	60.9						
11. 2019	73,025	73,025		65.8	65.8						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX	XXX	XXX								
2. 2010.....	1,366	1,366		1,116	1,116	82	82	117	117		34	
3. 2011.....	6,740	6,740		4,286	4,286	787	787	830	830		141	
4. 2012.....	49,368	49,368		27,567	27,567	3,558	3,558	4,746	4,746		2,153	
5. 2013.....	70,112	70,112		35,501	35,501	5,409	5,409	5,470	5,470		2,367	
6. 2014.....	87,986	87,986		34,357	34,357	4,026	4,026	6,290	6,290		2,676	
7. 2015.....	103,300	103,300		37,971	37,971	3,407	3,407	5,821	5,821		2,742	
8. 2016.....	104,555	104,555		42,422	42,422	4,918	4,918	5,066	5,066		2,462	
9. 2017.....	101,539	101,539		37,406	37,406	2,809	2,809	4,335	4,335		2,286	
10. 2018.....	98,162	98,162		37,239	37,239	1,992	1,992	4,131	4,131		2,101	
11. 2019.....	94,012	94,012		19,093	19,093	732	732	2,132	2,132		1,602	
12. Totals	XXX	XXX	XXX	276,957	276,957	27,720	27,720	38,938	38,938		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2010.....	165	165											3
3. 2011.....													1
4. 2012.....	562	562	150	150			339	339					15
5. 2013.....	1,142	1,142	305	305			677	677					17
6. 2014.....	2,113	2,113	244	244			1,255	1,255	49	49			33
7. 2015.....	1,678	1,678	(110)	(110)			2,134	2,134	456	456			45
8. 2016.....	2,643	2,643	(100)	(100)			3,315	3,315	484	484			67
9. 2017.....	4,858	4,858	(197)	(197)			5,055	5,055	838	838			118
10. 2018.....	7,568	7,568	3,000	3,000			7,100	7,100	1,189	1,189			219
11. 2019.....	11,346	11,346	7,243	7,243			8,189	8,189	3,111	3,111			519
12. Totals	32,076	32,076	10,535	10,535			28,064	28,064	6,127	6,127			1,037

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....	1,480	1,480		108.3	108.3						
3. 2011.....	5,902	5,902		87.6	87.6						
4. 2012.....	36,922	36,922		74.8	74.8						
5. 2013.....	48,504	48,504		69.2	69.2						
6. 2014.....	48,334	48,334		54.9	54.9						
7. 2015.....	51,357	51,357		49.7	49.7						
8. 2016.....	58,748	58,748		56.2	56.2						
9. 2017.....	55,104	55,104		54.3	54.3						
10. 2018.....	62,218	62,218		63.4	63.4						
11. 2019.....	51,846	51,846		55.1	55.1						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....												
3. 2011.....	14	14		25	25			2	2			1
4. 2012.....	289	289		19	19			18	18			3
5. 2013.....	732	732		6	6	20	20	27	27			5
6. 2014.....	1,559	1,559		860	860	318	318	119	119			20
7. 2015.....	2,189	2,189		1,370	1,370	330	330	125	125			22
8. 2016.....	2,235	2,235		98	98	175	175	131	131			21
9. 2017.....	2,413	2,413		1,103	1,103	56	56	126	126			19
10. 2018.....	2,396	2,396		475	475	109	109	106	106			18
11. 2019.....	2,349	2,349		25	25	7	7	47	47			10
12. Totals	XXX	XXX	XXX	3,981	3,981	1,016	1,016	702	702			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....			4	4			2	2					
5. 2013.....	200	200	10	10			10	10					1
6. 2014.....	533	533	(53)	(53)			38	38					2
7. 2015.....	151	151	(103)	(103)			98	98	7	7			3
8. 2016.....	493	493	70	70			218	218	14	14			6
9. 2017.....	659	659	93	93			385	385	33	33			5
10. 2018.....	837	837	579	579			585	585	48	48			10
11. 2019.....	243	243	1,118	1,118			671	671	112	112			5
12. Totals	3,115	3,115	1,718	1,718			2,007	2,007	214	214			32

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....											
3. 2011.....	27	27		192.9	192.9						
4. 2012.....	43	43		14.9	14.9						
5. 2013.....	273	273		37.4	37.4						
6. 2014.....	1,815	1,815		116.4	116.4						
7. 2015.....	1,979	1,979		90.4	90.4						
8. 2016.....	1,199	1,199		53.6	53.6						
9. 2017.....	2,454	2,454		101.7	101.7						
10. 2018.....	2,738	2,738		114.3	114.3						
11. 2019.....	2,224	2,224		94.7	94.7						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....												
3. 2011.....												
4. 2012.....												
5. 2013.....												
6. 2014.....	1	1										
7. 2015.....	4	4						2	2			1
8. 2016.....	2	2										
9. 2017.....	60	60										
10. 2018.....	63	63										
11. 2019.....	52	52				2	2	6	6			1
12. Totals	XXX	XXX	XXX			2	2	8	8			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....													
5. 2013.....													
6. 2014.....													
7. 2015.....													
8. 2016.....													
9. 2017.....									1	1			
10. 2018.....									1	1			
11. 2019.....	6	6							2	2			1
12. Totals	6	6							4	4			1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2010.....											
3. 2011.....											
4. 2012.....											
5. 2013.....											
6. 2014.....											
7. 2015.....	2	2		50.0	50.0						
8. 2016.....											
9. 2017.....	1	1		1.7	1.7						
10. 2018.....	1	1		1.6	1.6						
11. 2019.....	15	15		29.8	29.8						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	Direct and Assumed	Ceded	Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2010	14	14										XXX
3. 2011	78	78										XXX
4. 2012	482	482		27	27	5	5					XXX
5. 2013	823	823		165	165			1	1			XXX
6. 2014	1,153	1,153		14	14							XXX
7. 2015	1,432	1,432		78	78	11	11	1	1			XXX
8. 2016	1,558	1,558		107	107	11	11	2	2			XXX
9. 2017	1,652	1,652		59	59	1	1					XXX
10. 2018	1,702	1,702		80	80			2	2			XXX
11. 2019	1,655	1,655		67	67	5	5	3	3			XXX
12. Totals	XXX	XXX	XXX	598	598	32	32	8	8			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior													
2. 2010													
3. 2011													
4. 2012													
5. 2013													
6. 2014													
7. 2015									1	1			
8. 2016									1	1			
9. 2017									1	1			
10. 2018									1	1			
11. 2019									5	5			
12. Totals									9	9			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010											
3. 2011											
4. 2012	32	32		6.6	6.6						
5. 2013	166	166		20.2	20.2						
6. 2014	14	14		1.2	1.2						
7. 2015	91	91		6.4	6.4						
8. 2016	121	121		7.8	7.8						
9. 2017	61	61		3.7	3.7						
10. 2018	83	83		4.8	4.8						
11. 2019	80	80		4.8	4.8						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX	XXX	XXX			2	2	5				5			XXX
2. 2010.....	1,078	1,078		171	171	117	117	183	183			35
3. 2011.....	4,040	4,040		3,319	3,319	154	154	298	298			67
4. 2012.....	29,689	29,689		9,650	9,650	1,364	1,364	1,355	1,355			415
5. 2013.....	43,743	43,743		9,315	9,315	2,617	2,617	1,644	1,644			526
6. 2014.....	54,137	54,137		13,840	13,840	3,330	3,330	2,471	2,471			665
7. 2015.....	62,302	62,302		12,122	12,122	4,386	4,386	2,530	2,530			720
8. 2016.....	63,891	63,891		18,058	18,058	2,570	2,570	2,387	2,387			664
9. 2017.....	63,683	63,683		7,152	7,152	1,868	1,868	2,193	2,193			688
10. 2018.....	62,663	62,663		3,103	3,103	443	443	1,600	1,600			583
11. 2019.....	61,545	61,545		1,432	1,432	323	323	1,014	1,014			488
12. Totals	XXX	XXX	XXX	78,162	78,162	17,174	17,174	15,679	15,679			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	4	4											1
2. 2010.....	91	91											2
3. 2011.....													
4. 2012.....	28	28	190	190			245	245					1
5. 2013.....	565	565	822	822			605	605					17
6. 2014.....	4,005	4,005	1,321	1,321			1,067	1,067	8	8			29
7. 2015.....	2,111	2,111	3,746	3,746			1,705	1,705	103	103			46
8. 2016.....	1,833	1,833	5,595	5,595			2,542	2,542	205	205			47
9. 2017.....	5,439	5,439	5,493	5,493			3,769	3,769	455	455			113
10. 2018.....	4,342	4,342	8,287	8,287			4,914	4,914	657	657			140
11. 2019.....	8,013	8,013	13,172	13,172			5,434	5,434	1,528	1,528			227
12. Totals	26,431	26,431	38,626	38,626			20,281	20,281	2,956	2,956			623

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....	562	562		52.1	52.1						
3. 2011.....	3,771	3,771		93.4	93.4						
4. 2012.....	12,832	12,832		43.2	43.2						
5. 2013.....	15,568	15,568		35.6	35.6						
6. 2014.....	26,041	26,041		48.1	48.1						
7. 2015.....	26,704	26,704		42.9	42.9						
8. 2016.....	33,188	33,188		51.9	51.9						
9. 2017.....	26,369	26,369		41.4	41.4						
10. 2018.....	23,346	23,346		37.3	37.3						
11. 2019.....	30,916	30,916		50.2	50.2						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....	2	2										
3. 2011.....	12	12										
4. 2012.....	347	347		39	39			11	11			5
5. 2013.....	534	534		99	99	12	12	32	32			11
6. 2014.....	669	669		119	119			35	35			9
7. 2015.....	834	834		272	272			58	58			15
8. 2016.....	994	994		378	378	15	15	110	110			16
9. 2017.....	1,193	1,193		85	85			32	32			7
10. 2018.....	1,324	1,324		367	367	67	67	47	47			8
11. 2019.....	1,351	1,351		104	104			16	16			6
12. Totals	XXX	XXX	XXX	1,464	1,464	94	94	340	340			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....								(5)	(5)				
5. 2013.....								(4)	(4)				
6. 2014.....								20	20				
7. 2015.....								18	18				
8. 2016.....	57	57						(14)	(14)				4
9. 2017.....	69	69						73	73	17	17		1
10. 2018.....	99	99						203	203	32	32		3
11. 2019.....	90	90						294	294	57	57		5
12. Totals	316	316						585	585	106	106		13

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....											
3. 2011.....											
4. 2012.....	45	45		13.0	13.0						
5. 2013.....	139	139		26.0	26.0						
6. 2014.....	174	174		26.1	26.1						
7. 2015.....	348	348		41.7	41.7						
8. 2016.....	546	546		54.9	54.9						
9. 2017.....	276	276		23.1	23.1						
10. 2018.....	815	815		61.6	61.6						
11. 2019.....	561	561		41.5	41.5						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	2,096	2,096	320	320	281	281			XXX
2. 2018	40,964	40,964		21,154	21,154	764	764	954	954			XXX
3. 2019	40,819	40,819		9,480	9,480	350	350	478	478			XXX
4. Totals	XXX	XXX	XXX	32,730	32,730	1,434	1,434	1,713	1,713			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	524	524							277	277			29
2. 2018	4,062	4,062							114	114			44
3. 2019	4,979	4,979							439	439			120
4. Totals	9,565	9,565							830	830			193

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2018	27,048	27,048		66.0	66.0						
3. 2019	15,726	15,726		38.5	38.5						
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	(272)	(272)	87	87	89	89			XXX
2. 2018.....	27,461	27,461		14,875	14,875	439	439	1,616	1,616			2,713
3. 2019.....	28,482	28,482		12,670	12,670	203	203	969	969			2,347
4. Totals.....	XXX	XXX	XXX	27,272	27,272	729	729	2,674	2,674			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	(121)	(121)	34	34			65	65	1,494	1,494			54
2. 2018.....	(190)	(190)	178	178			35	35	691	691			53
3. 2019.....	826	826	(96)	(96)			119	119	1,360	1,360			398
4. Totals.....	516	516	116	116			219	219	3,545	3,545			505

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2018.....	17,644	17,644		64.3	64.3						
3. 2019.....	16,051	16,051		56.4	56.4						
4. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2010.....	96	96		8	8	5	5	3	3			1
3. 2011.....	346	346		94	94			30	30			9
4. 2012.....	2,305	2,305		564	564	330	330	298	298			80
5. 2013.....	3,879	3,879		1,451	1,451	834	834	528	528			118
6. 2014.....	5,271	5,271		2,161	2,161	1,477	1,477	734	734			139
7. 2015.....	7,019	7,019		1,872	1,872	1,521	1,521	743	743			172
8. 2016.....	7,213	7,213		1,555	1,555	693	693	428	428			107
9. 2017.....	6,889	6,889		200	200	275	275	294	294			77
10. 2018.....	6,165	6,165		289	289	109	109	205	205			62
11. 2019.....	6,491	6,491		214	214	8	8	96	96			39
12. Totals	XXX	XXX	XXX	8,406	8,406	5,252	5,252	3,360	3,360			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2010.....													
3. 2011.....													
4. 2012.....	74	74	10	10			3	3					2
5. 2013.....	71	71	156	156			151	151					3
6. 2014.....	2,243	2,243	(56)	(56)			249	249	1	1			18
7. 2015.....	1,171	1,171	367	367			479	479	16	16			26
8. 2016.....	855	855	729	729			840	840	32	32			15
9. 2017.....	1,386	1,386	944	944			1,288	1,288	69	69			18
10. 2018.....	1,089	1,089	868	868			1,527	1,527	88	88			15
11. 2019.....	133	133	1,823	1,823			1,855	1,855	220	220			16
12. Totals	7,021	7,021	4,841	4,841			6,392	6,392	426	426			113

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010.....	16	16		16.8	16.8						
3. 2011.....	124	124		35.8	35.8						
4. 2012.....	1,279	1,279		55.5	55.5						
5. 2013.....	3,190	3,190		82.2	82.2						
6. 2014.....	6,808	6,808		129.2	129.2						
7. 2015.....	6,168	6,168		87.9	87.9						
8. 2016.....	5,133	5,133		71.2	71.2						
9. 2017.....	4,456	4,456		64.7	64.7						
10. 2018.....	4,176	4,176		67.7	67.7						
11. 2019.....	4,348	4,348		67.0	67.0						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 2A - Homeowners/Farmowners

NONE

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

NONE

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

NONE

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

Schedule P - Part 2E - Commercial Multiple Peril

NONE

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

NONE

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 2H - Section 2- Other Liability - Claims-Made

NONE

Schedule P - Part 2I - Special Property

NONE

Schedule P - Part 2J - Auto Physical Damage

NONE

Schedule P - Part 2K - Fidelity/Surety

NONE

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 2M - International

NONE

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 2T - Warranty

NONE

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

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019			
1. Prior	.000												
2. 2010													
3. 2011	XXX												
4. 2012	XXX	XXX											
5. 2013	XXX	XXX	XXX										
6. 2014	XXX	XXX	XXX	XXX									
7. 2015	XXX	XXX	XXX	XXX	XXX								
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	.000												16	
2. 2010														
3. 2011	XXX												1	
4. 2012	XXX	XXX											3	
5. 2013	XXX	XXX	XXX										2	
6. 2014	XXX	XXX	XXX	XXX									4	
7. 2015	XXX	XXX	XXX	XXX	XXX									
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX							3	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX						2	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					2	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior	.000												3	
2. 2010													30	4
3. 2011	XXX												141	26
4. 2012	XXX	XXX											1,613	306
5. 2013	XXX	XXX	XXX										2,138	440
6. 2014	XXX	XXX	XXX	XXX									3,027	766
7. 2015	XXX	XXX	XXX	XXX	XXX								2,435	601
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX							2,422	582
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX						2,241	650
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					2,010	479
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1,247	263

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior	.000												1,368	32
2. 2010													3,674	528
3. 2011	XXX												4,222	847
4. 2012	XXX	XXX											4,682	1,064
5. 2013	XXX	XXX	XXX										4,676	1,134
6. 2014	XXX	XXX	XXX	XXX									4,863	1,198
7. 2015	XXX	XXX	XXX	XXX	XXX								4,918	1,295
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX							4,498	932
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX						3,880	795
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					3,541	769
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1,930	476

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	.000												2	
2. 2010													23	8
3. 2011	XXX												99	41
4. 2012	XXX	XXX											1,435	703
5. 2013	XXX	XXX	XXX										1,476	874
6. 2014	XXX	XXX	XXX	XXX									1,690	953
7. 2015	XXX	XXX	XXX	XXX	XXX								1,707	990
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX							1,568	827
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX						1,442	726
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					1,239	643
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			740	343

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

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019			
1. Prior	.000												
2. 2010													
3. 2011	XXX											1	
4. 2012	XXX	XXX										1	2
5. 2013	XXX	XXX	XXX									2	2
6. 2014	XXX	XXX	XXX	XXX								5	13
7. 2015	XXX	XXX	XXX	XXX	XXX							7	12
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						2	13
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					6	8
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					8
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			5

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	.000												
2. 2010													
3. 2011	XXX												
4. 2012	XXX	XXX											
5. 2013	XXX	XXX	XXX										
6. 2014	XXX	XXX	XXX	XXX									
7. 2015	XXX	XXX	XXX	XXX	XXX								1
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior	.000											XXX	XXX
2. 2010												XXX	XXX
3. 2011	XXX											XXX	XXX
4. 2012	XXX	XXX										XXX	XXX
5. 2013	XXX	XXX	XXX									XXX	XXX
6. 2014	XXX	XXX	XXX	XXX								XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	.000											40	9
2. 2010												15	18
3. 2011	XXX											29	38
4. 2012	XXX	XXX										200	214
5. 2013	XXX	XXX	XXX									239	270
6. 2014	XXX	XXX	XXX	XXX								315	321
7. 2015	XXX	XXX	XXX	XXX	XXX							327	347
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						283	334
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					269	306
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				226	217
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		137	124

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	.000												
2. 2010													
3. 2011	XXX												
4. 2012	XXX	XXX										3	2
5. 2013	XXX	XXX	XXX									6	5
6. 2014	XXX	XXX	XXX	XXX								6	3
7. 2015	XXX	XXX	XXX	XXX	XXX							12	3
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						10	2
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					4	2
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				4	1
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
 EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019			
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	131	15										
2. 2018	XXX	2,243	417										
3. 2019	XXX	1,621	328										

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	XXX												
2. 2018	XXX												
3. 2019	XXX												

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	XXX												
2. 2018	XXX												
3. 2019	XXX												

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	.000											XXX	XXX
2. 2010												XXX	XXX
3. 2011	XXX											XXX	XXX
4. 2012	XXX	XXX										XXX	XXX
5. 2013	XXX	XXX	XXX									XXX	XXX
6. 2014	XXX	XXX	XXX	XXX								XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019			
1. Prior.....	.000												1
2. 2010.....													1
3. 2011.....	XXX												7
4. 2012.....	XXX	XXX											40
5. 2013.....	XXX	XXX	XXX										60
6. 2014.....	XXX	XXX	XXX	XXX									63
7. 2015.....	XXX	XXX	XXX	XXX	XXX								76
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX							43
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						30
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					29
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			15

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....	.000												
2. 2010.....													
3. 2011.....	XXX												
4. 2012.....	XXX	XXX											
5. 2013.....	XXX	XXX	XXX										
6. 2014.....	XXX	XXX	XXX	XXX									
7. 2015.....	XXX	XXX	XXX	XXX	XXX								
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	XXX	.000				XXX	XXX						
2. 2018.....	XXX				XXX	XXX							
3. 2019.....	XXX	XXX			XXX	XXX							

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	XXX	.000											
2. 2018.....	XXX												
3. 2019.....	XXX	XXX											

NONE

Schedule P - Part 4A - Homeowners/Farmowners

NONE

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

NONE

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

NONE

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

Schedule P - Part 4E - Commercial Multiple Peril

NONE

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 4G - Special Liability

NONE

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

NONE

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 4T - Warranty

NONE

Schedule P - Part 5A - Homeowners/Farmowners - Section 1

NONE

Schedule P - Part 5A - Homeowners/Farmowners - Section 2

NONE

Schedule P - Part 5A - Homeowners/Farmowners - Section 3

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	2						8	8		
2. 2010										
3. 2011	XXX	1	1	1	1	1	1	1	1	1
4. 2012	XXX	XXX	3	3	3	3	3	3	3	3
5. 2013	XXX	XXX	XXX	2	2	2	2	2	2	2
6. 2014	XXX	XXX	XXX	XXX	2	4	4	4	4	4
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	3
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	2
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX	1	1				
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1		
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	2		1				9			
2. 2010										
3. 2011	XXX	1	1	1	1	1	1	1	1	1
4. 2012	XXX	XXX	3	3	3	3	3	3	3	3
5. 2013	XXX	XXX	XXX	2	2	2	2	2	2	2
6. 2014	XXX	XXX	XXX	XXX	3	5	4	4	4	4
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	3
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	3	3								
2. 2010	13	27	27	27	28	29	30	30	30	30
3. 2011	XXX	115	207	220	226	230	141	141	141	141
4. 2012	XXX	XXX	1,112	1,493	1,558	1,584	1,606	1,610	1,612	1,613
5. 2013	XXX	XXX	XXX	1,411	1,976	2,072	2,106	2,119	2,129	2,138
6. 2014	XXX	XXX	XXX	XXX	1,663	2,201	2,939	2,986	3,014	3,027
7. 2015	XXX	XXX	XXX	XXX	XXX	1,629	2,275	2,369	2,414	2,435
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1,645	2,248	2,367	2,422
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,519	2,105	2,241
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,416	2,010
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,247

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	2									
2. 2010	13	3	3	3	2	1				
3. 2011	XXX	94	24	14	11	5	1			
4. 2012	XXX	XXX	424	118	64	34	7	3	1	
5. 2013	XXX	XXX	XXX	594	169	83	41	24	16	6
6. 2014	XXX	XXX	XXX	XXX	702	220	113	61	26	12
7. 2015	XXX	XXX	XXX	XXX	XXX	785	199	93	38	17
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	799	260	132	70
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	836	293	141
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	781	259
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	658

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	3	1								
2. 2010	28	34	34	34	34	34	34	35	34	34
3. 2011	XXX	226	264	269	274	275	167	172	167	167
4. 2012	XXX	XXX	1,703	1,888	1,911	1,917	1,918	1,952	1,919	1,919
5. 2013	XXX	XXX	XXX	2,267	2,542	2,576	2,582	2,665	2,584	2,584
6. 2014	XXX	XXX	XXX	XXX	2,740	2,982	3,791	4,025	3,805	3,805
7. 2015	XXX	XXX	XXX	XXX	XXX	2,776	3,020	3,830	3,050	3,053
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	2,775	3,023	3,065	3,074
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,692	3,002	3,032
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,487	2,748
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,168

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

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	2,106	574	297	150	196	59	35	25	15	17
2. 2010	1,723	3,209	3,477	3,573	3,622	3,652	3,658	3,663	3,672	3,674
3. 2011	XXX	2,064	3,674	4,000	4,099	4,154	4,181	4,196	4,215	4,222
4. 2012	XXX	XXX	2,394	4,135	4,491	4,593	4,629	4,656	4,678	4,682
5. 2013	XXX	XXX	XXX	2,342	4,139	4,456	4,578	4,631	4,667	4,676
6. 2014	XXX	XXX	XXX	XXX	2,435	4,215	4,615	4,776	4,830	4,863
7. 2015	XXX	XXX	XXX	XXX	XXX	2,464	4,325	4,697	4,844	4,918
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	2,265	3,975	4,373	4,498
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,905	3,602	3,880
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,930	3,541
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,930

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	1,350	990	713	532	315	260	227	200	184	170
2. 2010	1,788	492	232	128	75	42	34	31	20	18
3. 2011	XXX	1,945	543	233	138	84	57	41	20	12
4. 2012	XXX	XXX	2,041	583	238	130	86	60	41	37
5. 2013	XXX	XXX	XXX	2,087	580	269	143	85	43	34
6. 2014	XXX	XXX	XXX	XXX	2,265	702	317	157	97	62
7. 2015	XXX	XXX	XXX	XXX	XXX	2,322	708	335	182	100
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	2,160	686	313	186
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,050	494	224
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,951	538
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,001

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	534	288	86	6	9	11	3	4	1	4
2. 2010	3,746	4,166	4,207	4,214	4,216	4,216	4,216	4,218	4,220	4,220
3. 2011	XXX	4,564	5,022	5,064	5,072	5,079	5,081	5,081	5,081	5,081
4. 2012	XXX	XXX	5,156	5,720	5,773	5,779	5,778	5,779	5,783	5,783
5. 2013	XXX	XXX	XXX	5,184	5,783	5,830	5,840	5,844	5,844	5,844
6. 2014	XXX	XXX	XXX	XXX	5,489	6,041	6,100	6,116	6,121	6,123
7. 2015	XXX	XXX	XXX	XXX	XXX	5,626	6,238	6,297	6,307	6,313
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	4,989	5,534	5,604	5,616
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,390	4,846	4,899
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,382	4,848
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,407

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	2	2								
2. 2010	11	20	20	20	20	21	22	23	23	23
3. 2011	XXX	77	144	154	158	161	164	97	97	99
4. 2012	XXX	XXX	923	1,271	1,351	1,393	1,412	1,423	1,430	1,435
5. 2013	XXX	XXX	XXX	893	1,265	1,362	1,417	1,448	1,466	1,476
6. 2014	XXX	XXX	XXX	XXX	1,079	1,476	1,591	1,654	1,680	1,690
7. 2015	XXX	XXX	XXX	XXX	XXX	1,096	1,528	1,620	1,678	1,707
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	995	1,424	1,519	1,568
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	963	1,358	1,442
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	848	1,239
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	740

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	3									
2. 2010	5	1			2	1	1			3
3. 2011	XXX	64	25	12	8	5	3	3	4	1
4. 2012	XXX	XXX	460	193	99	52	27	22	14	15
5. 2013	XXX	XXX	XXX	528	244	166	105	57	31	17
6. 2014	XXX	XXX	XXX	XXX	604	276	153	76	46	33
7. 2015	XXX	XXX	XXX	XXX	XXX	626	248	161	81	45
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	591	233	131	67
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	547	213	118
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	567	219
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	519

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	3	1								
2. 2010	19	28	28	28	30	30	32	31	31	34
3. 2011	XXX	168	228	233	235	236	239	140	141	141
4. 2012	XXX	XXX	1,745	2,051	2,110	2,127	2,133	2,140	2,144	2,153
5. 2013	XXX	XXX	XXX	1,856	2,226	2,316	2,347	2,362	2,366	2,367
6. 2014	XXX	XXX	XXX	XXX	2,207	2,546	2,621	2,649	2,663	2,676
7. 2015	XXX	XXX	XXX	XXX	XXX	2,293	2,614	2,703	2,730	2,742
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	2,045	2,371	2,439	2,462
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,932	2,227	2,286
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,824	2,101
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,602

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX			.1	.1	.1	.1	.1	.1	.1
4. 2012	XXX	XXX				.1	.1	.1	.1	.1
5. 2013	XXX	XXX	XXX	.1	.2	.2	.2	.2	.2	.2
6. 2014	XXX	XXX	XXX	XXX	.1	.1	.2	.2	.3	.5
7. 2015	XXX	XXX	XXX	XXX	XXX		.3	.4	.5	.7
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX		.1	.1	.2
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.2	.5	.6
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX		.1	.2					
5. 2013	XXX	XXX	XXX	.2	.2			.1	.1	.1
6. 2014	XXX	XXX	XXX	XXX	.5	.6	.6	.5	.3	.2
7. 2015	XXX	XXX	XXX	XXX	XXX	.5	.4	.7	.6	.3
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	.3	.4	.8	.6
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.9	.5	.5
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.10	.10
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.5

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX			.1	.1	.1	.1	.1	.1	.1
4. 2012	XXX	XXX		.1	.3	.3	.3	.3	.3	.3
5. 2013	XXX	XXX	XXX	.3	.4	.4	.4	.5	.5	.5
6. 2014	XXX	XXX	XXX	XXX	.11	.16	.19	.19	.19	.20
7. 2015	XXX	XXX	XXX	XXX	XXX	.12	.16	.21	.22	.22
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	.7	.14	.18	.21
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.12	.15	.19
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.13	.18
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.10

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	4	4	3		4	7	7	10	6	(1)
2. 2010	4	7	9	9	9	11	13	14	15	15
3. 2011	XXX	8	20	23	24	26	27	28	28	29
4. 2012	XXX	XXX	84	150	165	174	183	195	200	200
5. 2013	XXX	XXX	XXX	94	166	190	208	220	231	239
6. 2014	XXX	XXX	XXX	XXX	129	217	257	279	301	315
7. 2015	XXX	XXX	XXX	XXX	XXX	142	240	274	304	327
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	113	227	250	283
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	126	228	269
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	134	226
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	137

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	10	6	3	15	22	15	17	10	2	1
2. 2010	6	1	1	2	7	7	5	4	4	2
3. 2011	XXX	15	10	10	5	3	2	4	3	
4. 2012	XXX	XXX	93	52	41	30	20	8	3	1
5. 2013	XXX	XXX	XXX	152	94	70	52	37	21	17
6. 2014	XXX	XXX	XXX	XXX	212	139	91	63	44	29
7. 2015	XXX	XXX	XXX	XXX	XXX	228	149	113	71	46
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	234	126	95	47
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	222	151	113
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	223	140
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	227

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	4	6	2	17	17	5	11	7	1	
2. 2010	13	15	16	18	24	27	31	33	35	35
3. 2011	XXX	29	48	57	59	60	61	64	66	67
4. 2012	XXX	XXX	277	367	393	404	410	413	414	415
5. 2013	XXX	XXX	XXX	357	469	489	504	512	518	526
6. 2014	XXX	XXX	XXX	XXX	458	581	625	643	658	665
7. 2015	XXX	XXX	XXX	XXX	XXX	497	638	691	707	720
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	469	598	642	664
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	490	630	688
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	464	583
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	488

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

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX		3	3	3	3	3	3	3
5. 2013.....	XXX	XXX	XXX	2	4	6	6	6	6	6
6. 2014.....	XXX	XXX	XXX	XXX	3	3	4	6	6	6
7. 2015.....	XXX	XXX	XXX	XXX	XXX	2	5	8	11	12
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	2	8	10	10
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2	4
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		4
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2B

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX	1							
5. 2013.....	XXX	XXX	XXX	4	2					
6. 2014.....	XXX	XXX	XXX	XXX	4	3	2			
7. 2015.....	XXX	XXX	XXX	XXX	XXX	7	7	3		
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	10	6	4	4
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	3	1
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	3
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SECTION 3B

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX	2	5	5	5	5	5	5	5
5. 2013.....	XXX	XXX	XXX	7	11	11	11	11	11	11
6. 2014.....	XXX	XXX	XXX	XXX	8	9	9	9	9	9
7. 2015.....	XXX	XXX	XXX	XXX	XXX	10	14	14	14	15
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	12	14	15	16
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	7	7
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	8
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010									.1	.1
3. 2011	XXX	1	6	6	6	6	7	7	7	7
4. 2012	XXX	XXX	23	31	34	37	37	37	40	40
5. 2013	XXX	XXX	XXX	31	44	49	52	55	59	60
6. 2014	XXX	XXX	XXX	XXX	28	45	51	55	60	63
7. 2015	XXX	XXX	XXX	XXX	XXX	37	53	62	68	76
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	21	33	39	43
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	27	30
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	29
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior						.1	.1	.1		
2. 2010								.1		
3. 2011	XXX	1	1							
4. 2012	XXX	XXX	15	10	7	5	3	3	2	2
5. 2013	XXX	XXX	XXX	27	19	20	12	7	5	3
6. 2014	XXX	XXX	XXX	XXX	42	27	26	26	21	18
7. 2015	XXX	XXX	XXX	XXX	XXX	36	34	28	32	26
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	34	24	18	15
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	21	18
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	15
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior						.1				
2. 2010								.1	.1	.1
3. 2011	XXX	3	8	8	8	8	9	9	9	9
4. 2012	XXX	XXX	57	71	75	77	78	78	80	80
5. 2013	XXX	XXX	XXX	71	97	110	113	114	116	118
6. 2014	XXX	XXX	XXX	XXX	90	115	128	135	138	139
7. 2015	XXX	XXX	XXX	XXX	XXX	100	141	151	164	172
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	78	94	103	107
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	71	77
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	62
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	794	794	794	794	794	794	794	794	794	794	
3. 2011.....	XXX	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	
4. 2012.....	XXX	XXX	28,718	28,718	28,718	28,718	28,718	28,718	28,718	28,718	
5. 2013.....	XXX	XXX	XXX	42,662	42,662	42,662	42,662	42,662	42,662	42,662	
6. 2014.....	XXX	XXX	XXX	XXX	51,204	51,204	51,204	51,204	51,204	51,204	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	55,545	55,545	55,545	55,545	55,545	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	56,078	56,078	56,078	56,078	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58,965	58,965	58,965	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62,959	62,959	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66,623	66,623
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66,623
13. Earned Premiums (Sch P-Pt. 1)	794	3,958	28,718	42,662	51,204	55,545	56,078	58,965	62,959	66,623	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	794	794	794	794	794	794	794	794	794	794	
3. 2011.....	XXX	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	
4. 2012.....	XXX	XXX	28,718	28,718	28,718	28,718	28,718	28,718	28,718	28,718	
5. 2013.....	XXX	XXX	XXX	42,662	42,662	42,662	42,662	42,662	42,662	42,662	
6. 2014.....	XXX	XXX	XXX	XXX	51,204	51,204	51,204	51,204	51,204	51,204	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	55,545	55,545	55,545	55,545	55,545	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	56,078	56,078	56,078	56,078	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58,965	58,965	58,965	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62,959	62,959	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66,623	66,623
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66,623
13. Earned Premiums (Sch P-Pt. 1)	794	3,958	28,718	42,662	51,204	55,545	56,078	58,965	62,959	66,623	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....								11	150		
2. 2010.....	63,931	63,931	63,931	63,931	63,931	63,931	63,986	63,986	63,986	63,986	
3. 2011.....	XXX	75,348	75,348	75,348	75,348	75,348	75,360	75,360	75,364	75,361	(3)
4. 2012.....	XXX	XXX	94,081	94,081	94,081	94,081	94,146	94,145	94,154	94,173	19
5. 2013.....	XXX	XXX	XXX	107,741	107,741	107,741	107,640	107,632	107,659	107,677	17
6. 2014.....	XXX	XXX	XXX	XXX	120,140	120,140	122,489	122,494	122,527	122,591	65
7. 2015.....	XXX	XXX	XXX	XXX	XXX	133,549	141,181	142,922	142,821	142,807	(14)
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	121,582	132,518	134,812	134,797	(15)
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105,432	113,421	115,825	2,404
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	106,476	111,142	4,667
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103,771	103,771
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110,911
13. Earned Premiums (Sch P-Pt. 1)	63,931	75,348	94,081	107,741	120,140	133,549	131,607	118,105	116,882	110,911	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	63,931	63,931	63,931	63,931	63,931	63,931	63,931	63,931	63,931	63,931	
3. 2011.....	XXX	75,348	75,348	75,348	75,348	75,348	75,348	75,348	75,348	75,348	
4. 2012.....	XXX	XXX	94,081	94,081	94,081	94,081	94,081	94,081	94,081	94,081	
5. 2013.....	XXX	XXX	XXX	107,741	107,741	107,741	107,741	107,741	107,741	107,741	
6. 2014.....	XXX	XXX	XXX	XXX	120,140	120,140	120,140	120,140	120,140	120,140	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	133,549	133,549	133,549	133,549	133,549	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	131,607	131,607	131,607	131,607	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	118,105	118,105	118,105	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	116,882	116,882	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110,911	110,911
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110,911
13. Earned Premiums (Sch P-Pt. 1)	63,931	75,348	94,081	107,741	120,140	133,549	131,607	118,105	116,882	110,911	XXX

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	1,366	1,366	1,366	1,366	1,366	1,366	1,366	1,366	1,366	1,366	
3. 2011.....	XXX	6,740	6,740	6,740	6,740	6,740	6,740	6,740	6,740	6,740	
4. 2012.....	XXX	XXX	49,368	49,368	49,368	49,368	49,368	49,368	49,368	49,368	
5. 2013.....	XXX	XXX	XXX	70,112	70,112	70,112	70,112	70,112	70,112	70,112	
6. 2014.....	XXX	XXX	XXX	XXX	87,986	87,986	87,986	87,986	87,986	87,986	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	103,300	103,300	103,300	103,300	103,300	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	104,555	104,555	104,555	104,555	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	101,539	101,539	101,539	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98,162	98,162	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94,012	94,012
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94,012
13. Earned Premiums (Sch P-Pt. 1)	1,366	6,740	49,368	70,112	87,986	103,300	104,555	101,539	98,162	94,012	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	1,366	1,366	1,366	1,366	1,366	1,366	1,366	1,366	1,366	1,366	
3. 2011.....	XXX	6,740	6,740	6,740	6,740	6,740	6,740	6,740	6,740	6,740	
4. 2012.....	XXX	XXX	49,368	49,368	49,368	49,368	49,368	49,368	49,368	49,368	
5. 2013.....	XXX	XXX	XXX	70,112	70,112	70,112	70,112	70,112	70,112	70,112	
6. 2014.....	XXX	XXX	XXX	XXX	87,986	87,986	87,986	87,986	87,986	87,986	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	103,300	103,300	103,300	103,300	103,300	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	104,555	104,555	104,555	104,555	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	101,539	101,539	101,539	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98,162	98,162	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94,012	94,012
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94,012
13. Earned Premiums (Sch P-Pt. 1)	1,366	6,740	49,368	70,112	87,986	103,300	104,555	101,539	98,162	94,012	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	1,078	1,078	1,078	1,078	1,078	1,078	1,078	1,078	1,078	1,078	
3. 2011.....	XXX	4,040	4,040	4,040	4,040	4,040	4,040	4,040	4,040	4,040	
4. 2012.....	XXX	XXX	29,689	29,689	29,689	29,689	29,689	29,689	29,689	29,689	
5. 2013.....	XXX	XXX	XXX	43,743	43,743	43,743	43,743	43,743	43,743	43,743	
6. 2014.....	XXX	XXX	XXX	XXX	54,137	54,137	54,137	54,137	54,137	54,137	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	62,302	62,302	62,302	62,302	62,302	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	63,891	63,891	63,891	63,891	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	63,683	63,683	63,683	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62,663	62,663	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,545	61,545
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,545
13. Earned Premiums (Sch P-Pt. 1)	1,078	4,040	29,689	43,743	54,137	62,302	63,891	63,683	62,663	61,545	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	1,078	1,078	1,078	1,078	1,078	1,078	1,078	1,078	1,078	1,078	
3. 2011.....	XXX	4,040	4,040	4,040	4,040	4,040	4,040	4,040	4,040	4,040	
4. 2012.....	XXX	XXX	29,689	29,689	29,689	29,689	29,689	29,689	29,689	29,689	
5. 2013.....	XXX	XXX	XXX	43,743	43,743	43,743	43,743	43,743	43,743	43,743	
6. 2014.....	XXX	XXX	XXX	XXX	54,137	54,137	54,137	54,137	54,137	54,137	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	62,302	62,302	62,302	62,302	62,302	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	63,891	63,891	63,891	63,891	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	63,683	63,683	63,683	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62,663	62,663	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,545	61,545
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,545
13. Earned Premiums (Sch P-Pt. 1)	1,078	4,040	29,689	43,743	54,137	62,302	63,891	63,683	62,663	61,545	XXX

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

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	
1. Prior.....											
2. 2010.....	2	2	2	2	2	2	2	2	2	2	
3. 2011.....	.XXX	12	12	12	12	12	12	12	12	12	
4. 2012.....	.XXX	.XXX	347	347	347	347	347	347	347	347	
5. 2013.....	.XXX	.XXX	.XXX	534	534	534	534	534	534	534	
6. 2014.....	.XXX	.XXX	.XXX	.XXX	669	669	669	669	669	669	
7. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	834	834	834	834	834	
8. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	994	994	994	994	
9. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,193	1,193	1,193	
10. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,324	1,324	
11. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,351	1,351
12. Totals.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,351
13. Earned Premiums (Sch P-Pt. 1)	2	12	347	534	669	834	994	1,193	1,324	1,351	.XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	
1. Prior.....											
2. 2010.....	2	2	2	2	2	2	2	2	2	2	
3. 2011.....	.XXX	12	12	12	12	12	12	12	12	12	
4. 2012.....	.XXX	.XXX	347	347	347	347	347	347	347	347	
5. 2013.....	.XXX	.XXX	.XXX	534	534	534	534	534	534	534	
6. 2014.....	.XXX	.XXX	.XXX	.XXX	669	669	669	669	669	669	
7. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	834	834	834	834	834	
8. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	994	994	994	994	
9. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,193	1,193	1,193	
10. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,324	1,324	
11. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,351	1,351
12. Totals.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,351
13. Earned Premiums (Sch P-Pt. 1)	2	12	347	534	669	834	994	1,193	1,324	1,351	.XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	
1. Prior.....											
2. 2010.....											
3. 2011.....	.XXX										
4. 2012.....	.XXX	.XXX									
5. 2013.....	.XXX	.XXX	.XXX								
6. 2014.....	.XXX	.XXX	.XXX	.XXX							
7. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX						
8. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					
9. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
10. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
11. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
12. Totals.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	
13. Earned Premiums (Sch P-Pt. 1)											.XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	
1. Prior.....											
2. 2010.....											
3. 2011.....	.XXX										
4. 2012.....	.XXX	.XXX									
5. 2013.....	.XXX	.XXX	.XXX								
6. 2014.....	.XXX	.XXX	.XXX	.XXX							
7. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX						
8. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					
9. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
10. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
11. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
12. Totals.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	
13. Earned Premiums (Sch P-Pt. 1)											.XXX

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	96	96	96	96	96	96	96	96	96	96	
3. 2011.....	XXX	346	346	346	346	346	346	346	346	346	
4. 2012.....	XXX	XXX	2,305	2,305	2,305	2,305	2,305	2,305	2,305	2,305	
5. 2013.....	XXX	XXX	XXX	3,879	3,879	3,879	3,879	3,879	3,879	3,879	
6. 2014.....	XXX	XXX	XXX	XXX	5,271	5,271	5,271	5,271	5,271	5,271	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	7,019	7,019	7,019	7,019	7,019	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	7,213	7,213	7,213	7,213	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,889	6,889	6,889	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,165	6,165	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,491	6,491
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,491
13. Earned Premiums (Sch P-Pt. 1)	96	346	2,305	3,879	5,271	7,019	7,213	6,889	6,165	6,491	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....	96	96	96	96	96	96	96	96	96	96	
3. 2011.....	XXX	346	346	346	346	346	346	346	346	346	
4. 2012.....	XXX	XXX	2,305	2,305	2,305	2,305	2,305	2,305	2,305	2,305	
5. 2013.....	XXX	XXX	XXX	3,879	3,879	3,879	3,879	3,879	3,879	3,879	
6. 2014.....	XXX	XXX	XXX	XXX	5,271	5,271	5,271	5,271	5,271	5,271	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	7,019	7,019	7,019	7,019	7,019	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	7,213	7,213	7,213	7,213	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,889	6,889	6,889	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,165	6,165	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,491	6,491
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,491
13. Earned Premiums (Sch P-Pt. 1)	96	346	2,305	3,879	5,271	7,019	7,213	6,889	6,165	6,491	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....											
3. 2011.....	XXX										
4. 2012.....	XXX	XXX									
5. 2013.....	XXX	XXX	XXX								
6. 2014.....	XXX	XXX	XXX	XXX							
7. 2015.....	XXX	XXX	XXX	XXX	XXX						
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....											
2. 2010.....											
3. 2011.....	XXX										
4. 2012.....	XXX	XXX									
5. 2013.....	XXX	XXX	XXX								
6. 2014.....	XXX	XXX	XXX	XXX							
7. 2015.....	XXX	XXX	XXX	XXX	XXX						
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

NONE

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior		
1.602	2010		
1.603	2011		
1.604	2012		
1.605	2013		
1.606	2014		
1.607	2015		
1.608	2016		
1.609	2017		
1.610	2018		
1.611	2019		
1.612	Totals		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars) 5.1 Fidelity
 5.2 Surety
6. Claim count information is reported per claim or per claimant (Indicate which) per claim.....
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []
- 7.2 (An extended statement may be attached.)
 Estimated salvage and subrogation recoveries have been include in all applicable lines of business. The Cincinnati Insurance Companies have implemented an accounting change to the quantification of claim counts reported in Schedule P beginning in 2011. Our old method of counting claims was based on internal loss and expense transaction codes. Our new method of counting claims is based on actual financial transactions. Since it is driven by actual loss and expense payments and/or changes in loss and expense reserves, the new method is more accurate and less susceptible to data entry errors.

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	L	9,013,616	7,595,854	1,295,482	2,837,058	5,315,604	1,346	
2. Alaska	AK	L							
3. Arizona	AZ	L	12,969,695	12,748,083	4,916,394	3,811,074	11,221,155	649	
4. Arkansas	AR	L	3,972,651	4,015,108	838,982	253,754	4,131,817	657	
5. California	CA	L	580,613	571,337	166,979	244,306	438,553	30	
6. Colorado	CO	L	16,669,172	17,505,640	8,098,782	4,706,125	15,465,651	159	
7. Connecticut	CT	L	1,306,614	1,130,596	272,562	802,288	1,345,377	17	
8. Delaware	DE	L	1,529,322	1,751,228	306,857	426,266	1,553,899	395	
9. District of Columbia	DC	L	301,081	386,726	120,429	796,103	877,406	20	
10. Florida	FL	L	29,907,908	27,830,624	8,543,885	8,786,260	22,561,348	6,569	
11. Georgia	GA	L	12,633,106	12,816,158	5,336,771	6,367,574	14,634,879	1,597	
12. Hawaii	HI	L	1,847	1,949		(295)	1,827		
13. Idaho	ID	L	6,352,437	6,375,868	3,694,874	3,123,981	7,509,147	465	
14. Illinois	IL	L	33,596,924	33,976,560	16,866,600	8,671,463	46,895,547	3,692	
15. Indiana	IN	L	17,967,833	18,385,544	10,011,357	6,953,143	19,098,486	2,061	
16. Iowa	IA	L	8,500,558	8,788,001	5,790,677	4,899,959	18,118,058	1,975	
17. Kansas	KS	L	4,764,389	4,749,953	2,207,701	1,705,012	6,935,682	914	
18. Kentucky	KY	L	8,010,851	8,142,122	4,262,732	3,709,970	9,698,313	1,976	
19. Louisiana	LA	L	202,100	273,294	58,252	73,527	168,979		
20. Maine	ME	L	31,030	26,570		27,386	32,748		
21. Maryland	MD	L	9,318,143	9,360,373	4,756,790	2,420,746	9,976,844	996	
22. Massachusetts	MA	L	154,588	120,327	40,711	253,964	239,494		
23. Michigan	MI	L	17,411,331	18,067,200	6,934,924	6,566,443	17,986,522	2,368	
24. Minnesota	MN	L	10,527,629	10,468,508	4,044,901	4,538,584	9,963,359	1,595	
25. Mississippi	MS	L	207,430	237,829	154,651	84,423	165,400	5	
26. Missouri	MO	L	12,171,352	11,768,614	3,356,145	4,574,240	15,415,884	1,626	
27. Montana	MT	L	2,601,182	2,584,543	5,998,900	4,604,522	3,089,308	415	
28. Nebraska	NE	L	3,706,667	3,802,941	1,288,052	2,125,773	8,244,769	260	
29. Nevada	NV	L	218,832	220,948	31,736	6,529	103,871		
30. New Hampshire	NH	L	3,158,745	2,984,186	544,865	548,695	1,657,997	397	
31. New Jersey	NJ	L	615,923	450,435	222,252	134,732	269,314		
32. New Mexico	NM	L	6,418,535	6,201,475	5,517,798	5,783,275	4,712,431	72	
33. New York	NY	L	5,513,053	5,472,783	2,428,184	2,125,547	6,263,467	460	
34. North Carolina	NC	L	15,710,462	16,013,536	5,565,251	3,171,248	14,156,663	2,327	
35. North Dakota	ND	L	918,197	972,228	301,963	201,550	520,498	318	
36. Ohio	OH	L	30,985,776	31,245,141	9,941,814	10,879,732	15,454,724	14,397	
37. Oklahoma	OK	L	207,067	210,269	55,655	(7,390)	113,288		
38. Oregon	OR	L	4,147,404	3,829,234	880,237	1,820,343	3,070,024	78	
39. Pennsylvania	PA	L	38,231,516	37,059,599	14,847,964	10,862,522	40,768,989	8,284	
40. Rhode Island	RI	L	21,899	17,224		(1,603)	13,866		
41. South Carolina	SC	L	4,166,683	4,098,827	2,747,734	2,506,845	6,491,007	218	
42. South Dakota	SD	L	1,768,317	1,606,852	248,273	586,025	2,141,241	171	
43. Tennessee	TN	L	16,113,649	16,272,877	5,462,576	6,287,251	20,494,985	1,929	
44. Texas	TX	L	19,984,456	19,776,280	9,587,060	9,461,316	15,667,770	363	
45. Utah	UT	L	5,434,220	5,582,367	1,292,862	2,385,889	5,321,466	381	
46. Vermont	VT	L	3,773,195	3,709,777	1,183,402	759,713	2,616,448	318	
47. Virginia	VA	L	17,534,072	17,505,997	11,086,538	9,482,195	17,210,552	1,899	
48. Washington	WA	L	5,705,904	5,559,808	2,558,309	2,882,070	3,947,567	54	
49. West Virginia	WV	L	3,232,247	3,235,151	907,055	978,430	2,099,226	674	
50. Wisconsin	WI	L	7,427,499	7,526,976	3,354,589	4,803,353	11,888,134	1,704	
51. Wyoming	WY	L	1,357,111	1,279,802	(4,943)	53,274	195,579	161	
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		417,054,830	414,313,321	178,125,560	159,075,187	426,265,167	63,992	
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX								

(a) Active Status Counts:

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

(b) Explanation of basis of allocation of premiums by states, etc.

Premiums received on all classes are booked to the state in which the risk is located.

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	Direct Business Only					Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Other Alien	OT					
59. Total						

NONE

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 Uptown Investments I, LLC	OH	82-3254447	
CLIC DS Investments I, LLC	OH	81-3640769	
The Cincinnati Specialty Underwriters Insurance Company (Insurer)	DE	65-1316588	13037
CIC Uptown Investments I, LLC	OH	83-1627569	
CIC Danamont Investments I, LLC	OH	61-1936938	
CIC Icon Investments I, LLC	OH	32-0613415	
CSU Producer Resources, Inc	OH	11-3823180	
Cincinnati Global Underwriting LTD.	GBR	98-1489371	
Cincinnati Global Dedicated No 1 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 2 Limited (Insurer)*	GBR		
Cincinnati Global Dedicated No 3 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 4 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 5 Limited (Insurer)	GBR		
Cincinnati Global Dedicated No 6 Limited (Insurer)	GBR		
Cincinnati Global Underwriting Agency Limited	GBR		
Cincinnati Global Underwriting Services Limited	GBR		

* Participant in Lloyd's Syndicate 0318

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY 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 Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0244	CINCINNATI INS GRP	.00000	31-0746871		000002028	NASDAQ	CINCINNATI FINANCIAL CORPORATION	.OH	DIP	CINCINNATI FINANCIAL CORPORATION	Board of Directors	0.000		.N	
.0244	CINCINNATI INS GRP	.10677	31-0542366		000127988		THE CINCINNATI INSURANCE COMPANY	.OH	UDP	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.76236	31-1213778		000127988		THE CINCINNATI LIFE INSURANCE COMPANY	.OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.28665	31-0826946		000127988		THE CINCINNATI CASUALTY COMPANY	.OH	RE	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.23280	31-1241230		000127988		THE CINCINNATI INDEMNITY COMPANY	.OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.13037	65-1316588		000142676		THE CINCINNATI SPECIALTY UNDERWRITERS INSURANCE COMPANY	.OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	31-0790388				CFC INVESTMENT COMPANY	.OH	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	11-3823180		000153446		CSU PRODUCER RESOURCES, INC	.OH	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	81-1908205				CLIC BP INVESTMENTS B, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	81-3640769				CLIC DS INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	81-4633687				CLIC BP INVESTMENTS H, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	82-1587731				CLIC WDS INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	82-3254447				CLIC UPTOWN INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	82-5173506				CLIC DISTRICT INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	83-1627569				CIC UPTOWN INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	98-1489371				CINCINNATI GLOBAL UNDERWRITING LIMITED	.GBR	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 1 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 2 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 3 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 4 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 5 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 6 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL UNDERWRITING AGENCY LIMITED	.GBR	NIA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL UNDERWRITING SERVICES LIMITED	.GBR	NIA	CINCINNATI GLOBAL UNDERWRITING LIMITED	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	61-1936938				CIC DANAMONT INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	32-0613415				CIC ICON INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	

Asterisk	Explanation
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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	31-0746871	CINCINNATI FINANCIAL CORPORATION	625,000,000								625,000,000	
10677	31-0542366	THE CINCINNATI INSURANCE COMPANY	(570,000,000)	(7,624,695)				98,384,335			(479,240,360)	(847,718,671)
76236	31-1213778	THE CINCINNATI LIFE INSURANCE COMPANY										
28665	31-0826946	THE CINCINNATI CASUALTY COMPANY										508,372,259
23280	31-1241230	THE CINCINNATI INDEMNITY COMPANY						(98,384,335)			(98,384,335)	337,665,511
13037	65-1316588	THE CINCINNATI SPECIALTY UNDERWRITERS INSURANCE COMPANY	(55,000,000)				(79,058,613)				(134,058,613)	1,680,901
00000	31-0790388	CFC INVESTMENT COMPANY										
00000	11-3823180	CSU PRODUCER RESOURCES, INC					79,058,613				79,058,613	
00000	81-1908205	CLIC BP INVESTMENTS B, LLC										
00000	81-3640769	CLIC DS INVESTMENTS I, LLC										
00000	81-4633687	CLIC BP INVESTMENTS H, LLC										
00000	82-1587731	CLIC WDS INVESTMENTS I, LLC										
00000	82-3254447	CLIC UPTOWN INVESTMENTS I, LLC										
00000	82-5173506	CLIC DISTRICT INVESTMENTS I, LLC										
00000	83-1627569	CIC UPTOWN INVESTMENTS I, LLC		5,761,109							5,761,109	
00000	98-1489371	CINCINNATI GLOBAL UNDERWRITING, INC										
00000		CINCINNATI GLOBAL DEDICATED NO 1 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 2 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 3 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 4 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 5 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 6 LIMITED										
00000		CINCINNATI GLOBAL UNDERWRITING AGENCY LIMITED										
00000		CINCINNATI GLOBAL UNDERWRITING SERVICES LIMITED										
00000	61-1936938	CIC DANAMONT INVESTMENTS I, LLC		1,863,586							1,863,586	
00000	32-0613415	CIC ICON INVESTMENTS I, LLC										
9999999	Control Totals								XXX			

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** 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.

	Responses
MARCH FILING	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
APRIL FILING	
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING	
8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
JUNE FILING	
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING	
11. 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?	YES

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. 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.

MARCH FILING	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	YES
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	YES
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	YES
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
APRIL FILING	
29. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
30. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
36. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING	
37. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

- 12.
- 13.
- 14.
- 16.
- 17.
- 18.
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- 36.

Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420]	
13. Financial Guaranty Insurance Exhibit [Document Identifier 240]	
14. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
16. Trusteed Surplus Statement [Document Identifier 490]	
17. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	
18. Reinsurance Summary Supplemental Filing [Document Identifier 401]	
19. Medicare Part D Coverage Supplement [Document Identifier 365]	
21. Reinsurance Attestation Supplement [Document Identifier 399]	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE THE CINCINNATI INDEMNITY COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 23. Bail Bond Supplement [Document Identifier 500] 
- 25. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224] 
- 26. Relief from the one-year cooling off period for independent CPA [Document Identifier 225] 
- 27. Relief from the Requirements for Audit Committees [Document Identifier 226] 
- 28. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555] 
- 29. Credit Insurance Experience Exhibit [Document Identifier 230] 
- 30. Long-Term Care Experience Reporting Forms [Document Identifier 306] 
- 31. Accident and Health Policy Experience Exhibit [Document Identifier 210] 
- 32. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] 
- 33. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217] 
- 35. Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290] 
- 36. Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300] 

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

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments	974,964	0.849	974,964		974,964	0.849
1.02 All other governments		0.000				0.000
1.03 U.S. states, territories and possessions, etc. guaranteed	497,938	0.434	497,938		497,938	0.434
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed	29,357,385	25.579	29,357,385		29,357,385	25.579
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed	16,107,977	14.035	16,107,977		16,107,977	14.035
1.06 Industrial and miscellaneous	32,533,164	28.347	32,533,164		32,533,164	28.347
1.07 Hybrid securities		0.000				0.000
1.08 Parent, subsidiaries and affiliates		0.000				0.000
1.09 SVO identified funds		0.000				0.000
1.10 Unaffiliated Bank loans		0.000				0.000
1.11 Total long-term bonds	79,471,428	69.244	79,471,428		79,471,428	69.244
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)		0.000				0.000
2.02 Parent, subsidiaries and affiliates		0.000				0.000
2.03 Total preferred stocks		0.000				0.000
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)	33,004,640	28.757	33,004,640		33,004,640	28.757
3.02 Industrial and miscellaneous Other (Unaffiliated)		0.000				0.000
3.03 Parent, subsidiaries and affiliates Publicly traded		0.000				0.000
3.04 Parent, subsidiaries and affiliates Other		0.000				0.000
3.05 Mutual funds		0.000				0.000
3.06 Unit investment trusts		0.000				0.000
3.07 Closed-end funds		0.000				0.000
3.08 Total common stocks	33,004,640	28.757	33,004,640		33,004,640	28.757
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages		0.000				0.000
4.02 Residential mortgages		0.000				0.000
4.03 Commercial mortgages		0.000				0.000
4.04 Mezzanine real estate loans		0.000				0.000
4.05 Total mortgage loans		0.000				0.000
5. Real estate (Schedule A):						
5.01 Properties occupied by company		0.000				0.000
5.02 Properties held for production of income		0.000				0.000
5.03 Properties held for sale		0.000				0.000
5.04 Total real estate		0.000				0.000
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	2,293,506	1.998	2,293,506		2,293,506	1.998
6.02 Cash equivalents (Schedule E, Part 2)		0.000				0.000
6.03 Short-term investments (Schedule DA)		0.000				0.000
6.04 Total cash, cash equivalents and short-term investments	2,293,506	1.998	2,293,506		2,293,506	1.998
7. Contract loans		0.000				0.000
8. Derivatives (Schedule DB)		0.000				0.000
9. Other invested assets (Schedule BA)		0.000				0.000
10. Receivables for securities		0.000				0.000
11. Securities Lending (Schedule DL, Part 1)		0.000		XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)		0.000				0.000
13. Total invested assets	114,769,575	100.000	114,769,575		114,769,575	100.000

Schedule A - Verification - Real Estate

NONE

Schedule B - Verification - Mortgage Loans

NONE

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

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 8)	
	2.2 Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 16	
	3.2 Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase (decrease):	
	5.1 Totals, Part 1, Column 13	
	5.2 Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 18	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
	9.1 Totals, Part 1, Column 17	
	9.2 Totals, Part 3, Column 14	
10.	Deduct current year's other than temporary impairment recognized:	
	10.1 Totals, Part 1, Column 15	
	10.2 Totals, Part 3, Column 11	
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 BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	101,940,105
2.	Cost of bonds and stocks acquired, Part 3, Column 7	9,944,544
3.	Accrual of discount	28,486
4.	Unrealized valuation increase (decrease):	
	4.1. Part 1, Column 12	
	4.2. Part 2, Section 1, Column 15	
	4.3. Part 2, Section 2, Column 13	7,408,843
	4.4. Part 4, Column 11	7,408,843
5.	Total gain (loss) on disposals, Part 4, Column 19	(52,102)
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	6,604,016
7.	Deduct amortization of premium	253,858
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1. Part 1, Column 15	
	8.2. Part 2, Section 1, Column 19	
	8.3. Part 2, Section 2, Column 16	
	8.4. Part 4, Column 15	
9.	Deduct current year's other than temporary impairment recognized:	
	9.1. Part 1, Column 14	
	9.2. Part 2, Section 1, Column 17	
	9.3. Part 2, Section 2, Column 14	
	9.4. Part 4, Column 13	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	64,066
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	112,476,069
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	112,476,069

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

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States	974,964	988,043	975,297	975,000
	2. Canada				
	3. Other Countries				
	4. Totals	974,964	988,043	975,297	975,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals	497,938	549,780	497,430	500,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals	29,357,385	30,764,512	29,821,359	28,860,000
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	16,107,977	17,406,388	16,419,370	15,425,000
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans and Hybrid Securities (unaffiliated)	8. United States	26,043,824	27,347,791	25,995,990	26,000,000
	9. Canada	2,013,286	2,080,000	2,064,420	2,000,000
	10. Other Countries	4,476,054	4,646,229	4,465,285	4,500,000
	11. Totals	32,533,164	34,074,020	32,525,695	32,500,000
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds	79,471,428	83,782,743	80,239,151	78,260,000
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States				
	15. Canada				
	16. Other Countries				
	17. Totals				
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks				
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated)	20. United States	27,181,400	27,181,400	11,500,096	
	21. Canada	1,956,684	1,956,684	2,034,000	
	22. Other Countries	3,866,556	3,866,556	2,998,480	
	23. Totals	33,004,640	33,004,640	16,532,575	
Parent, Subsidiaries and Affiliates	24. Totals				
	25. Total Common Stocks	33,004,640	33,004,640	16,532,575	
	26. Total Stocks	33,004,640	33,004,640	16,532,575	
	27. Total Bonds and Stocks	112,476,069	116,787,384	96,771,726	

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

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1		974,964				XXX	974,964	1.2	974,612	1.3	974,964	
1.2 NAIC 2						XXX						
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals		974,964				XXX	974,964	1.2	974,612	1.3	974,964	
2. All Other Governments												
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1			497,938			XXX	497,938	0.6	497,775	0.7	497,938	
3.2 NAIC 2						XXX						
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals			497,938			XXX	497,938	0.6	497,775	0.7	497,938	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1	2,010,059	11,724,148	14,334,719	895,000		XXX	28,963,926	36.4	27,394,936	35.9	28,963,926	
4.2 NAIC 2			393,459			XXX	393,459	0.5	398,208	0.5	393,459	
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals	2,010,059	11,724,148	14,728,178	895,000		XXX	29,357,385	36.9	27,793,145	36.4	29,357,385	
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1		3,735,751	11,999,120			XXX	15,734,871	19.8	15,139,911	19.8	15,734,871	
5.2 NAIC 2			373,106			XXX	373,106	0.5	375,722	0.5	373,106	
5.3 NAIC 3						XXX						
5.4 NAIC 4						XXX						
5.5 NAIC 5						XXX						
5.6 NAIC 6						XXX						
5.7 Totals		3,735,751	12,372,226			XXX	16,107,977	20.3	15,515,633	20.3	16,107,977	

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

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1		1,991,156	1,997,220			XXX	3,988,376	5.0	8,523,310	11.2	3,988,376	
6.2 NAIC 2		12,500,961	14,043,845			XXX	26,544,807	33.4	23,039,832	30.2	20,069,673	6,475,134
6.3 NAIC 3	1,999,981					XXX	1,999,981	2.5			1,999,981	
6.4 NAIC 4						XXX						
6.5 NAIC 5						XXX						
6.6 NAIC 6						XXX						
6.7 Totals	1,999,981	14,492,118	16,041,065			XXX	32,533,164	40.9	31,563,142	41.3	26,058,030	6,475,134
7. Hybrid Securities												
7.1 NAIC 1						XXX						
7.2 NAIC 2						XXX						
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1						XXX						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX							
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX							
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX							
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX							
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX							
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX							
9.7 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX						
10.3 NAIC 3						XXX						
10.4 NAIC 4						XXX						
10.5 NAIC 5						XXX						
10.6 NAIC 6						XXX						
10.7 Totals						XXX						

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

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
11. Total Bonds Current Year												
11.1 NAIC 1	(d) 2,010,059	18,426,020	28,828,997	895,000			50,160,076	63.1	XXX	XXX	50,160,076	
11.2 NAIC 2	(d)	12,500,961	14,810,410				27,311,372	34.4	XXX	XXX	20,836,238	6,475,134
11.3 NAIC 3	(d) 1,999,981						1,999,981	2.5	XXX	XXX	1,999,981	
11.4 NAIC 4	(d)								XXX	XXX		
11.5 NAIC 5	(d)								XXX	XXX		
11.6 NAIC 6	(d)								XXX	XXX		
11.7 Totals	4,010,040	30,926,981	43,639,407	895,000			(b) 79,471,428	100.0	XXX	XXX	72,996,295	6,475,134
11.8 Line 11.7 as a % of Col. 7	5.0	38.9	54.9	1.1			100.0	XXX	XXX	XXX	91.9	8.1
12. Total Bonds Prior Year												
12.1 NAIC 1	4,000,742	15,240,371	26,587,167	6,702,265			XXX	XXX	52,530,545	68.8	51,004,273	1,526,271
12.2 NAIC 2	1,090,815	9,002,104	13,720,844				XXX	XXX	23,813,763	31.2	17,844,189	5,969,574
12.3 NAIC 3							XXX	XXX				
12.4 NAIC 4							XXX	XXX				
12.5 NAIC 5							XXX	XXX				
12.6 NAIC 6							XXX	XXX	(c)	(c)		
12.7 Totals	5,091,557	24,242,475	40,308,011	6,702,265			XXX	XXX	(b) 76,344,308	100.0	68,848,462	7,495,845
12.8 Line 12.7 as a % of Col. 9	6.7	31.8	52.8	8.8			XXX	XXX	100.0	XXX	90.2	9.8
13. Total Publicly Traded Bonds												
13.1 NAIC 1	2,010,059	18,426,020	28,828,997	895,000			50,160,076	63.1	51,004,273	66.8	50,160,076	XXX
13.2 NAIC 2		6,025,828	14,810,410				20,836,238	26.2	17,844,189	23.4	20,836,238	XXX
13.3 NAIC 3	1,999,981						1,999,981	2.5			1,999,981	XXX
13.4 NAIC 4												XXX
13.5 NAIC 5												XXX
13.6 NAIC 6												XXX
13.7 Totals	4,010,040	24,451,848	43,639,407	895,000			72,996,295	91.9	68,848,462	90.2	72,996,295	XXX
13.8 Line 13.7 as a % of Col. 7	5.5	33.5	59.8	1.2			100.0	XXX	XXX	XXX	100.0	XXX
13.9 Line 13.7 as a % of Line 11.7, Col. 7, Section 11	5.0	30.8	54.9	1.1			91.9	XXX	XXX	XXX	91.9	XXX
14. Total Privately Placed Bonds												
14.1 NAIC 1								0.0	1,526,271	2.0	XXX	
14.2 NAIC 2		6,475,134					6,475,134	8.1	5,969,574	7.8	XXX	6,475,134
14.3 NAIC 3											XXX	
14.4 NAIC 4											XXX	
14.5 NAIC 5											XXX	
14.6 NAIC 6											XXX	
14.7 Totals		6,475,134					6,475,134	8.1	7,495,845	9.8	XXX	6,475,134
14.8 Line 14.7 as a % of Col. 7		100.0	0.0				100.0	XXX	XXX	XXX	XXX	100.0
14.9 Line 14.7 as a % of Line 11.7, Col. 7, Section 11		8.1	0.0				8.1	XXX	XXX	XXX	XXX	8.1

(a) Includes \$ 6,475,134 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ current year of bonds with Z designations and \$ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$ current year, \$ prior year of bonds with 5GI designations and \$ current year, \$ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) 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 \$

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

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations		974,964				XXX	974,964	1.2	974,612	1.3	974,964	
1.02 Residential Mortgage-Backed Securities						XXX						
1.03 Commercial Mortgage-Backed Securities						XXX						
1.04 Other Loan-Backed and Structured Securities						XXX						
1.05 Totals		974,964				XXX	974,964	1.2	974,612	1.3	974,964	
2. All Other Governments												
2.01 Issuer Obligations						XXX						
2.02 Residential Mortgage-Backed Securities						XXX						
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities						XXX						
2.05 Totals						XXX						
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations			497,938			XXX	497,938	0.6	497,775	0.7	497,938	
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						
3.04 Other Loan-Backed and Structured Securities						XXX						
3.05 Totals			497,938			XXX	497,938	0.6	497,775	0.7	497,938	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations	2,010,059	11,724,148	14,728,178	895,000		XXX	29,357,385	36.9	27,793,145	36.4	29,357,385	
4.02 Residential Mortgage-Backed Securities						XXX						
4.03 Commercial Mortgage-Backed Securities						XXX						
4.04 Other Loan-Backed and Structured Securities						XXX						
4.05 Totals	2,010,059	11,724,148	14,728,178	895,000		XXX	29,357,385	36.9	27,793,145	36.4	29,357,385	
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations		3,735,751	12,372,226			XXX	16,107,977	20.3	15,515,633	20.3	16,107,977	
5.02 Residential Mortgage-Backed Securities						XXX						
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities						XXX						
5.05 Totals		3,735,751	12,372,226			XXX	16,107,977	20.3	15,515,633	20.3	16,107,977	
6. Industrial and Miscellaneous												
6.01 Issuer Obligations	1,999,981	14,492,118	16,041,065			XXX	32,533,164	40.9	31,472,193	41.2	26,058,030	6,475,134
6.02 Residential Mortgage-Backed Securities						XXX						
6.03 Commercial Mortgage-Backed Securities						XXX						
6.04 Other Loan-Backed and Structured Securities						XXX			90,949	0.1		
6.05 Totals	1,999,981	14,492,118	16,041,065			XXX	32,533,164	40.9	31,563,142	41.3	26,058,030	6,475,134
7. Hybrid Securities												
7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX						
7.03 Commercial Mortgage-Backed Securities						XXX						
7.04 Other Loan-Backed and Structured Securities						XXX						
7.05 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX						
8.02 Residential Mortgage-Backed Securities						XXX						
8.03 Commercial Mortgage-Backed Securities						XXX						
8.04 Other Loan-Backed and Structured Securities						XXX						
8.05 Affiliated Bank Loans - Issued						XXX						
8.06 Affiliated Bank Loans - Acquired						XXX						
8.07 Totals						XXX						

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

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
9.02 Bond Mutual Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
9.03 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX						
10.02 Unaffiliated Bank Loans - Acquired						XXX						
10.03 Totals						XXX						
11. Total Bonds Current Year												
11.01 Issuer Obligations	4,010,040	30,926,981	43,639,407	895,000		XXX	79,471,428	100.0	XXX	XXX	72,996,295	6,475,134
11.02 Residential Mortgage-Backed Securities						XXX			XXX	XXX		
11.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
11.04 Other Loan-Backed and Structured Securities						XXX			XXX	XXX		
11.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
11.06 Affiliated Bank Loans						XXX			XXX	XXX		
11.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
11.08 Totals	4,010,040	30,926,981	43,639,407	895,000			79,471,428	100.0	XXX	XXX	72,996,295	6,475,134
11.09 Line 11.08 as a % of Col. 7	5.0	38.9	54.9	1.1			100.0	XXX	XXX	XXX	91.9	8.1
12. Total Bonds Prior Year												
12.01 Issuer Obligations	5,000,608	24,242,475	40,308,011	6,702,265		XXX	XXX	XXX	76,253,359	99.9	68,757,514	7,495,845
12.02 Residential Mortgage-Backed Securities						XXX	XXX	XXX				
12.03 Commercial Mortgage-Backed Securities						XXX	XXX	XXX				
12.04 Other Loan-Backed and Structured Securities	90,949					XXX	XXX	XXX	90,949	0.1	90,949	
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX							
12.06 Affiliated Bank Loans						XXX	XXX	XXX				
12.07 Unaffiliated Bank Loans						XXX	XXX	XXX				
12.08 Totals	5,091,557	24,242,475	40,308,011	6,702,265			XXX	XXX	76,344,308	100.0	68,848,462	7,495,845
12.09 Line 12.08 as a % of Col. 9	6.7	31.8	52.8	8.8			XXX	XXX	100	XXX	90.2	9.8
13. Total Publicly Traded Bonds												
13.01 Issuer Obligations	4,010,040	24,451,848	43,639,407	895,000		XXX	72,996,295	91.9	68,757,514	90.1	72,996,295	XXX
13.02 Residential Mortgage-Backed Securities						XXX						XXX
13.03 Commercial Mortgage-Backed Securities						XXX						XXX
13.04 Other Loan-Backed and Structured Securities						XXX			90,949	0.1		XXX
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX							XXX
13.06 Affiliated Bank Loans						XXX						XXX
13.07 Unaffiliated Bank Loans						XXX						XXX
13.08 Totals	4,010,040	24,451,848	43,639,407	895,000			72,996,295	91.9	68,848,462	90.2	72,996,295	XXX
13.09 Line 13.08 as a % of Col. 7	5.5	33.5	59.8	1.2			100.0	XXX	XXX	XXX	100.0	XXX
13.10 Line 13.08 as a % of Line 11.08, Col. 7, Section 11	5.0	30.8	54.9	1.1			91.9	XXX	XXX	XXX	91.9	XXX
14. Total Privately Placed Bonds												
14.01 Issuer Obligations		6,475,134				XXX	6,475,134	8.1	7,495,845	9.8	XXX	6,475,134
14.02 Residential Mortgage-Backed Securities						XXX					XXX	
14.03 Commercial Mortgage-Backed Securities						XXX					XXX	
14.04 Other Loan-Backed and Structured Securities						XXX					XXX	
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
14.06 Affiliated Bank Loans						XXX					XXX	
14.07 Unaffiliated Bank Loans						XXX					XXX	
14.08 Totals		6,475,134					6,475,134	8.1	7,495,845	9.8	XXX	6,475,134
14.09 Line 14.08 as a % of Col. 7		100.0	0.0				100.0	XXX	XXX	XXX	XXX	100.0
14.10 Line 14.08 as a % of Line 11.08, Col. 7, Section 11		8.1	0.0				8.1	XXX	XXX	XXX	XXX	8.1

Schedule DA - Verification - Short-Term Investments

NONE

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 1 - Real Estate Owned

NONE

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

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

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 1 - Other Long-Term Invested Assets Owned

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

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

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest				Dates			
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22	
CUSIP Identification	Description	C o d e	F o r e i g n	B o n d C h a r	NAIC Designation and Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization) Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date	
912828-5L-0	UNITED STATES TREASURY	SD			1	597,797		102,359.4	600,000	598,608			718		2.875	3.004	MM	2,227	17,250	11/06/2018	11/15/2021	
912828-63-5	UNITED STATES TREASURY	SD			1	252,773		99,128.9	250,000	247,419			(395)		1.375	1.209	JD	9	3,438	07/06/2016	06/30/2023	
912828-6F-8	UNITED STATES TREASURY	SD			1	124,727		100,851.6	125,000	124,938			28		2.000	2.024	FA	944	2,500	03/09/2012	02/15/2022	
0199999. Subtotal - Bonds - U.S. Governments - Issuer Obligations						975,297	XXX	988,043	975,000	974,964		352			XXX	XXX	XXX		3,181	23,188	XXX	XXX
0599999. Total - U.S. Government Bonds						975,297	XXX	988,043	975,000	974,964		352			XXX	XXX	XXX		3,181	23,188	XXX	XXX
1099999. Total - All Other Government Bonds							XXX								XXX	XXX	XXX				XXX	XXX
452152-H3-8	ILLINOIS ST	SD	2		1FE	497,430		109,956.0	500,000	497,938		163			4.000	4.050	FA	8,333	20,000	10/14/2016	02/01/2030	
1199999. Subtotal - Bonds - U.S. States, Territories and Possessions - Issuer Obligations						497,430	XXX	549,780	500,000	497,938		163			XXX	XXX	XXX		8,333	20,000	XXX	XXX
1799999. Total - U.S. States, Territories and Possessions Bonds						497,430	XXX	549,780	500,000	497,938		163			XXX	XXX	XXX		8,333	20,000	XXX	XXX
005176-KJ-0	ADA & CANYON CNTYS IDAHO JT SCH DIST NO	SD	2		1FE	1,116,995		122,995.0	915,000	1,070,954		(19,572)		5.000	2.408	MS		13,471	45,750	08/04/2017	09/15/2030	
005176-KJ-0	ADA & CANYON CNTYS IDAHO JT SCH DIST NO	SD	2		1FE	103,765		122,995.0	85,000	99,488		(1,818)		5.000	2.408	MS		1,251	4,250	08/04/2017	09/15/2030	
088833-PS-1	BIDDEFORD ME	SD	2		1FE	266,988		112,398.0	250,000	263,268		(1,483)		4.000	3.220	AO		2,500	10,000	05/25/2017	10/01/2035	
120000-DJ-0	BUFORD GA	SD	2		1FE	431,876		111,909.0	400,000	425,333		(3,208)		4.000	2.991	JJ		8,000	16,000	11/17/2017	01/01/2036	
120000-DJ-0	BUFORD GA	SD	2		1FE	107,969		111,909.0	100,000	106,334		(802)		4.000	2.990	JJ		2,000	4,000	11/17/2017	01/01/2036	
159195-UA-2	CHANNELVIEW TEX INDPT SCH DIST	SD	2		1FE	527,165		102,744.0	500,000	505,142		(3,075)		3.000	2.350	FA		5,667	15,000	03/06/2012	08/15/2023	
250325-TK-3	DESCHUTES CNTY ORE ADMINISTRATIVE SCH DI	SD	2		1FE	2,769,872		104,363.0	2,800,000	2,772,544		1,159		3.125	3.199	JD		3,889	87,500	09/06/2017	06/15/2037	
263713-ZW-2	DUBLIN OHIO	SD	2		1FE	1,442,553		112,460.0	1,345,000	1,405,559		(9,170)		4.000	3.159	JD		4,483	53,800	09/16/2015	12/01/2030	
304657-MW-6	FAIRFIELD OHIO CITY SCH DIST	SD	2		1FE	1,359,286		105,180.0	1,380,000	1,366,716		1,473		3.000	3.140	MM		6,900	41,400	08/28/2014	11/01/2027	
338765-HC-7	FLATHEAD CNTY MONT HIGH SCH DIST NO 5 KA	SD	2		1FE	477,351		112,401.0	450,000	471,090		(2,442)		4.000	3.290	JJ		9,000	18,000	04/26/2017	07/01/2035	
35880C-TA-2	FRISCO TEX INDPT SCH DIST	SD	2		1FE	1,596,000		104,145.0	1,600,000	1,596,754		190		3.000	3.018	FA		18,133	48,000	02/19/2016	08/15/2033	
35880C-TA-2	FRISCO TEX INDPT SCH DIST	SD	2		1FE	399,000		104,145.0	400,000	399,188		48		3.000	3.018	FA		4,533	12,000	02/19/2016	08/15/2033	
395100-PZ-7	GREENFIELD MASS	SD	2		1FE	1,127,543		108,268.0	1,095,000	1,109,858		(3,283)		3.500	3.150	MS		12,775	38,325	03/07/2014	03/01/2026	
467075-EQ-6	JACKSON CNTY KANS UNI SCH DIST NO 336 DE	SD	2		1	561,650		110,060.0	500,000	522,295		(7,874)		5.000	3.239	MS		8,333	25,000	07/24/2014	09/01/2027	
479370-XR-4	JOHNSTON IOWA	SD	2		1FE	1,007,425		100,846.0	1,010,000	1,008,584		194		3.375	3.400	JD		2,841	34,088	10/24/2013	06/01/2026	
486116-DS-2	KAUAI CNTY HAWAII	SD	2		1FE	344,064		104,214.0	350,000	344,576		246		3.000	3.120	FA		4,375	10,500	10/19/2017	08/01/2036	
487694-JV-4	KELLER TEX INDPT SCH DIST	SD	2		1FE	1,277,770		113,450.0	1,000,000	1,103,562		(127,290)		5.000	2.020	FA		18,889	50,000	02/28/2013	08/15/2023	
533067-NW-2	LINCOLN CALIF UNI SCH DIST SAN JOAQUIN C	SD	2		1FE	726,881		118,903.0	630,000	687,908		(9,333)		5.000	3.190	FA		13,125	31,500	07/22/2015	08/01/2029	
537428-R7-1	LITTLE ROCK ARK SCH DIST	SD	2		1FE	2,943,060		101,105.0	3,000,000	2,953,462		2,732		3.500	3.650	FA		43,750	105,000	12/01/2015	02/01/2033	
597783-L4-9	MIDLAND TEX INDPT SCH DIST	SD	2		1FE	535,865		108,989.0	500,000	513,649		(4,105)		4.000	3.076	FA		7,566	20,000	01/30/2014	02/15/2026	
639557-QX-8	NEBO UTAH SCH DIST	SD	2		1FE	1,025,410		101,072.0	1,000,000	1,001,475		(2,885)		3.250	2.951	JJ		16,250	32,500	08/12/2010	07/01/2023	
657781-MB-3	NORTH BRANCH MINN INDPT SCH DIST NO 138	SD	2		1FE	1,096,569		104,256.0	1,110,000	1,098,219		720		3.000	3.099	FA		13,875	33,300	10/25/2017	02/01/2033	
703589-GC-9	PAULDING CNTY GA	SD	2		1FE	418,534		105,071.0	420,000	418,659		63		3.125	3.150	FA		5,469	13,125	10/25/2017	02/01/2036	
703589-GC-9	PAULDING CNTY GA	SD	2		1FE	74,738		105,071.0	75,000	74,763		11		3.125	3.150	FA		977	2,344	10/25/2017	02/01/2036	
713040-JL-8	PEORIA CNTY ILL SCH DIST NO 150 PEORIA	SD	2		1FE	772,358		107,640.0	750,000	770,768		(1,589)		4.000	3.550	JJ		18,917		04/24/2019	01/01/2038	
724496-PB-4	PITT CNTY N C	SD	2		1FE	1,010,000		105,729.0	1,010,000	1,010,000				3.000	3.000	AO		7,575	30,300	08/26/2015	04/01/2029	
734866-JX-5	PORT NEWPORT ORE	SD	2		1FE	500,000		99,130.0	500,000	500,000				3.500	3.500	JJ		681		12/12/2019	01/01/2038	
745400-7U-9	PULASKI CNTY ARK SPL SCH DIST	SD	2		1FE	1,382,494		102,242.0	1,390,000	1,384,569		505		3.250	3.300	FA		18,823	45,175	08/26/2015	02/01/2029	
79353P-OP-0	ST TAMMANY PARISH LA HOSP SVC DIST NO 2	SD	2		1FE	395,000		98,491.0	395,000	395,000				3.440	3.440	MS		1,510		10/24/2019	03/01/2036	
824178-XE-2	SHERMAN TEX INDPT SCH DIST	SD	2		1FE	247,415		105,957.0	250,000	248,417		196		3.000	3.100	FA		2,833	7,500	07/16/2014	02/15/2027	
838736-VH-5	SOUTH LYON MICH CMNTY SCHS	SD	2		1FE	1,332,877		109,543.0	1,300,000	1,319,314		(3,219)		4.000	3.690	MM		8,667	52,000	06/16/2015	05/01/2030	
85933M-BP-8	STERLING HILLS WEST MET DIST COLO	SD	2		2FE	404,247		117,157.0	350,000	393,459		(4,749)		5.000	3.211	JD		1,458	17,500	08/31/2017	12/01/2032	
889278-JY-1	TOLEDO OHIO	SD	2		1FE	981,010		105,941.0	1,000,000	987,007		1,227		3.250	3.420	JD		2,708	32,500	09/19/2014	12/01/2028	
988505-GC-1	YUMA & LA PAZ CNTYS ARIZ CMNTY COLLEGE D	SD	2		1FE	1,057,630		109,706.0	1,000,000	1,029,472		(5,982)		4.000	3.290	JJ		20,000	40,000	11/26/2014	07/01/2028	
1899999. Subtotal - Bonds - U.S. Political Subdivisions - Issuer Obligations						29,821,359	XXX	30,764,512	28,860,000	29,357,385		(103,117)			XXX	XXX	XXX		311,213	976,356	XXX	XXX
2499999. Total - U.S. Political Subdivisions Bonds						29,821,359	XXX	30,764,512	28,860,000	29,357,385		(103,117)			XXX	XXX	XXX		311,213	976,356	XXX	XXX
01179R-GK-3	ALASKA MUN BD BK ALASKA MUN BD BK AUTH	SD	2		1FE	1,828,757		109,206.0	1,900,184	1,787,764		(9,118)		4.000	3.369	AO		17,400	69,600	02/20/2015	10/01/2030	
161037-F7-6	CHARLOTTE N C CTF5 PARTN	SD	2		1FE	550,465		109,264.0	500,000	518,755		(5,157)		4.000	2.840	JD		1,667	20,000	04/18/2013	06/01/2025	
187145-ED-5	CLIFTON TEX HIGHER ED FIN CORP ED REV	SD	2		1FE	1,153,520		117,808.0	1,000,000	1,093,519		(14,971)		5.000	3.171	FA		18,889	50,000	09/16/2015	08/15/2029	
313376-FE-0	FEDERAL HOME LOAN BANKS	SD	2		1	248,975		108,475.0	250,000	249,468		67		3.300	3.335	JD		688	8,250	11/14/2011	12/01/2026	
45204E-ZB-7	ILLINOIS FIN AUTH REV	SD	2		1FE	503,920		108,053.0	500,000	503,104		(368)		4.000	3.900	MS		6,667	20,000	08/31/2017	03/01/2035	
491209-AR-3	KENTUCKY BD DEV CORP CONVENTION FAC5 REV	SD	2		1FE	1,578,989		122,017.0	1,410,000	1,561,230		(14,668)		5.000	3.551	MS		23,500	61,688	10/03/2018	09/01/2034	
532644-JK-8	LIMESTONE CNTY ALA BRD ED	SD	2		1FE	489,795		105,475.0														

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

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest			Dates				
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22	
CUSIP Identification	Description	C o d e	F o r e i g n	B o n d C h a r	NAIC Designation and Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) Accretion	Current Year's Other Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date	
573100-DW-1	MARTHAS VINEYARD MASS LD BK REV			2	1FE	447,664		482,036	400,000	436,054		(4,224)			5.000	3.591	MM	3,333	20,000	02/03/2017	05/01/2036	
626388-VY-5	MUNSTER IND SCH BLDG CORP			2	1FE	520,130		549,530	500,000	516,437		(1,875)			4.000	3.500	JJ	9,222	20,000	12/06/2017	01/15/2037	
626388-WZ-1	MUNSTER IND SCH BLDG CORP			2	1FE	1,270,138		1,394,500	1,250,000	1,268,177		(1,645)			4.000	3.799	JJ	23,056	37,083	09/20/2018	07/15/2035	
64577B-L4-4	NEW JERSEY ECONOMIC DEV AUTH REV			2	2FE	378,753		400,824	350,000	373,106		(2,616)			5.000	3.968	JD	778	17,500	09/28/2017	06/15/2035	
646080-TH-4	NEW JERSEY ST HIGHER ED ASSISTANCE AUTH			2	1FE	504,105		549,270	500,000	503,508		(346)			4.000	3.901	JD	1,667	20,000	05/09/2018	12/01/2034	
67232T-BP-9	OAKLAND CALIF REDEV SUCCESSOR AGY TAX AL			2	1FE	1,008,127		1,101,121	1,020,000	1,008,994		589			4.000	4.104	MS	13,600	40,800	05/10/2018	09/01/2033	
70917S-S4-6	PENNSYLVANIA ST HIGHER EDL FACS AUTH REV			2	1FE	773,444		832,456	745,000	768,169		(2,607)			4.000	3.531	FA	11,258	29,800	11/29/2017	08/15/2036	
70917S-S4-6	PENNSYLVANIA ST HIGHER EDL FACS AUTH REV		SD	2	1FE	264,736		284,934	255,000	262,942		(893)			4.000	3.530	FA	3,853	10,200	11/29/2017	08/15/2036	
722042-GY-8	PINAL CNTY ARIZ CMNTY COLLEGE DIST REV			2	1FE	357,541		372,362	315,000	345,700		(4,167)			5.000	3.321	JJ	7,875	15,750	01/12/2017	07/01/2035	
722042-GZ-5	PINAL CNTY ARIZ CMNTY COLLEGE DIST REV			2	1FE	255,718		274,943	250,000	254,144		(554)			4.000	3.711	JJ	5,000	10,000	01/12/2017	07/01/2036	
850777-EX-7	SPRINGFIELD MASS WTR & SWR COMM REV			2	1FE	633,420		668,340	600,000	616,549		(3,324)			4.000	3.340	JJ	11,067	24,000	07/09/2014	07/15/2028	
86932U-BT-1	SUSTAINABLE ENERGY UTIL INC DEL ENERGY E			2	1FE	424,084		457,332	400,000	422,163		(1,921)			4.000	3.281	JD	711	13,778	01/30/2019	12/15/2035	
86932U-BU-8	SUSTAINABLE ENERGY UTIL INC DEL ENERGY E			2	1FE	263,543		285,010	250,000	262,465		(1,077)			4.000	3.351	JD	444	8,611	01/30/2019	12/15/2036	
914710-HE-1	UNIVERSITY N C ASHEVILLE REV			2	1FE	558,437		604,984	550,000	556,181		(836)			4.000	3.801	JD	1,833	22,000	03/09/2017	06/01/2035	
91754T-WH-2	UTAH ST CHARTER SCH FIN AUTH CHARTER SCH			2	1FE	478,372		506,834	425,000	470,529		(5,018)			5.000	3.421	AO	4,486	21,250	05/24/2018	10/15/2033	
917567-AT-6	UTAH TRAN AUTH SALES TAX REV		SD	2	1FE	624,693		629,743	535,000	588,462		(8,894)			5.000	3.000	JD	1,189	26,750	09/17/2015	06/15/2031	
917567-AT-6	UTAH TRAN AUTH SALES TAX REV			2	1FE	542,957		547,347	465,000	511,467		(7,730)			5.000	3.000	JD	1,033	23,250	09/17/2015	06/15/2031	
92428C-LP-7	VERMONT ST STUDENT ASSISTANCE CORP ED LN			2	1FE	416,693		441,763	415,000	416,405		(188)			4.000	3.940	JD	738	16,600	05/04/2018	06/15/2032	
2599999. Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations						16,419,370		17,406,388	15,425,000	16,107,977		(95,282)			XXX	XXX	XXX	174,953	636,910	XXX	XXX	
3199999. Total - U.S. Special Revenues Bonds						16,419,370		17,406,388	15,425,000	16,107,977		(95,282)			XXX	XXX	XXX	174,953	636,910	XXX	XXX	
00205G-AA-5	APT PIPELINES LTD			C	1	2FE		1,486,140	1,500,000	1,486,635		1,458			3.875	3.987	AO	12,917	58,125	10/03/2012	10/11/2022	
03939L-BC-7	ARCELORMITTAL SA			C	1	2FE		1,980,080	2,000,000	1,980,819		739			4.250	4.374	JJ	38,958		07/11/2019	07/16/2029	
04015C-AA-6	ARIES FINANCE CO LLC			1,2	2FE	1,965,360		99,9641	2,000,000	1,981,767		3,382			4.000	4.213	AO	18,444	80,000	10/01/2014	10/08/2024	
042735-BE-9	ARROW ELECTRONICS INC			1,2	2FE	990,310		1,054,329	1,000,000	994,523		916			4.000	4.117	AO	10,000	40,000	02/23/2015	04/01/2025	
120568-BA-7	BUNGE LIMITED FINANCE CORP			1,2	2FE	998,780		1,050,550	1,000,000	999,500		204			4.350	4.375	MS	12,808	44,104	09/04/2018	03/15/2024	
12505B-AD-2	CBRE SERVICES INC			1,2	2FE	992,400		1,114,971	1,000,000	995,166		654			4.875	4.967	MS	16,250	48,750	08/06/2015	03/01/2026	
14042R-NH-7	CAPITAL ONE NA			2	2FE	999,540		1,001,698	1,000,000	999,588		48			2.150	2.166	MS	6,868		09/03/2019	09/06/2022	
189754-AA-2	COACH INC			1,2	2FE	994,450		1,058,690	1,000,000	996,882		518			4.250	4.317	AO	10,625	42,500	02/23/2015	04/01/2025	
21036P-AH-8	CONSTELLATION BRANDS INC			1,2	2FE	1,015,450		1,014,075	1,000,000	1,013,904		(1,546)			2.650	2.130	MM	3,975	13,250	09/04/2019	11/07/2022	
25156P-AU-7	DEUTSCHE TELEKOM INTERNATIONAL FINANCE B			C	1,2	2FE		499,195	500,000	499,718		160			1.950	1.984	MS	2,763	9,750	09/13/2016	09/19/2021	
26884U-AB-5	EPR PROPERTIES			1,2	2FE	996,380		1,062,441	1,000,000	997,943		339			4.500	4.545	AO	11,250	45,000	03/09/2015	04/01/2025	
281020-AN-7	EDISON INTERNATIONAL			1,2	2FE	1,097,500		1,122,803	1,000,000	1,092,548		(4,952)			5.750	4.260	JD	2,556	27,792	07/11/2019	06/15/2027	
31620M-AR-7	FIDELITY NATIONAL INFORMATION SERVICES I			1,2	2FE	1,033,900		1,143,067	1,000,000	1,021,805		(3,377)			5.000	4.551	AO	10,556	50,000	02/23/2016	10/15/2025	
335720-AB-4	FIRST NATL NEB INC			5	2FE	1,000,000		1,015,220	1,000,000	1,000,000					4.375	4.375	AO	10,938	43,750	03/13/2018	04/01/2028	
44106M-AV-4	HOSPITALITY PROPERTIES TRUST			1,2	2FE	1,952,300		2,105,416	2,000,000	1,968,001		4,281			5.250	5.562	FA	39,667	105,000	01/29/2016	02/15/2026	
46625H-NJ-5	JPMORGAN CHASE & CO			1	1FE	1,995,880		2,214,363	2,000,000	1,997,220		297			4.250	4.271	AO	21,250	85,000	09/24/2015	10/01/2027	
496902-AJ-6	KINROSS GOLD CORP			C	1,2	2FE		2,064,420	2,000,000	2,013,286		(8,778)			5.125	4.639	MS	34,167	102,500	05/07/2013	09/01/2021	
60920L-AE-4	MONDELEZ INTERNATIONAL HOLDINGS NETHERLA			C	1	2FE		499,870	500,000	499,882		12			2.125	2.134	MS	3,010		09/06/2019	09/19/2022	
68245J-AB-6	ONEBEACON US HOLDINGS INC			1	1FE	976,490		1,054,749	1,000,000	991,616		2,672			4.600	4.919	MM	6,644	46,000	08/23/2013	11/09/2022	
703481-AB-7	PATTERSON-UTI ENERGY INC			1,2	2FE	1,998,500		97,4246	2,000,000	1,998,832		136			3.950	3.959	FA	32,917	79,000	01/10/2018	02/01/2028	
709599-AH-7	PENSKE TRUCK LEASING CO LP			1	2FE	993,760		1,063,690	1,000,000	998,132		678			4.875	4.955	JJ	23,021	48,750	07/10/2012	07/11/2022	
74164M-AA-6	PRIMERICA INC			1	1FE	998,430		1,058,710	1,000,000	999,540		167			4.750	4.769	JJ	21,903	47,500	07/11/2012	07/15/2022	
74267C-AC-0	PROASSURANCE CORP			1	2FE	1,000,000		1,097,929	1,000,000	1,000,000					5.300	5.299	MM	6,772	53,000	11/18/2013	11/15/2023	
749685-AX-1	RPM INTERNATIONAL INC			1,2	2FE	1,997,120		2,167,318	2,000,000	1,997,327		207			4.550	4.568	MS	30,333	46,511	02/26/2019	03/01/2029	
939648-AB-7	WASHINGTON PRIME GROUP LP			1,2	3FE	1,999,440		2,000,000	2,000,000	1,999,961		74			3.850	3.854	AO	19,250	77,000	03/17/2015	04/01/2020	
3299999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						32,525,695		34,074,020	32,500,000	32,533,164		(1,710)			XXX	XXX	XXX	407,841	1,193,282	XXX	XXX	
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						32,525,695		34,074,020	32,500,000	32,533,164		(1,710)			XXX	XXX	XXX	407,841	1,193,282	XXX	XXX	
4899999. Total - Hybrid Securities								XXX							XXX	XXX	XXX			XXX	XXX	
5599999. Total - Parent, Subsidiaries and Affiliates Bonds								XXX							XXX	XXX	XXX			XXX	XXX	
6099999. Subtotal - SVO Identified Funds								XXX							XXX	XXX	XXX			XXX	XXX	
6599999. Subtotal - Unaffiliated Bank Loans								XXX							XXX	XXX	XXX			XXX	XXX	
7699999. Total - Issuer Obligations						80,239,151		83,782,743	78,260,000	79,471,428		(199,595)				XXX	XXX	XXX	905,522	2,849,735	XXX	XXX
7799999. Total - Residential Mortgage-Backed Securities								XXX							XXX	XXX	XXX			XXX	XXX	

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

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates		
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22	
CUSIP Identification	Description	C o d e	F o r e i g n	Bond Char	NAIC Desig- nation and Admini- strative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization) Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date	
7899999. Total - Commercial Mortgage-Backed Securities							XXX								XXX	XXX	XXX				XXX	XXX
7999999. Total - Other Loan-Backed and Structured Securities							XXX								XXX	XXX	XXX				XXX	XXX
8099999. Total - SVO Identified Funds							XXX								XXX	XXX	XXX				XXX	XXX
8199999. Total - Affiliated Bank Loans							XXX								XXX	XXX	XXX				XXX	XXX
8299999. Total - Unaffiliated Bank Loans							XXX								XXX	XXX	XXX				XXX	XXX
8399999 - Total Bonds						80,239,151	XXX	83,782,743	78,260,000	79,471,428		(199,595)			XXX	XXX	XXX	905,522	2,849,735		XXX	XXX

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

SCHEDULE D - PART 2 - SECTION 1

Showing All PREFERRED STOCKS Owned December 31 of Current Year

1 CUSIP Identi- fication	2 Description	Codes		5 Number of Shares	6 Par Value Per Share	7 Rate Per Share	8 Book/ Adjusted Carrying Value	Fair Value		11 Actual Cost	Dividends			Change in Book/Adjusted Carrying Value				20 NAIC Desig- nation and Admini- strative Symbol	21 Date Acquired	
		3 Code	4 For- eign					9 Rate Per Share Used to Obtain Fair Value	10 Fair Value		12 Declared but Unpaid	13 Amount Received During Year	14 Nonadmitted Declared But Unpaid	15 Unrealized Valuation Increase/ (Decrease)	16 Current Year's (Amor- tization) Accretion	17 Current Year's Other-Than- Temporary Impairment Recognized	18 Total Change in Book/Adjusted Carrying Value (15 + 16 - 17)			19 Total Foreign Exchange Change in Book/ Adjusted Carrying Value
NONE																				
8999999	Total Preferred Stocks							XXX											XXX	XXX

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

SCHEDULE D - PART 2 - SECTION 2

Showing All COMMON STOCKS Owned December 31 of Current Year

1	2	Codes		5	6	Fair Value		9	Dividends			Change in Book/Adjusted Carrying Value				17	18
		3	4			7	8		10	11	12	13	14	15	16		
CUSIP Identification	Description	Code	Foreign	Number of Shares	Book/Adjusted Carrying Value	Rate Per Share Used to Obtain Fair Value	Fair Value	Actual Cost	Declared but Unpaid	Amount Received During Year	Nonadmitted Declared But Unpaid	Unrealized Valuation Increase/ (Decrease)	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (13 - 14)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Date Acquired	NAIC Designation
009158-10-6	AIR PRODUCTS AND CHEMICALS ORD			15,000,000	3,524,850	.234,990	3,524,850	2,346,276	17,400	68,700		1,124,100		1,124,100		12/19/2018	
053015-10-3	AUTOMATIC DATA PROCESSING ORD			48,100,000	8,201,050	.170,500	8,201,050	1,737,702	43,771	151,996		1,894,178		1,894,178		03/04/2010	
09247X-10-1	BLACKROCK ORD			4,900,000	2,463,230	.502,700	2,463,230	1,999,164		64,680		538,412		538,412		10/16/2018	
260003-10-8	DOVER ORD			29,000,000	3,342,540	.115,260	3,342,540	995,909		56,260		1,284,990		1,284,990		08/18/2011	
29250N-10-5	ENBRIDGE ORD		C	49,200,000	1,956,684	.39,770	1,956,684	2,034,000		91,768		427,548		427,548		02/27/2017	
418056-10-7	HASBRO ORD			21,000,000	2,217,810	.105,610	2,217,810	711,270		56,070		511,560		511,560		11/05/2010	
478160-10-4	JOHNSON & JOHNSON ORD			25,000,000	3,646,750	.145,870	3,646,750	1,248,750		93,750		420,500		420,500		10/07/2003	
872540-10-9	TJX ORD			27,500,000	1,679,150	.61,060	1,679,150	1,520,962		24,338		448,800		448,800		09/11/2018	
92343V-10-4	VERIZON COMMUNICATIONS ORD			34,300,000	2,106,020	.61,400	2,106,020	940,063		83,092		177,674		177,674		03/05/2010	
H1467J-10-4	CHUBB ORD		D	15,047,000	2,342,216	.155,660	2,342,216	1,671,421	11,285	44,539		398,445		398,445		01/19/2016	
N83745-10-0	LYONDELLBASELL INDUSTRIES CL A ORD		C	16,134,000	1,524,340	.94,480	1,524,340	1,327,059		66,956		182,637		182,637		11/15/2016	
9099999	Subtotal - Common Stock - Industrial and Miscellaneous (Unaffiliated) Publicly Traded				33,004,640	XXX	33,004,640	16,532,575	72,456	802,149		7,408,843		7,408,843		XXX	XXX
9799999	Total Common Stocks				33,004,640	XXX	33,004,640	16,532,575	72,456	802,149		7,408,843		7,408,843		XXX	XXX
9899999	Total Preferred and Common Stocks				33,004,640	XXX	33,004,640	16,532,575	72,456	802,149		7,408,843		7,408,843		XXX	XXX

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

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

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
713040-JL-8	PEORIA CNTY ILL SCH DIST NO 150 PEORIA		04/24/2019	Stifel Nicolaus & Co.		772,358	750,000	
734866-JK-5	PORT NEWPORT ORE		12/12/2019	RW Baird		500,000	500,000	
79353P-GP-0	ST TAMMANY PARISH LA HOSP SVC DIST NO 2		10/24/2019	RAYMOND JAMES/FI		395,000	395,000	
2499999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						1,667,358	1,645,000	
86932U-BT-1	SUSTAINABLE ENERGY UTIL INC DEL ENERGY E		01/30/2019	RAYMOND JAMES/FI		424,084	400,000	
86932U-BU-8	SUSTAINABLE ENERGY UTIL INC DEL ENERGY E		01/30/2019	RAYMOND JAMES/FI		263,543	250,000	
3199999. Subtotal - Bonds - U.S. Special Revenues						687,627	650,000	
03938L-BC-7	ARCELOMITTAL SA	C	07/11/2019	Merrill Lynch		1,980,080	2,000,000	
14042R-NH-7	CAPITAL ONE NA		09/03/2019	MORGAN STANLEY & CO INC, NY		999,540	1,000,000	
21036P-AW-8	CONSTELLATION BRANDS INC		09/04/2019	WELLS FARGO SECURITIES LLC		1,015,450	1,000,000	8,760
281020-AN-7	EDISON INTERNATIONAL		07/11/2019	KEY CAPITAL MARKETS		1,097,500	1,000,000	3,833
60920L-AE-4	MONDELEZ INTERNATIONAL HOLDINGS NETHERLA	C	09/06/2019	BARCLAYS CAPITAL INC.		499,870	500,000	
749685-AX-1	RPM INTERNATIONAL INC		02/26/2019	WELLS FARGO SECURITIES LLC		1,997,120	2,000,000	
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						7,589,560	7,500,000	12,593
8399997. Total - Bonds - Part 3						9,944,544	9,795,000	12,593
8399998. Total - Bonds - Part 5								
8399999. Total - Bonds						9,944,544	9,795,000	12,593
8999997. Total - Preferred Stocks - Part 3							XXX	
8999998. Total - Preferred Stocks - Part 5							XXX	
8999999. Total - Preferred Stocks							XXX	
9799997. Total - Common Stocks - Part 3							XXX	
9799998. Total - Common Stocks - Part 5							XXX	
9799999. Total - Common Stocks							XXX	
9899999. Total - Preferred and Common Stocks							XXX	
9999999 - Totals						9,944,544	XXX	12,593

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

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
										11	12	13	14	15						
CUSIP Identification	Description	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	Current Year's 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
023654-AW-6	AMERICA WEST AIRLINES PASS THROUGH TRUST		04/01/2019	VARIOUS		90,949	90,949	90,949	90,949						90,949				3,606	01/02/2019
025816-BB-4	AXP 8.125 05/20/19		05/20/2019	Maturity @ 100.00		1,000,000	1,000,000	996,750	999,864		136		136		1,000,000				40,625	05/20/2019
38141E-A2-5	GOLDMAN SACHS GROUP INC		02/15/2019	Maturity @ 100.00		1,500,000	1,500,000	1,559,820	1,501,036		(1,036)		(1,036)		1,500,000				56,250	02/15/2019
48248N-AA-8	KKR GROUP FINANCE CO LLC		07/31/2019	VARIOUS		1,513,067	1,449,000	1,750,175	1,526,271		(25,170)		(25,170)		1,501,102		(52,102)	(52,102)	141,558	09/29/2020
655844-BC-1	NORFOLK SOUTHERN CORP		06/15/2019	Maturity @ 100.00		1,000,000	1,000,000	997,500	999,866		134		134		1,000,000				29,500	06/15/2019
693476-BF-9	PNC FUNDING CORP		06/10/2019	Maturity @ 100.00		1,500,000	1,500,000	1,496,865	1,499,842		158		158		1,500,000				50,250	06/10/2019
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						6,604,016	6,539,949	6,892,059	6,617,828		(25,778)		(25,778)		6,592,051		(52,102)	(52,102)	321,789	XXX
8399997. Total - Bonds - Part 4						6,604,016	6,539,949	6,892,059	6,617,828		(25,778)		(25,778)		6,592,051		(52,102)	(52,102)	321,789	XXX
8399998. Total - Bonds - Part 5																				XXX
8399999. Total - Bonds						6,604,016	6,539,949	6,892,059	6,617,828		(25,778)		(25,778)		6,592,051		(52,102)	(52,102)	321,789	XXX
8999997. Total - Preferred Stocks - Part 4																				XXX
8999998. Total - Preferred Stocks - Part 5																				XXX
8999999. Total - Preferred Stocks																				XXX
9799997. Total - Common Stocks - Part 4																				XXX
9799998. Total - Common Stocks - Part 5																				XXX
9799999. Total - Common Stocks																				XXX
9899999. Total - Preferred and Common Stocks																				XXX
9999999 - Totals						6,604,016	XXX	6,892,059	6,617,828		(25,778)		(25,778)		6,592,051		(52,102)	(52,102)	321,789	XXX

Schedule D - Part 5 - Long Term Bonds and Stocks Acquired and Fully Disposed Of

NONE

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

NONE

Schedule D - Part 6 - Section 2

NONE

Schedule DA - Part 1 - Short-Term Investments Owned

NONE

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

NONE

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

NONE

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

NONE

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

NONE

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

NONE

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

NONE

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

NONE

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

NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of
Current Year

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
NONE								
8899999	Total Cash Equivalents							

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

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR	B. POLICY HOLDER SECURITY	248,417	264,893		
5. California	CA	B. POLICY HOLDER SECURITY	524,126	542,645		
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE	B. POLICY HOLDER SECURITY	204,032	211,373		
9. District of Columbia	DC	B.	598,608	614,156		
10. Florida	FL	B. POLICY HOLDER SECURITY	264,855	272,280		
11. Georgia	GA	B. POLICY HOLDER SECURITY	106,335	111,909		
12. Hawaii	HI					
13. Idaho	ID	B. POLICY HOLDER SECURITY	321,871	338,236		
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA	B. POLICY HOLDER SECURITY	249,468	271,187		
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT	B. POLICY HOLDER SECURITY	253,139	249,542		
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH	B. POLICY HOLDER SECURITY	497,939	549,781		
31. New Jersey	NJ					
32. New Mexico	NM	B. POLICY HOLDER SECURITY	342,104	351,695		
33. New York	NY					
34. North Carolina	NC	B. POLICY HOLDER SECURITY	518,755	546,320		
35. North Dakota	ND					
36. Ohio	OH	B. POLICY HOLDER SECURITY	5,875,350	6,220,226		
37. Oklahoma	OK					
38. Oregon	OR	B. POLICY HOLDER SECURITY	549,964	588,545		
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC	B. POLICY HOLDER SECURITY	405,831	419,153		
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA	B. POLICY HOLDER SECURITY	262,942	284,934		
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Alien and Other	OT	XXX	XXX			
59. Subtotal	XXX	XXX	11,223,736	11,836,877		
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX				
5899. Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	XXX				

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