



QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2012  
OF THE CONDITION AND AFFAIRS OF THE

CINCINNATI INDEMNITY COMPANY

NAIC Group Code0244,00244NAIC Company Code23280Employer's ID Number31-1241230

Organized under the Laws ofOhio, State of Domicile or Port of EntryOhio

Country of DomicileUnited States

Incorporated/Organized05/19/1988Commenced Business01/01/1989

Statutory Home Office6200 SOUTH GILMORE ROAD,FAIRFIELD, OH 45014-5141

Main Administrative Office6200 SOUTH GILMORE ROADFAIRFIELD, OH 45014-5141513-870-2000

Mail AddressP.O. BOX 145496CINCINNATI, OH 45250-5496

Primary Location of Books and Records6200 SOUTH GILMORE ROADFAIRFIELD, OH 45014-5141513-870-2000-4414

Internet Web Site Addresswww.cinfin.com

Statutory Statement ContactSteve Draper513-870-2000

stephen\_draper@cinfin.com513-603-5500

OFFICERS

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

OTHER OFFICERS

TERESA CURRIN CRACAS	SENIOR VICE PRESIDENT	DONALD JOSEPH DOYLE JR	SENIOR VICE PRESIDENT
MARTIN FRANCIS HOLLENBECK	SENIOR VICE PRESIDENT	JOHN SCOTT KELLINGTON	SENIOR VICE PRESIDENT
LISA ANNE LOVE	SENIOR VICE PRESIDENT, CORPORATE SECRETARY	ERIC NEIL MATHEWS	SENIOR VICE PRESIDENT
MARTIN JOSEPH MULLEN	SENIOR VICE PRESIDENT	JACOB FERDINAND SCHERER	EXECUTIVE VICE PRESIDENT
JOHN JEFFERSON SCHIFF JR	CHAIRMAN OF THE EXECUTIVE COMMITTEE	JOAN O'CONNOR SHEVCHIK	SENIOR VICE PRESIDENT
STEPHEN MICHAEL SPRAY #	SENIOR VICE PRESIDENT	KENNETH WILLIAM STECHER	CHAIRMAN OF THE BOARD
CHARLES PHILIP STONEBURNER II	SENIOR VICE PRESIDENT	TIMOTHY LEE TIMMEL	SENIOR VICE PRESIDENT

DIRECTORS OR TRUSTEES

WILLIAM FORREST BAHL	GREGORY THOMAS BIER	TERESA CURRIN CRACAS #	DONALD JOSEPH DOYLE JR
MARTIN FRANCIS HOLLENBECK	STEVEN JUSTUS JOHNSTON	JOHN SCOTT KELLINGTON #	LISA ANNE LOVE #
WILLIAM RODNEY MCMULLEN	MARTIN JOSEPH MULLEN	JACOB FERDINAND SCHERER	JOHN JEFFERSON SCHIFF JR
THOMAS REID SCHIFF	MICHAEL JAMES SEWELL #	STEPHEN MICHAEL SPRAY #	KENNETH WILLIAM STECHER
JOHN FREDERICK STEELE JR	CHARLES PHILIP STONEBURNER II	TIMOTHY LEE TIMMEL	LARRY RUSSELL WEBB
EARNEST ANTHONY WOODS			

State ofOHIO

County ofBUTLER.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.

MICHAEL J. SEWELL  
CHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENT

ERIC N. MATHEWS  
SENIOR VICE PRESIDENT

THERESA A. HOFFER  
VICE PRESIDENT, TREASURER

Subscribed and sworn to before me this1STday ofNOVEMBER, 2012

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

STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

ASSETS

	Current Statement Date			4  December 31 Prior Year Net Admitted Assets
	1  Assets	2  Nonadmitted Assets	3  Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	57,588,849		57,588,849	57,601,365
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	16,379,622		16,379,622	15,430,076
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ .....2,642,297 ), cash equivalents (\$ .....0 ) and short-term investments (\$ .....0 ) .....	2,642,297		2,642,297	97,768
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....	0		0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	76,610,768	0	76,610,768	73,129,209
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	702,255		702,255	825,141
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....			0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	7,815,994		7,815,994	5,130,803
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....	1,828,010		1,828,010	2,300,363
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	100,071
18.2 Net deferred tax asset .....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	5,141,537		5,141,537	11,916,452
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	21,050	0	21,050	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	92,119,614	0	92,119,614	93,402,039
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	92,119,614	0	92,119,614	93,402,039
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. MISCELLANEOUS RECEIVABLES .....	21,050		21,050	0
2502. ....			0	0
2503. ....			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	21,050	0	21,050	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ ..... ) .....		0
2. Reinsurance payable on paid losses and loss adjustment expenses .....		0
3. Loss adjustment expenses .....		0
4. Commissions payable, contingent commissions and other similar charges .....		0
5. Other expenses (excluding taxes, licenses and fees) .....	3,349	3,872
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....		0
7.1 Current federal and foreign income taxes (including \$ ..... (52,603) on realized capital gains (losses)) .....	92,156	0
7.2 Net deferred tax liability .....	1,110,330	685,808
8. Borrowed money \$ ..... and interest thereon \$ .....		0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ .....121,862,922 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) .....		0
10. Advance premium .....		0
11. Dividends declared and unpaid:		
11.1 Stockholders .....		0
11.2 Policyholders .....		0
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	14,658,332	19,100,031
13. Funds held by company under reinsurance treaties .....		0
14. Amounts withheld or retained by company for account of others .....	859,728	592,832
15. Remittances and items not allocated .....		0
16. Provision for reinsurance .....		0
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		0
18. Drafts outstanding .....		0
19. Payable to parent, subsidiaries and affiliates .....		0
20. Derivatives .....		0
21. Payable for securities .....		0
22. Payable for securities lending .....		0
23. Liability for amounts held under uninsured plans .....		0
24. Capital notes \$ ..... and interest thereon \$ .....		0
25. Aggregate write-ins for liabilities .....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	16,723,895	20,382,543
27. Protected cell liabilities .....		0
28. Total liabilities (Lines 26 and 27) .....	16,723,895	20,382,543
29. Aggregate write-ins for special surplus funds .....	0	0
30. Common capital stock .....	3,600,000	3,600,000
31. Preferred capital stock .....		0
32. Aggregate write-ins for other than special surplus funds .....	0	0
33. Surplus notes .....		0
34. Gross paid in and contributed surplus .....	21,600,000	21,600,000
35. Unassigned funds (surplus) .....	50,195,719	47,819,496
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....		0
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....		0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) .....	75,395,719	73,019,496
38. Totals (Page 2, Line 28, Col. 3)	92,119,614	93,402,039
DETAILS OF WRITE-INS		
2501. Accounts Payable Other .....		0
2502. ....		0
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	0
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	0

STATEMENT OF INCOME

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 204,349,527 )	163,840,477	62,763,131	94,276,186
1.2 Assumed (written \$ )	9	0	1
1.3 Ceded (written \$ )	163,840,487	62,763,131	94,276,187
1.4 Net (written \$ 204,349,527 )	0	0	0
DEDUCTIONS:			
2. Losses incurred (current accident year \$ ):			
2.1 Direct	78,705,958	37,207,717	47,035,907
2.2 Assumed	6,619	12,059	(44)
2.3 Ceded	78,712,577	37,219,776	47,035,863
2.4 Net	0	0	0
3. Loss adjustment expenses incurred	0	0	0
4. Other underwriting expenses incurred	0	0	0
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	0	0	0
7. Net income of protected cells	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	0	0	0
INVESTMENT INCOME			
9. Net investment income earned	2,162,077	2,207,482	2,880,185
10. Net realized capital gains (losses) less capital gains tax of \$ (122,242)	(112,532)	205,579	(151,673)
11. Net investment gain (loss) (Lines 9 + 10)	2,049,545	2,413,061	2,728,511
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ )	0	0	0
13. Finance and service charges not included in premiums	0	0	0
14. Aggregate write-ins for miscellaneous income	0	0	0
15. Total other income (Lines 12 through 14)	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	2,049,545	2,413,061	2,728,511
17. Dividends to policyholders	0	0	0
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)	2,049,545	2,413,061	2,728,511
19. Federal and foreign income taxes incurred	336,398	363,071	651,616
20. Net income (Line 18 minus Line 19)(to Line 22)	1,713,147	2,049,990	2,076,896
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	73,019,496	70,109,253	70,109,254
22. Net income (from Line 20)	1,713,147	2,049,990	2,076,896
23. Net transfers (to) from Protected Cell accounts	0	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 380,659	706,938	(928,801)	645,290
25. Change in net unrealized foreign exchange capital gain (loss)	0	0	0
26. Change in net deferred income tax	(43,862)	(2,938)	188,057
27. Change in nonadmitted assets	0	0	0
28. Change in provision for reinsurance	0	0	0
29. Change in surplus notes	0	0	0
30. Surplus (contributed to) withdrawn from protected cells	0	0	0
31. Cumulative effect of changes in accounting principles	0	0	0
32. Capital changes:			
32.1 Paid in	0	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0	0
32.3 Transferred to surplus	0	0	0
33. Surplus adjustments:			
33.1 Paid in	0	0	0
33.2 Transferred to capital (Stock Dividend)	0	0	0
33.3 Transferred from capital	0	0	0
34. Net remittances from or (to) Home Office	0	0	0
35. Dividends to stockholders	0	0	0
36. Change in treasury stock	0	0	0
37. Aggregate write-ins for gains and losses in surplus	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	2,376,223	1,118,251	2,910,242
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	75,395,719	71,227,504	73,019,496
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	(4,441,699)	4,775,826	13,277,727
2. Net investment income .....	2,350,231	2,486,001	3,061,818
3. Miscellaneous income .....	0	0	0
4. Total (Lines 1 to 3) .....	(2,091,469)	7,261,827	16,339,545
5. Benefit and loss related payments .....	2,212,838	1,732,573	2,974,535
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	0	0	0
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... (89,075) tax on capital gains (losses).....	21,929	329,089	629,089
10. Total (Lines 5 through 9) .....	2,234,767	2,061,662	3,603,624
11. Net cash from operations (Line 4 minus Line 10) .....	(4,326,236)	5,200,165	12,735,921
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	5,283,058	3,131,804	5,631,804
12.2 Stocks .....	1,663,809	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	0
12.7 Miscellaneous proceeds .....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	6,946,868	3,131,804	5,631,804
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	5,382,789	1,939,205	5,915,580
13.2 Stocks .....	1,714,075	2,498,147	2,498,147
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	7,096,864	4,437,352	8,413,727
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(149,996)	(1,305,548)	(2,781,923)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied).....	7,020,760	(2,988,262)	(10,283,326)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	7,020,760	(2,988,262)	(10,283,326)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	2,544,528	.906,355	(329,328)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	97,769	427,097	427,097
19.2 End of period (Line 18 plus Line 19.1) .....	2,642,297	1,333,452	97,769

STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of the Cincinnati Indemnity 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, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual, version effective January 1, 2001 and updates through current year have been adopted as a component of prescribed or permitted practices by the state

of Ohio. B. No Change

C. No Change

2. Accounting Changes and Correction of Errors - No Change

3. Business Combinations and Goodwill - No Change

4. Discontinued Operations – None

5. Investments

A. Mortgage Loans - No Change

B. Debt Restructuring - No Change

C. Reverse Mortgages - No Change

D. Loan-Backed Securities - Not Applicable

E. Repurchase Agreements - No Change

F. Real Estate - No Change

G. Low-income Housing Tax Credit (LIHTC) - No Change

6. Joint Ventures, Partnerships and Limited Liability Companies - No Change

7. Investment Income - No Change

8. Derivative Instruments - No Change

9 - Income Taxes

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

	2012			2011		
	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ -	\$ 125,859	\$ 125,859	\$ -	\$ 169,637	\$ 169,637
(b) Statutory Valuation Allowance	-	-	-	-	-	-
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	-	125,859	125,859	-	169,637	169,637
(d) Deferred Tax Assets Nonadmitted	-	-	-	-	-	-
(e) Subtotal Net Admitted Deferred Tax Asset (1c- 1d)	-	125,859	125,859	-	169,637	169,637
(f) Deferred Tax Liabilities	\$ 6,363	\$ 1,229,826	\$ 1,236,189	\$ 6,279	\$ 849,167	\$ 855,446
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (6,363)	\$ (1,103,967)	\$ (1,110,330)	\$ (6,279)	\$ (679,530)	\$ (685,809)

	Change		
	Ordinary	Capital	Total
(a) Gross Deferred Tax Assets	\$ -	\$ (43,778)	\$ (43,778)
(b) Statutory Valuation Allowance	-	-	-
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	-	(43,778)	(43,778)
(d) Deferred Tax Assets Nonadmitted	-	-	-
(e) Subtotal Net Admitted Deferred Tax Asset (1c- 1d)	-	(43,778)	(43,778)
(f) Deferred Tax Liabilities	\$ 84	\$ 380,659	\$ 380,743
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (84)	\$ (424,437)	\$ (424,521)

2.

	2012			2011		
	Ordinary	Capital	Total	Ordinary	Capital	Total
<b>SSAP 101, paragraphs 11.a., 11.b., and 11.c.:</b>						
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	-	-	-	-	-	-
(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)	-	-	-	-	-	-
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	-	-	-	-	-	-
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	11,475,907	11,475,907	11,475,907	11,055,796	11,055,796	11,055,796
(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	-	125,859	125,859	-	169,637	169,637
(d) Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	-	125,859	125,859	-	169,637	169,637

	Change		
	Ordinary	Capital	Total
<b>SSAP 101, paragraphs 11.a., 11.b., and 11.c.:</b>			
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	-	-	-
(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)	-	-	-
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	-	-	-
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	420,111	420,111	420,111
(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	-	(43,778)	(43,778)
(d) Deferred Tax Assets Admitted as the Result of Application of SSAP No.101 Total (2(a)+2(b)+2(c))	-	(43,778)	(43,778)

3.

	2012	2011
	Percentage	Percentage
(a) Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	3380%	3380%
(b) Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b) 2 above	15%	15%

(c) The Company's tax-planning strategies did not include the use of reinsurance-related tax planning strategies.

STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO THE FINANCIAL STATEMENTS

4.

	2012			2011		
	Ordinary	Capital	Total	Ordinary	Capital	Total
Impact of Tax Planning Strategies						
(a) Adjusted Gross DTAs (% of Total Adjusted Gross DTAs)	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
(b) Net Admitted Adjusted Gross DTAs (% of Total Net Admitted Adjusted Gross DTAs)	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

The Company's tax-planning strategies did not include the use of reinsurance-related tax planning strategies.

	Change		
	Ordinary	Capital	Total
Impact of Tax Planning Strategies			
(a) Adjusted Gross DTAs (% of Total Adjusted Gross DTAs)	0.00%	0.00%	0.00%
(b) Net Admitted Adjusted Gross DTAs (% of Total Net Admitted Adjusted Gross DTAs)	0.00%	0.00%	0.00%

B. Unrecognized  
DTLs

Not applicable

C. Current Tax and Change in Deferred Tax

1. Current income tax:

	2012	2011	Change
(a) Federal	\$ 336,398	\$ 651,614	\$ (315,216)
(b) Foreign	-	-	-
(c) Subtotal	336,398	651,614	(315,216)
(d) Federal Income Tax on capital gains/(losses)	(122,242)	(81,670)	(40,572)
(e) Utilization of capital loss carryforwards	-	-	-
(f) Other	-	-	-
Federal income taxes incurred	\$ 214,156	\$ 569,944	\$ (355,788)

2. Deferred tax assets

	September 30, 2012	December 31, 2011	Change
(a) Ordinary			
(1) Unearned premium reserve	\$ -	\$ -	\$ -
(2) Unpaid loss reserve	-	-	-
(3) Contingent commission	-	-	-
(4) Nonadmitted assets	-	-	-
(5) Other deferred tax assets	-	-	-
(99) Subtotal	-	-	-
(b) Statutory valuation allowance adj	-	-	-
(c) Nonadmitted	-	-	-
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	\$ -	\$ -	\$ -
(e) Capital			
(1) Investments	\$ 125,859	\$ 169,637	\$ (43,778)
(2) Unrealized (gain)/loss on investments	-	-	-
(99) Subtotal	125,859	169,637	(43,778)
(f) Statutory valuation allowance adj	-	-	-
(g) Nonadmitted	-	-	-
(h) Admitted capital deferred tax assets (2e99-2f-2g)	\$ 125,859	\$ 169,637	\$ (43,778)
(i) Admitted deferred tax assets (2d + 2h)	\$ 125,859	\$ 169,637	\$ (43,778)

3. Deferred tax liabilities

	September 30, 2012	December 31, 2011	Change
(a) Ordinary			
(1) Commission expense	\$ -	\$ -	\$ -
(2) Other, net	6,363	6,279	84
(99) Subtotal	6,363	6,279	84
(b) Capital			
(1) Unrealized (gain)/loss on investments	\$ 1,229,826	\$ 849,167	\$ 380,659
(99) Subtotal	1,229,826	849,167	380,659
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 1,236,189	\$ 855,446	\$ 380,743

4. Net deferred tax assets/liabilities (2i-3c)

\$ (1,110,330)	\$ (685,809)	\$ (424,521)
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The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):				
	September 30, 2012	December 31, 2011		Change
Total deferred tax assets	\$ 125,859	\$ 169,637	\$	(43,778)
Total deferred tax liabilities	1,236,189	855,446		380,743
Net deferred tax asset/(liability)	\$ (1,110,330)	\$ (685,809)	\$	(424,521)
Tax effect of unrealized (gains)/losses				380,659
Change in net deferred income tax (charge)/benefit			\$	(43,862)
	December 31, 2011	December 31, 2010		Change
Total deferred tax assets	\$ 169,637	\$ -	\$	169,637
Total deferred tax liabilities	855,446	526,402		329,044
Net deferred tax asset/(liability)	\$ (685,809)	\$ (526,402)	\$	(159,407)
Tax effect of unrealized (gains)/losses				347,464
Change in net deferred income tax (charge)/benefit			\$	188,057

STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO THE 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:			
As of September 30, 2012			
Description	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 1,927,303	\$ 674,556	35.00%
Net tax exempt interest	(962,876)	(337,007)	-17.49%
Net dividends received deduction	(227,070)	(79,474)	-4.12%
Other items permanent, net	191	67	0.00%
DRD on accrued	(355)	(123)	-0.01%
Total	\$ 737,194	\$ 258,018	13.39%
Federal income taxes incurred expense/(benefit)	\$ 961,137	\$ 336,398	17.45%
Tax on capital gains/(losses)	(349,263)	(122,242)	-6.34%
Change in net deferred income tax charge/(benefit)	125,320	43,862	2.28%
Total statutory income taxes incurred	\$ 737,194	\$ 258,018	13.39%
As of December 31, 2011			
Description	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 2,646,841	\$ 926,394	35.00%
Net tax exempt interest	(1,300,601)	(455,211)	-17.20%
Net dividends received deduction	(253,786)	(88,825)	-3.36%
Other items permanent, net	43	15	0.00%
DRD on accrued	(1,392)	(487)	-0.01%
Total	\$ 1,091,105	\$ 381,886	14.43%
Federal income taxes incurred expense/(benefit)	\$ 1,861,755	\$ 651,614	24.62%
Tax on capital gains/(losses)	(233,343)	(81,670)	-3.09%
Change in net deferred income tax charge/(benefit)	(537,307)	(188,058)	-7.10%
Total statutory income taxes incurred	\$ 1,091,105	\$ 381,886	14.43%

E. Operating Loss and Tax Credit Carryforwards

(1) At September 30, 2012, the Company had net operating loss carryforwards of: \$ - (2)  
At September 30, 2012, the Company had capital loss carryforwards of: \$ -

(3) 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	
2012	\$ 214,156	\$ -	\$ 214,156	
2011	459,233	110,696	569,929	
2010	-	16,295	16,295	
Total	\$ 673,389	\$ 126,992	\$ 800,380	

(4) Deposits admitted under Internal Revenue Code Section 6603: \$ -

F. Consolidated Federal Income Tax Return

(1) The Company's federal income tax return is consolidated with the following entities:

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

(2) The method of allocation between the Company is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with a current credit for net losses.

G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company has no tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

10. Information Concerning Parent, Subsidiaries and Affiliates

- A. No Change
  - B. No Change
  - C. No Change
  - D. At September 30, 2012, the Company reported \$5,141,537 due from the Parent Company, The Cincinnati Insurance Company. The terms of the settlement require that these amounts be settled within 30 days.
  - E. No Change
  - F. No Change
  - G. No Change
  - H. No Change
  - I. No Change
  - J. No Change
  - K. No Change
  - L. No Change
11. Debt - No Change
12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - No Change
13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations - No Change
14. Contingencies - No Change
15. Leases - No Change
16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk – No Change
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
- A. No Change
  - B. No Change
  - C. Not applicable
18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans – No Change



STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY  
**NOTES TO THE FINANCIAL STATEMENTS**

- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - No Change
- 20. Fair Value Measurement
  - A. Not applicable
  - B. Not applicable
  - C. Not applicable
  - D. Not applicable
- 21. Other Items - No Change
- 22. Subsequent Events – No Change
- 23. Reinsurance - No Change
- 24. Retrospectively Rated Contracts and Contracts Subject to Redetermination– No Change
- 25. Change in Incurred Losses - None
- 26. Intercompany Pooling Arrangements – No Change
- 27. Structured Settlements - No Change
- 28. Health Care Receivables – No Change
- 29. Participating Policies – No Change
- 30. Premium Deficiency Reserves - No Change
- 31. High Deductibles – No Change
- 32. The Company does not discount unpaid losses or loss adjustment expenses except for income tax purposes.
- 33. Asbestos and Environmental Reserves - No Change
- 34. Subscriber Savings Accounts – No Change
- 35. Multiple Peril Crop Insurance – No Change
- 36. Financial Guaranty Insurance – None
- 37. Other - No Change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 2.1

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

Yes ☐ No ☒
- 2.2

If yes, date of change:
3.

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 4.2

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

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

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ☐ No ☒ NA ☐
- If yes, attach an explanation.
- 6.1

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

12/31/2009
- 6.2

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

08/03/2010
- 6.3

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

08/03/2010
- 6.4

By what department or departments?

OHIO
- 6.5

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

Yes ☐ No ☐ NA ☒
- 6.6

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

Yes ☒ No ☐ NA ☐
- 7.1

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

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

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

Yes ☐ No ☒
- 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 ☒
- 8.4

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

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

GENERAL INTERROGATORIES

9.1

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

Yes ☒ No ☐

9.11

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

9.2

Has the code of ethics for senior managers been amended? .....

Yes ☐ No ☒

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).  
.....

9.3

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

Yes ☐ No ☒

9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).  
.....

FINANCIAL

10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?.....

Yes ☒ No ☐

10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:.....\$ .....5,141,537

INVESTMENT

11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) .....

Yes ☐ No ☒

11.2

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

12.

Amount of real estate and mortgages held in other invested assets in Schedule BA: .....\$ .....

13.

Amount of real estate and mortgages held in short-term investments: .....\$ .....

14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates? .....

Yes ☐ No ☒

14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....	\$ .....
14.22 Preferred Stock .....	\$ .....	\$ .....
14.23 Common Stock .....	\$ .....	\$ .....
14.24 Short-Term Investments .....	\$ .....	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ .....	\$ .....
14.26 All Other .....	\$ .....	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$ .....0	\$ .....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....	\$ .....

15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB? .....

Yes ☐ No ☒

15.2

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

Yes ☐ No ☐

If no, attach a description with this statement.

GENERAL INTERROGATORIES

16. 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 [ ]

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

1	2
Name of Custodian(s)	Custodian Address

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

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

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? .....

Yes [ ] No [X]

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

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

16.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1	2	3
Central Registration Depository	Name(s)	Address

17.1 Have all the filing requirements of the *Purposes and Procedures Manual* of the NAIC Securities Valuation Office been followed? .....

Yes [X] No [ ]

17.2 If no, list exceptions:

.....

GENERAL INTERROGATORIES  
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

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

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

3.2 If yes, give full and complete information thereto.  
.....

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

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL			0	0	0	0	0	0	0	0

5. Operating Percentages:  
5.1 A&H loss percent ..... %  
5.2 A&H cost containment percent ..... %  
5.3 A&H expense percent excluding cost containment expenses ..... %

6.1 Do you act as a custodian for health savings accounts?..... Yes [ ] No [X]  
6.2 If yes, please provide the amount of custodial funds held as of the reporting date..... \$  
6.3 Do you act as an administrator for health savings accounts?..... Yes [ ] No [X]  
6.4 If yes, please provide the balance of the funds administered as of the reporting date..... \$



STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories							
States, etc.	1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2	3	4	5	6	7
	Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1. Alabama	AL L	2,452,042	460,287	168,703	42,940	1,290,449	1,252,286
2. Alaska	AK L		0		0		0
3. Arizona	AZ L	3,066,226	1,282,663	734,560	214,363	623,208	491,671
4. Arkansas	AR L	2,529,131	1,216,468	636,350	343,354	3,638,430	2,938,769
5. California	CA N		0		0		0
6. Colorado	CO L	3,999,040	2,298,575	666,453	855,828	3,525,641	794,767
7. Connecticut	CT L	77,188	22,258		0	13,997	1,777
8. Delaware	DE L	586,049	278,601	122,490	69,861	733,207	505,539
9. District of Columbia	DC L	31,677	11,356		0	5,777	1,133
10. Florida	FL L	2,981,915	207,075	330,535	177,354	1,300,544	961,884
11. Georgia	GA L	6,994,049	3,041,088	1,628,702	1,112,714	6,471,709	6,387,229
12. Hawaii	HI L		0		0		0
13. Idaho	ID L	1,728,656	108,398	115,606	0	170,237	55
14. Illinois	IL L	16,776,885	5,802,108	3,721,162	4,267,553	17,088,450	16,592,433
15. Indiana	IN L	13,145,831	5,584,541	3,930,861	2,352,188	10,884,084	8,782,125
16. Iowa	IA L	10,685,544	4,239,643	2,653,838	3,091,925	15,659,300	15,170,986
17. Kansas	KS L	4,159,139	2,833,753	2,323,487	906,443	6,446,639	5,465,338
18. Kentucky	KY L	5,232,833	1,738,266	3,688,710	434,051	4,303,292	3,808,630
19. Louisiana	LA L	9,606	0		0	589	0
20. Maine	ME L		0		0		0
21. Maryland	MD L	4,863,169	2,120,661	1,131,532	994,862	6,215,507	5,551,967
22. Massachusetts	MA N		0		0		0
23. Michigan	MI L	9,752,608	3,462,403	2,601,575	650,815	9,593,641	7,787,015
24. Minnesota	MN L	6,438,636	1,756,050	1,376,948	288,566	2,391,106	931,398
25. Mississippi	MS L	42,546	66,338		0	10,766	3,859
26. Missouri	MO L	6,809,131	3,836,964	2,347,599	1,656,305	10,147,351	8,643,870
27. Montana	MT L	1,532,520	45,408	39,706	0	77,578	658
28. Nebraska	NE L	3,745,459	1,704,218	1,150,250	1,207,473	7,745,204	7,135,537
29. Nevada	NV L	14,108	257		0	874	0
30. New Hampshire	NH N	1,120,629	370,451	253,690	117,941	366,987	295,252
31. New Jersey	NJ N		0		0		0
32. New Mexico	NM L	981,495	157,978	144,679	143,957	427,591	369,921
33. New York	NY L	4,205,878	602,280	488,130	249,405	2,665,811	744,484
34. North Carolina	NC L	9,345,301	4,144,920	3,539,577	2,449,918	13,420,823	11,539,880
35. North Dakota	ND L	1,466,720	101,527	73,123	0	154,862	0
36. Ohio	OH L	12,046,543	1,156,941	2,887,453	3,739	1,643,418	23,372
37. Oklahoma	OK L	91,536	37,218	13,490	0	19,082	4,171
38. Oregon	OR L	687,447	279,953	49,408	0	130,169	325
39. Pennsylvania	PA L	20,717,758	9,810,452	4,712,065	3,625,990	20,724,764	19,561,946
40. Rhode Island	RI L	2,424	2,824		0	929	666
41. South Carolina	SC L	2,500,163	755,944	524,568	171,175	2,142,922	2,223,215
42. South Dakota	SD L	1,759,399	776,796	436,065	194,514	2,224,335	1,684,178
43. Tennessee	TN L	8,746,524	4,274,211	2,327,945	1,218,581	8,281,774	7,651,398
44. Texas	TX L	9,176,620	5,238,577	3,177,000	1,069,459	1,755,762	734,282
45. Utah	UT L	2,331,875	270,004	359,238	1,297	313,007	875
46. Vermont	VT L	2,807,943	1,717,464	612,969	267,464	1,457,122	833,153
47. Virginia	VA L	9,837,767	4,696,077	2,837,124	1,990,502	9,603,124	11,062,567
48. Washington	WA L	444,626	44,812	43,099	0	91,676	0
49. West Virginia	WV L	2,260,761	570,813	517,432	20,819	565,018	464,918
50. Wisconsin	WI L	5,987,790	3,588,929	1,678,067	1,097,098	5,477,317	5,859,547
51. Wyoming	WY L	176,340	19,466	53,947	0	90,000	0
52. American Samoa	AS N		0		0		0
53. Guam	GU N		0		0		0
54. Puerto Rico	PR N		0		0		0
55. U.S. Virgin Islands	VI N		0		0		0
56. Northern Mariana Islands	MP N		0		0		0
57. Canada	CN N		0		0		0
58. Aggregate Other Alien	OT XXX	0	0	0	0	0	0
59. Totals	(a) 47	204,349,527	80,735,016	54,098,135	31,288,454	179,894,073	156,263,076
DETAILS OF WRITE-INS							
5801.	XXX						
5802.	XXX						
5803.	XXX						
5898. Summary of remaining write-ins for Line 58 from overflow page.	XXX	0	0	0	0	0	0
5899. TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above)	XXX	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

Schedule Y - Part 1

NONE

Schedule Y - Part 1A

NONE



PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4 Prior Year to Date Direct Loss Percentage
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1.	Fire	4,129,742	1,464,206	35.5	(0.6)
2.	Allied lines	4,183,586	6,560,076	156.8	36.4
3.	Farmowners multiple peril			0.0	0.0
4.	Homeowners multiple peril	178		0.0	0.0
5.	Commercial multiple peril	33,897,023	16,683,867	49.2	62.7
6.	Mortgage guaranty			0.0	0.0
8.	Ocean marine	2,324,943	1,146,514	49.3	0.0
9.	Inland marine			0.0	(35.2)
10.	Financial guaranty			0.0	0.0
11.1	Medical professional liability -occurrence	205,897		0.0	0.0
11.2	Medical professional liability -claims made	40		0.0	0.0
12.	Earthquake	89,648		0.0	0.0
13.	Group accident and health			0.0	0.0
14.	Credit accident and health			0.0	0.0
15.	Other accident and health			0.0	0.0
16.	Workers' compensation	68,513,272	34,013,950	49.6	62.1
17.1	Other liability occurrence	20,378,705	1,808,351	8.9	2.5
17.2	Other liability-claims made	233,541		0.0	0.0
17.3	Excess Workers' Compensation			0.0	0.0
18.1	Products liability-occurrence	1,574,274	368,712	23.4	0.0
18.2	Products liability-claims made			0.0	0.0
19.1,19.2	Private passenger auto liability	19,753	2,152	10.9	0.0
19.3,19.4	Commercial auto liability	19,700,096	9,745,796	49.5	26.0
21.	Auto physical damage	8,016,342	6,666,435	83.2	138.4
22.	Aircraft (all perils)			0.0	0.0
23.	Fidelity	301		0.0	0.0
24.	Surety			0.0	0.0
26.	Burglary and theft	247,931	226,066	91.2	0.0
27.	Boiler and machinery	325,204	19,833	6.1	0.0
28.	Credit			0.0	0.0
29.	International			0.0	0.0
30.	Warranty			0.0	0.0
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.0
35.	TOTALS	163,840,477	78,705,958	48.0	59.3
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	1,682,661	5,646,218	933,293
2.	Allied lines	1,745,389	5,980,326	1,054,420
3.	Farmowners multiple peril	0		0
4.	Homeowners multiple peril	63	214	45
5.	Commercial multiple peril	9,953,698	44,679,838	6,991,275
6.	Mortgage guaranty	0		0
8.	Ocean marine	0		0
9.	Inland marine	751,273	3,080,374	407,710
10.	Financial guaranty	0		0
11.1	Medical professional liability-occurrence	37,483	276,652	5,566
11.2	Medical professional liability-claims made	192	192	0
12.	Earthquake	25,969	89,350	17,820
13.	Group accident and health	0		0
14.	Credit accident and health	0		0
15.	Other accident and health	0		0
16.	Workers' compensation	21,644,405	74,829,296	61,031,156
17.1	Other liability occurrence	6,138,832	27,610,876	4,065,061
17.2	Other liability-claims made	70,181	355,897	10,079
17.3	Excess Workers' Compensation	0		0
18.1	Products liability-occurrence	545,518	2,118,248	343,522
18.2	Products liability-claims made	0		0
19.1,19.2	Private passenger auto liability	3,024	25,678	0
19.3,19.4	Commercial auto liability	6,135,067	27,717,442	4,202,360
21.	Auto physical damage	2,349,340	11,178,124	1,551,900
22.	Aircraft (all perils)	0		0
23.	Fidelity	0	(37)	641
24.	Surety	0		0
26.	Burglary and theft	83,564	322,237	44,295
27.	Boiler and machinery	132,914	438,602	75,873
28.	Credit	0		0
29.	International	0		0
30.	Warranty	0		0
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0
35.	TOTALS	51,299,573	204,349,527	80,735,016
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2012 Loss and LAE Payments on Claims Reported as of Prior Year-End	2012 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2012 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2009 + Prior .....			.....0			.....0				.....0	.....0	.....0	.....0
2. 2010 .....			.....0			.....0				.....0	.....0	.....0	.....0
3. Subtotals 2010 + prior .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2011.....			.....0			.....0				.....0	.....0	.....0	.....0
5. Subtotals 2011 + prior .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2012 .....	.....XXX	.....XXX	.....XXX	.....XXX		.....0	.....XXX			.....0	.....XXX	.....XXX	.....XXX
7. Totals .....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Prior Year-End Surplus As Regards Policy-holders	73,019										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. 0.0	2. 0.0	3. 0.0
											Col. 13, Line 7 Line 8		
											4. 0.0		

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	.....NO.....
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	.....NO.....
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	.....NO.....
4. Will the Director and Officer Supplement be filed with the state of domicile and the NAIC with this statement?	.....YES.....

Explanation:

- 1.
- 2.
- 3.

Bar Code:

1.



232802012490000003

2.



232802012455000003

3.



232802012365000003

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**OVERFLOW PAGE FOR WRITE-INS**

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SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Current year change in encumbrances .....		0
4. Total gain (loss) on disposals .....		0
5. Deduct amounts received on disposals .....		0
6. Total foreign exchange change in book/adjusted carrying value .....		0
7. Deduct current year's other than temporary impairment recognized .....		0
8. Deduct current year's depreciation .....		0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....	0	0
10. Deduct total nonadmitted amounts .....	0	0
11. Statement value at end of current period (Line 9 minus Line 10) .....	0	0

SCHEDULE B – VERIFICATION

Mortgage Loans

	1	2
	Year To Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year .....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		0
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		0
8. Deduct amortization of premium and mortgage interest points and commitment fees .....		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	0	0
12. Total valuation allowance .....		0
13. Subtotal (Line 11 plus Line 12) .....	0	0
14. Deduct total nonadmitted amounts .....	0	0
15. Statement value at end of current period (Line 13 minus Line 14) .....	0	0

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		0
2.2 Additional investment made after acquisition .....		0
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		0
6. Total gain (loss) on disposals .....		0
7. Deduct amounts received on disposals .....		0
8. Deduct amortization of premium and depreciation .....		0
9. Total foreign exchange change in book/adjusted carrying value .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	0	0
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12) .....	0	0

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	73,031,442	69,629,530
2. Cost of bonds and stocks acquired .....	7,096,864	8,413,728
3. Accrual of discount .....	10,593	12,269
4. Unrealized valuation increase (decrease) .....	1,087,597	992,754
5. Total gain (loss) on disposals .....	200,355	316,275
6. Deduct consideration for bonds and stocks disposed of .....	6,946,868	5,631,804
7. Deduct amortization of premium .....	76,383	151,692
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....	435,130	549,618
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	73,968,470	73,031,442
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11) .....	73,968,470	73,031,442

STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

SCHEDULE D - PART 1B

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

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. Class 1 (a).....	48,343,978	998,430	2,515,000	(6,878)	47,199,678	48,343,978	46,820,529	46,982,927
2. Class 2 (a).....	8,246,076	2,038,960	1,000,000	(13,891)	8,655,062	8,246,076	9,271,145	8,731,749
3. Class 3 (a).....	0				772,113	0	0	756,904
4. Class 4 (a).....	1,734,482		60,874	(962,369)	952,447	1,734,482	711,238	1,129,785
5. Class 5 (a).....	0		143,528	929,463	0	0	785,935	0
6. Class 6 (a).....	0				0	0	0	0
7. Total Bonds	58,324,535	3,037,390	3,719,402	(53,675)	57,579,300	58,324,535	57,588,849	57,601,365
<b>PREFERRED STOCK</b>								
8. Class 1 .....	0				0	0	0	0
9. Class 2 .....	0				0	0	0	0
10. Class 3 .....	0				0	0	0	0
11. Class 4 .....	0				0	0	0	0
12. Class 5 .....	0				0	0	0	0
13. Class 6 .....	0				0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	58,324,535	3,037,390	3,719,402	(53,675)	57,579,300	58,324,535	57,588,849	57,601,365

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ ..... ; NAIC 2 \$ ..... ;  
NAIC 3 \$ ..... ; NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE



**STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY**

## SCHEDULE D - PART 3

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

[illegible]

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

E04

STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	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 B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
936388-CW-5	IN WARSAW SCHOOL BLDG CORP		07/15/2012	MATURITY		1,015,000	1,015,000	1,015,000	1,015,000				0		1,015,000			0	41,615	07/15/2012	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						1,015,000	1,015,000	1,015,000	1,015,000	0	0	0	0	0	1,015,000	0	0	0	41,615	XXX	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
023654-AW-6	AMERICA WEST AIRLINES		07/02/2012	SINKING FUND REDEMPTION		60,874	60,874	60,874	59,598	1,277			1,277		60,874			0	4,821	01/02/2019	4FE
03073E-AD-7	AMERISOURCEBERGEN CORP		09/15/2012	MATURITY		1,500,000	1,500,000	1,587,375	1,521,058		(21,058)		(21,058)		1,500,000			0	84,375	09/15/2012	1FE
14170T-AD-3	CAREFUSION CORP		08/01/2012	MATURITY		1,000,000	1,000,000	1,027,920	1,005,805		(5,805)		(5,805)		1,000,000			0	41,250	08/01/2012	2FE
59832W-AF-6	MIDWEST GENERATION LLC																				
59832W-AF-6	PASS THRU CERTS		07/02/2012	SINKING FUND REDEMPTION		143,528	143,528	143,528	143,528				0		143,528			0	12,286	01/02/2016	5FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						2,704,402	2,704,402	2,819,697	2,729,989	1,277	(26,863)	0	(25,586)	0	2,704,402	0	0	0	142,732	XXX	XXX
8399997 - Subtotals - Bonds - Part 4						3,719,402	3,719,402	3,834,697	3,744,989	1,277	(26,863)	0	(25,586)	0	3,719,402	0	0	0	184,347	XXX	XXX
8399999 - Subtotals - Bonds						3,719,402	3,719,402	3,834,697	3,744,989	1,277	(26,863)	0	(25,586)	0	3,719,402	0	0	0	184,347	XXX	XXX

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

**STATEMENT AS OF SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY**

## SCHEDULE E - PART 1 - CASH

[illegible]

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter							
1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
NONE							
8699999 Total Cash Equivalents					0	0	0



SUPPLEMENT FOR THE QUARTER ENDING SEPTEMBER 30, 2012 OF THE CINCINNATI INDEMNITY COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

NAIC Group Code0244

Year To Date For The Period Ended 2012

NAIC Company Code23280

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

1. Monoline Policies

1 Direct Written Premium	2 Direct Earned Premium	3 Direct Losses Incurred
\$28,096	\$19,070	\$5,000

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy?

Yes ☒ No ☐
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated?

Yes ☒ No ☐
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified:

\$28,084

2.32 Amount estimated using reasonable assumptions:

\$
- 2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case reserves) for the D&O liability coverage provided in CMP packaged policies.

\$125