



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

THE CINCINNATI INDEMNITY COMPANY

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

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
(Street and Number)
FAIRFIELD, OH, US 45014-5141, 513-870-2000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

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

Primary Location of Books and Records 6200 SOUTH GILMORE ROAD
(Street and Number)
FAIRFIELD, OH, US 45014-5141 513-870-2000

(City or Town, State, County and Zip Code) (Area Code) (Telephone Number)

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

(E-mail Address) (FAX Number)

OFFICERS

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

TERESA CURRIN CRACAS, SENIOR VICE PRESIDENT	OTHER	DONALD JOSEPH DOYLE JR, SENIOR VICE PRESIDENT
SEAN MICHAEL GIVLER, SENIOR VICE PRESIDENT	ANGELA OSSELLO DELANEY, SENIOR VICE PRESIDENT	MARTIN FRANCIS HOLLENBECK, SENIOR VICE PRESIDENT
JOHN SCOTT KELLINGTON, SENIOR VICE PRESIDENT	CHRISTOPHER THOMAS HOGAN, SENIOR VICE PRESIDENT	MARC JON SCHAMBOW #, SENIOR VICE PRESIDENT
STEPHEN MICHAEL SPRAY, SENIOR VICE PRESIDENT	LISA ANNE LOVE, SENIOR VICE PRESIDENT, CORPORATE SECRETARY	STEPHEN ANTHONY VENTRE, SENIOR VICE PRESIDENT
	WILLIAM HAROLD VAN DEN HEUVEL, SENIOR VICE PRESIDENT	

DIRECTORS OR TRUSTEES

THOMAS JEFFREY AARON	WILLIAM FOREST BAHL	NANCY CUNNINGHAM BENACCI
TERESA CURRIN CRACAS	ANGELA OSSELLO DELANEY	DONALD JOSEPH DOYLE JR
SEAN MICHAEL GIVLER	MARTIN FRANCIS HOLLENBECK	STEVEN JUSTUS JOHNSTON
JOHN SCOTT KELLINGTON	LISA ANNE LOVE	JILL PRATT MEYER
DAVID PAUL OSBORN	CHARLES ODELL SCHIFF	MICHAEL JAMES SEWELL
STEPHEN MICHAEL SPRAY	JOHN FREDRICK STEELE JR	WILLIAM HAROLD VAN DEN HEUVEL
LARRY RUSSEL WEBB		

State of OHIO SS
County of BUTLER

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.

STEPHEN M. SPRAY
PRESIDENT

MICHAEL J. SEWELL
CHIEF FINANCIAL OFFICER, EXECUTIVE VICE
PRESIDENT

THERESA A. HOFFER
SENIOR VICE PRESIDENT, TREASURER

Subscribed and sworn to before me this
18TH day of FEBRUARY 2022

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

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	83,344,601		83,344,601	79,383,834
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	43,881,253		43,881,253	35,501,123
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 (\$ 3,928,347 , Schedule E - Part 1), cash equivalents (\$, Schedule E - Part 2) and short-term investments (\$, Schedule DA)	3,928,347		3,928,347	4,369,821
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	131,154,201		131,154,201	119,254,779
12. Subtotals, cash and invested assets (Lines 1 to 11)				
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	1,038,399		1,038,399	986,963
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection				124
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	20,415,714		20,415,714	18,309,328
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts	4,485,533		4,485,533	4,326,347
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon	79,778		79,778	
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	8,422,561		8,422,561	7,382,997
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)	165,596,186		165,596,186	150,260,538
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	165,596,186		165,596,186	150,260,538
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 2021 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)	2,232	
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)	4,663	5,307
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))		7,009
7.2 Net deferred tax liability	5,466,720	3,886,981
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 212,192,363 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)	32,794,145	29,679,087
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	1,391,490	1,365,618
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	280,604	50
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	39,939,855	34,944,052
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	39,939,855	34,944,052
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)	100,456,332	90,116,486
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)	125,656,332	115,316,486
38. TOTALS (Page 2, Line 28, Col. 3)	165,596,186	150,260,538
DETAILS OF WRITE-INS		
2501. Accounts Payable Other	280,604	50
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)	280,604	50
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)		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
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).....	4,246,302	3,680,175
10. Net realized capital gains or (losses) less capital gains tax of \$ 223,019 (Exhibit of Capital Gains (Losses)).....	1,114,909	(540,335)
11. Net investment gain (loss) (Lines 9 + 10).....	5,361,211	3,139,840
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.....		646
14. Aggregate write-ins for miscellaneous income.....		
15. Total other income (Lines 12 through 14).....		646
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	5,361,211	3,140,486
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).....	5,361,211	3,140,486
19. Federal and foreign income taxes incurred.....	595,874	490,260
20. Net income (Line 18 minus Line 19)(to Line 22).....	4,765,337	2,650,226
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	115,316,486	111,088,787
22. Net income (from Line 20).....	4,765,337	2,650,226
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 1,502,392.....	5,651,855	1,469,369
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(77,347)	108,104
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).....	10,339,845	4,227,699
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	125,656,332	115,316,486
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.....		646
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).....		646
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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	3,115,058	(801,188)
2. Net investment income	4,364,293	3,908,324
3. Miscellaneous income		646
4. Total (Lines 1 through 3)	7,479,351	3,107,782
5. Benefit and loss related payments	2,263,216	3,497,895
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 \$ 212,667 tax on capital gains (losses)	905,680	482,087
10. Total (Lines 5 through 9)	3,168,897	3,979,981
11. Net cash from operations (Line 4 minus Line 10)	4,310,454	(872,200)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	9,595,000	4,110,000
12.2 Stocks	2,065,251	492,925
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	11,660,251	4,602,925
13. Cost of investments acquired (long-term only):		
13.1 Bonds	13,589,209	4,944,553
13.2 Stocks	2,089,833	984,284
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	15,679,042	5,928,836
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)	(4,018,791)	(1,325,912)
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)	(733,138)	4,274,427
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(733,138)	4,274,427
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)	(441,474)	2,076,316
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	4,369,821	2,293,506
19.2 End of period (Line 18 plus Line 19.1)	3,928,347	4,369,821

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

Underwriting and Investment Exhibit - Part 1 - Premiums Earned

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	Direct Business (a)	1	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	15,612,527			15,612,527			
2. Allied lines	20,308,631			20,308,631			
3. Farmowners multiple peril							
4. Homeowners multiple peril							
5. Commercial multiple peril	95,574,247			95,574,247			
6. Mortgage guaranty							
8. Ocean marine							
9. Inland marine	8,843,109			8,843,109			
10. Financial guaranty							
11.1 Medical professional liability - occurrence	1,964,535			1,964,535			
11.2 Medical professional liability - claims-made	2,171,040			2,171,040			
12. Earthquake	207,147			207,147			
13. Group accident and health							
14. Credit accident and health (group and individual)							
15. Other accident and health							
16. Workers' compensation	116,377,879		2	116,377,881			
17.1 Other liability - occurrence	69,522,208			69,522,208			
17.2 Other liability - claims-made	1,672,059			1,672,059			
17.3 Excess workers' compensation							
18.1 Products liability - occurrence	6,907,604			6,907,604			
18.2 Products liability - claims-made							
19.1, 19.2 Private passenger auto liability	21,570			21,570			
19.3, 19.4 Commercial auto liability	80,870,958			80,870,958			
21. Auto physical damage	33,176,341			33,176,341			
22. Aircraft (all perils)							
23. Fidelity							
24. Surety							
26. Burglary and theft	1,236,387			1,236,387			
27. Boiler and machinery	1,802,897			1,802,897			
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	456,269,140		2	456,269,142			
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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	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	4,841,755		4,841,755					
2. Allied lines	15,091,273		15,091,273					
3. Farmowners multiple peril								
4. Homeowners multiple peril								
5. Commercial multiple peril	36,161,119		36,161,119					
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine	3,506,869		3,506,869					
10. Financial guaranty								
11.1 Medical professional liability - occurrence	3,592,367		3,592,367					
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	40,958,650	10,744	40,969,394					
17.1 Other liability - occurrence	14,063,483		14,063,483					
17.2 Other liability - claims-made	645,644		645,644					
17.3 Excess workers' compensation								
18.1 Products liability - occurrence	1,444,000		1,444,000					
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability	(250)		(250)					
19.3, 19.4 Commercial auto liability	28,003,532		28,003,532					
21. Auto physical damage	15,280,177		15,280,177					
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft	159,724		159,724					
27. Boiler and machinery	169,889		169,889					
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	163,918,231	10,744	163,928,975					
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 2021 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	9
	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	2,338,211		.2,338,211						
2. Allied lines	7,447,785		7,447,785						
3. Farmowners multiple peril									
4. Homeowners multiple peril									
5. Commercial multiple peril	43,071,322		43,071,322		13,431,937		13,431,937		
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine	633,446		633,446						
10. Financial guaranty									
11.1 Medical professional liability - occurrence	1,326,374		1,326,374		2,572,000		2,572,000		
11.2 Medical professional liability - claims-made	479,093		479,093						
12. Earthquake									
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)								(a)	
15. Other accident and health									
16. Workers' compensation	122,137,574	.165,287	.122,302,861		117,713,000	.113,121	.117,826,121		
17.1 Other liability - occurrence	45,855,826		45,855,826		40,561,000		40,561,000		
17.2 Other liability - claims-made	112,425		112,425		56,059		56,059		
17.3 Excess workers' compensation									
18.1 Products liability - occurrence	7,736,902		7,736,902		4,418,000		4,418,000		
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability	417		.417						
19.3, 19.4 Commercial auto liability .....	.61,895,603		.61,895,603		28,282,000		28,282,000		
21. Auto physical damage .....	.572,835		.572,835		.100,000		.100,000		
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft .....	.18,653		.18,653		44,003		.44,003		
27. Boiler and machinery	22,416		22,416						
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	293,648,882	165,287	293,814,169		207,178,000	113,121	207,291,121		
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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct	19,207,646			19,207,646
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	19,207,646			19,207,646
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2. Commission and brokerage:				
2.1 Direct excluding contingent		58,567,329		58,567,329
2.2 Reinsurance assumed, excluding contingent .....		.716		.716
2.3 Reinsurance ceded, excluding contingent		58,568,045		58,568,045
2.4 Contingent - direct		13,460,000		13,460,000
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded		13,460,000		13,460,000
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				
6. Surveys and underwriting reports				
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries			24,329	24,329
8.2 Payroll taxes			1,283	1,283
9. Employee relations and welfare			13,935	13,935
10. Insurance				
11. Directors' fees				
12. Travel and travel items			45	45
13. Rent and rent items			763	763
14. Equipment			82,295	82,295
15. Cost or depreciation of EDP equipment and software				
16. Printing and stationery			10	10
17. Postage, telephone and telegraph, exchange and express .....			.3	.3
18. Legal and auditing			19,668	19,668
19. Totals (Lines 3 to 18)			142,331	142,331
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			142,331	(a) 142,331
26. Less unpaid expenses - current year			4,663	4,663
27. Add unpaid expenses - prior year			5,307	5,307
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)			142,975	142,975
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.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 22,241	22,295
1.1 Bonds exempt from U.S. tax	(a) 1,435,615	1,413,300
1.2 Other bonds (unaffiliated)	(a) 1,951,144	2,016,508
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated) .....	..... 928,197	936,530
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) 1	1
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income		
10. Total gross investment income	4,337,198	4,388,633
11. Investment expenses	(g) 142,331	
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)		142,331
17. Net investment income (Line 10 minus Line 16)		4,246,302
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 \$ 109,461 accrual of discount less \$ 279,530 amortization of premium and less \$ 13,047 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 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax	4,527		4,527		
1.2 Other bonds (unaffiliated)	(20,580)		(20,580)	152,681	
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)	1,353,981		1,353,981	7,001,567	
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)	1,337,928		1,337,928	7,154,247	
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)					

Exhibit 1 - Analysis of Non-Admitted Assets and Related Items

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
NOTES TO FINANCIAL STATEMENTS

ANNUAL STATEMENT FOR THE YEAR 2021 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 #	2021	2020
NET INCOME					
(1) Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 4,765,337	\$ 2,650,226
(2) State Prescribed Practices that increase/(decrease) NAIC SAP	N/A	N/A	N/A	0	0
(3) State Permitted Practices that increase/(decrease) NAIC SAP	N/A	N/A	N/A	0	0
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 4,765,337	\$ 2,650,226
SURPLUS					
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 125,656,332	\$ 115,316,486
(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	\$ 125,656,332	\$ 115,316,486

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

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

C. Accounting Policies

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

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

In addition, the Company uses the following accounting policies:

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

determined.

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

D. Going Concern

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

2. Accounting Changes and Correction of Errors

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

3. Business Combinations and Goodwill – Not applicable

4. Discontinued Operations – Not applicable

5. Investments

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

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted and Nonadmitted) Restricted							8	9	Percentage			
	Current Year					6	7			10	11		
	1	2	3	4	5								
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total from Prior Year	Increased/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)		
a. Subject to contractual obligation for which liability is not shown	\$ 0	\$ 0	\$ 0	\$ 0	0	\$ 0	\$ 0	\$ 0	\$ 0	0	0.00%		
b. Collateral held under security lending agreements	0	0	0	0	0	0	0	0	0	0	0.00%		
c. Subject to repurchase agreements	0	0	0	0	0	0	0	0	0	0	0.00%		
d. Subject to reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0	0.00%		
e. Subject to dollar repurchase agreements	0	0	0	0	0	0	0	0	0	0	0.00%		
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0	0	0	0	0	0.00%		
g. Placed under option contracts	0	0	0	0	0	0	0	0	0	0	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	0.00%		
i. FHLB capital stock	0	0	0	0	0	0	0	0	0	0	0.00%		
j. On deposit with states	11,041,967	0	0	0	11,041,967	11,262,027	(220,060)	0	11,041,967	6.67%	6.67%		
k. On deposit with other regulatory bodies	0	0	0	0	0	0	0	0	0	0	0.00%		
l. Pledged collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0	0	0	0	0	0.00%		
m. Pledged as collateral not captured in other categories	0	0	0	0	0	0	0	0	0	0	0.00%		
n. Other restricted assets	0	0	0	0	0	0	0	0	0	0	0.00%		
o. Total Restricted Assets	\$ 11,041,967	\$ 0	\$ 0	\$ 0	\$ 11,041,967	\$ 11,262,027	\$ (220,060)	\$ 0	\$ 11,041,967	6.67%	6.67%		

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

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

M. Working Capital Finance Investments – Not applicable

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

O. 5GI Securities – Not applicable

P. Short Sales – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

Q. Prepayment Penalties and Acceleration Fees

	General Account	Protected Cell
(1) Number of CUSIPs	4	0
(2) Aggregate Amount of Investment Income	\$ 288,268	\$ 0

R. Reporting Entity's Share of Cash Pool by Asset type – Not applicable

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.

	2021		
	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	\$ 12,494	\$ 5,454,227	\$ 5,466,721
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (12,494)	\$ (5,454,227)	\$ (5,466,721)

	2020		
	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	\$ 11,378	\$ 3,875,604	\$ 3,886,982
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (11,378)	\$ (3,875,604)	\$ (3,886,982)

	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	\$ 1,116	\$ 1,578,623	\$ 1,579,739
(g) Net Admitted Deferred Tax Asset/(Liability) (1e - 1f)	\$ (1,116)	\$ (1,578,623)	\$ (1,579,739)

2.

	2021		
	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	18,848,450
(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

	2020		
	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	17,297,473
(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 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

Admission Calculation Components SSAP No. 101	Change			
	Ordinary	Capital	Total	
	\$	\$	\$	
(a)Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	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	1,550,977	
(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.

	2021	2020
	Percentage	Percentage
(a)Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	1912%	2306%
(b)Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 above	\$ 125,656,332	\$ 115,316,486

4.

Impact of Tax Planning Strategies	2021			
	Ordinary	Capital	Total	
	\$	\$	\$	
(a)Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.				
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 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.				

Impact of Tax Planning Strategies	2020			
	Ordinary	Capital	Total	
	\$	\$	\$	
(a)Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.				
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 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.				

Impact of Tax Planning Strategies	Change			
	Ordinary	Capital	Total	
	\$	\$	\$	
(a)Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.				
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 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.				

B. Unrecognized DTLs – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

C. Current Tax and Change in Deferred Tax

1. Current income tax:

	2021	2020	Change
(a) Federal	\$ 576,202	\$ 472,200	\$ 104,002
(b) Foreign	19,672	18,060	1,612
(c) Subtotal	595,874	490,260	105,614
(d) Federal income tax on capital gains/(losses)	223,019	(991)	224,010
(e) Utilization of capital loss carryforwards	0	0	0
(f) Other	0	0	0
(g) Federal income taxes incurred	\$ 818,893	\$ 489,269	\$ 329,624

2. Deferred tax assets:

	2021	2020	Change
(a) Ordinary			
1. Unearned premium reserve	\$ 0	\$ 0	\$ 0
2. Unpaid loss reserve	0	0	0
3. Contingent commission	0	0	0
4. Nonadmitted assets	0	0	0
5. Other deferred tax assets	0	0	0
99. Subtotal	\$ 0	\$ 0	\$ 0
(b) Statutory valuation allowance adjustment	0	0	0
(c) Nonadmitted	0	0	0
(d) Admitted ordinary deferred tax assets ((2(a)99-2(b)-2(c))	\$ 0	\$ 0	\$ 0
(e) Capital			
1. Investments	\$ 0	\$ 0	\$ 0
2. Unrealized (gain)/loss on investments	0	0	0
99. Subtotal	\$ 0	\$ 0	\$ 0
(f) Statutory valuation allowance	0	0	0
(g) Nonadmitted	0	0	0
(h) Admitted capital deferred tax assets ((2(e)99- 2(f)-2(g))	\$ 0	\$ 0	\$ 0
(i) Admitted deferred tax assets (2(d)+2(h))	\$ 0	\$ 0	\$ 0

3. Deferred tax liabilities:

	2021	2020	Change
(a) Ordinary			
1. Commission expense	\$ 0	\$ 0	\$ 0
2. Other, net	12,494	11,378	1,116
99. Subtotal	\$ 12,494	\$ 11,378	\$ 1,116
(b) Capital			
1. Investment	\$ 102,109	\$ 25,878	\$ 76,231
2. Unrealized (gain)/loss on investments	5,352,118	3,849,726	1,502,392
99. Subtotal	\$ 5,454,227	\$ 3,875,604	\$ 1,578,623
(c) Deferred tax liabilities (3(a)99+3(b)99)	\$ 5,466,721	\$ 3,886,982	\$ 1,579,739
4. Net deferred tax assets/(liabilities) (2(i)-3(c)):	\$ (5,466,721)	\$ (3,886,982)	\$ (1,579,739)

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

	December 31, 2021	December 31, 2020	Change
Total deferred tax assets	\$ 0	\$ 0	\$ 0
Total deferred tax liabilities	5,466,721	3,886,982	1,579,739
Net deferred tax asset/(liability)	\$ (5,466,721)	\$ (3,886,982)	\$ (1,579,739)
Tax effect of unrealized gains/(losses)			1,502,392
Change in net deferred income tax (charge)/benefit			\$ (77,347)
	December 31, 2020	December 31, 2019	Change
Total deferred tax assets	\$ 0	\$ 0	\$ 0
Total deferred tax liabilities	3,886,982	3,604,494	282,488
Net deferred tax asset/(liability)	\$ (3,886,982)	\$ (3,604,494)	\$ (282,488)
Tax effect of unrealized (gains)/losses			390,592
Change in net deferred income tax (charge)/benefit			\$ 108,104

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, 2021		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 5,584,229	\$ 1,172,688	21.00 %
Net tax exempt interest	(1,059,214)	(222,435)	(3.98)%
Net dividends received deduction (DRD)	(254,200)	(53,382)	(0.96)%
Other items permanent, net	8	2	0.00 %
DRD on accrued	(3,014)	(633)	(0.01)%
Total	\$ 4,267,809	\$ 896,240	16.05 %
Federal income tax expense incurred/(benefit)	\$ 2,837,495	\$ 595,874	10.67 %
Tax on capital gains/(losses)	1,061,995	223,019	3.99 %
Change in nonadmitted excluding deferred tax asset	0	0	0.00 %
Change in net deferred income tax charge/(benefit)	368,319	77,347	1.39 %
Total statutory income taxes incurred/(benefit)	\$ 4,267,809	\$ 896,240	16.05 %

Description	As of December 31, 2020		
	Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 3,139,495	\$ 659,294	21.00 %
Net tax exempt interest	(1,083,929)	(227,625)	(7.25)%
Net dividends received deduction (DRD)	(238,000)	(49,980)	(1.59)%
Other items permanent, net	29	6	0.00 %
DRD on accrued	(2,524)	(530)	(0.02)%
Total	\$ 1,815,071	\$ 381,165	12.14 %
Federal income tax expense incurred/(benefit)	\$ 2,334,571	\$ 490,260	15.62 %
Tax on capital gains/(losses)	(4,719)	(991)	(0.03)%
Change in nonadmitted excluding deferred tax asset	0	0	0.00 %
Change in net deferred income tax charge/(benefit)	(514,781)	(108,104)	(3.45)%
Total statutory income taxes incurred/(benefit)	\$ 1,815,071	\$ 381,165	12.14 %

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

E. Operating Loss and Tax Credit Carryforwards

At December 31, 2021 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
2021	\$ 515,666	\$ 283,556	\$ 799,222
2020	472,199	0	472,199
2019	0	2,513	2,513
Total	\$ 987,865	\$ 286,069	\$ 1,273,934

At December 31, 2021 the Company had no protective tax deposits under Section 6603 of the Internal Revenue Code.

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 Life Insurance Company
The Cincinnati Casualty Company
The Cincinnati Specialty Underwriters Insurance Company
CFC Investment Company
CSU Producer Resources, Inc.

2. 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, 2021 and 2020, 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 have closed for tax years 2016 and earlier. However, as a result of certain net operating loss carryback claims we have filed related to the tax year ended December 31, 2017, the IRS has a limited ability to assess tax for the 2015 tax year. In 2019, the IRS began its examination of the tax year ended December 31, 2017 and they have expanded their scope to include tax year ended December 31, 2018. At this time no adjustments have been proposed. In addition to our IRS filings, we file income tax returns with immaterial amounts in various state jurisdictions and record these amounts in our provision for income taxes for both current and deferred taxes. The statute of limitations for state income tax purposes have closed for tax years 2017 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).

B. Detail of Transactions Greater than 1/2% 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, 2021, the Company reported \$8,422,561 due from the Parent Company, The Cincinnati Insurance Company. The terms of the settlement require that these amounts be settled within 30 days.

E. Management, Service Contracts, Cost Sharing Arrangements

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.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

F. Guarantees or Contingencies for Related Parties – Not applicable

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 or SSAP No. 48 Entity Loss Tracking – Not applicable

11. Debt – Not applicable

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

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 \$649 and \$1,067 for 2021 and 2020, respectively.

H. Postemployment Benefits and Compensated Absences – Not applicable

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

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

A. The Company has 2,000 shares authorized, 1,800 shares issued and 1,800 shares outstanding. All shares are Class A shares.

B. Preferred stock issues – Not applicable

C. 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 2022 based upon surplus is \$12,565,633.

D. The Company did not pay any dividends during 2021.

E. 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.

F. Surplus restrictions – Not applicable

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

- G. Mutual Surplus Advances – Not applicable
- H. Company Stock Held for Special Purposes – Not applicable
- I. Changes in Special Surplus Funds – Not applicable
- J. The portion of unassigned funds (surplus) represented or (reduced) by cumulative unrealized gains/(losses) are \$25,486,274 offset by deferred tax of \$5,352,117 for a net balance of \$20,134,157.
- K. Surplus Notes – Not applicable
- L. Restatement of Quasi-Reorganization – Not applicable
- M. 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, 2021.

- C. Gain Contingencies – Not applicable

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

- E. Product Warranties – Not applicable

- F. Joint and Several Liabilities – Not applicable

- G. All Other Contingencies

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

15. Leases – Not applicable

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

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

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

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

20. Fair Value Measurements

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

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

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

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

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

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NOTES TO FINANCIAL STATEMENTS

The Company primarily bases fair value estimates for investments in equity and fixed-maturity securities on quoted market prices or on prices from a nationally recognized pricing vendor, an outside resource that supplies global securities pricing, dividend, corporate action and descriptive information to support fund pricing, securities operations, research and portfolio management. The Company obtains and reviews 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, 2021:

Assets at Fair Value:

	Level 1	Level 2	Level 3	Net Asset Value (NAV) Included in Level 2	Total
Common Stock	\$ 43,881,253	\$ 0	\$ 0	\$ 0	\$ 43,881,253
Total	\$ 43,881,253	\$ 0	\$ 0	\$ 0	\$ 43,881,253

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

B. Other Fair Value Disclosures – Not applicable

C. Fair Values for all Financial Instruments by Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV) Included in Level 2	Not Practicable (Carrying Value)
Bonds	\$ 88,814,500	\$ 83,344,601	\$ 970,035	\$ 87,844,465	\$ 0	\$ 0	\$ 0
Common Stock	43,881,253	43,881,253	43,881,253	0	0	0	0

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

21. Other Items

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

Assets in the amount of \$11,041,967 and \$11,262,027 at December 31, 2021 and 2020, 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
- H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy – Not applicable

22. Subsequent Events

The Company has considered subsequent events through February 28, 2022, the date of issuance of these statutory financial statements. There were no events occurring subsequent to December 31, 2021, 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	\$ 212,192,363	\$ 27,309,522	\$ (212,192,363)	\$ (27,309,522)
b. All Other	0	0	0	0	0	0
c. Total	\$ 0	\$ 0	\$ 212,192,363	\$ 27,309,522	\$ (212,192,363)	\$ (27,309,522)
d. Direct Unearned Premium Reserve			\$ 212,192,363			

2.

	REINSURANCE			
	Direct	Assumed	Ceded	Net
a. Contingent Commission	\$ 13,460,000	\$ 0	\$ 13,460,000	\$ 0
b. Sliding Scale Adjustments	0	0	0	0
c. Other Profit Commission Arrangements	0	0	0	0
d. Total	\$ 13,460,000	\$ 0	\$ 13,460,000	\$ 0

3. Protected Cell – Not applicable

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

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	01/20/2022
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	2017	2018	2019	2020	2021
		Direct	Direct	Direct	Direct	Direct
1.	Beginning Reserves	\$ 7,500	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	(7,500)	3,716	0	3,908	0
	Calendar year payments for Loss and LAE	0	3,716	0	3,908	0
	Ending Reserves	\$ 0	\$ 0	\$ 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	2017	2018	2019	2020	2021
Direct	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Assumed	0	0	0	0	0	0
Net	0	0	0	0	0	0

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

	LAE Reserves	2017	2018	2019	2020	2021
Direct	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Assumed	0	0	0	0	0	0
Net	0	0	0	0	0	0

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

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

	ENVIRONMENTAL LOSSES	2017	2018	2019	2020	2021
		Direct	Direct	Direct	Direct	Direct
1.	Beginning Reserves	\$ 452,961	\$ 447,255	\$ 426,612	\$ 275,292	\$ 471,825
	Incurred Loss & LAE	576,058	633,641	1,159,256	(422,423)	(44,361)
	Calendar year payments for Loss and LAE	581,764	654,284	1,310,577	(618,956)	110,850
	Ending Reserves	\$ 447,255	\$ 426,612	\$ 275,292	\$ 471,825	\$ 316,613
2.	Assumed	Assumed	Assumed	Assumed	Assumed	Assumed
	Beginning Reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Incurred Loss & LAE	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE CINCINNATI INDEMNITY COMPANY

NOTES TO FINANCIAL STATEMENTS

	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

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

	IBNR Reserves	2017	2018	2019	2020	2021
	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	2017	2018	2019	2020	2021
	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 2011 & prior.

Parts 2&3-The prior line on last year's statement is combined with the year 2011 total. Paid amounts prior to 2012 are then subtracted from this sum to arrive at the prior figure.

Part 4-The sum of the prior year line and the 2011 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 2010 from the prior schedule P. Counts for accident year 2011 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 2011 AY of the prior year's Schedule P to arrive at the new prior number.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

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. 12/31/2019

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. 12/31/2019

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). 05/28/2021

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 [] No [] N/A [X]

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]

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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

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

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity? Yes [] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [] N/A []

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 []

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 []

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 [] No [X]

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

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 2021 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: \$ 8,422,561

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

25.01 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 25.03)..... Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

25.02 If no, give full and complete information relating thereto

25.03 For securities 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)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$

25.06 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]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 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]

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

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$

25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$

25.093 Total payable for securities lending reported on the liability page. \$

26.1 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 25.03). Yes [X] No []

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

26.21 Subject to repurchase agreements \$

26.22 Subject to reverse repurchase agreements \$

26.23 Subject to dollar repurchase agreements \$

26.24 Subject to reverse dollar repurchase agreements \$

26.25 Placed under option agreements \$

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$

26.27 FHLB Capital Stock \$

26.28 On deposit with states \$

11,041,967

26.29 On deposit with other regulatory bodies \$

26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$

26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$

26.32 Other \$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

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

27.2 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 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

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

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108 Yes [] No []

27.42 Permitted accounting practice Yes [] No []

27.43 Other accounting guidance Yes [] No []

27.5 By responding YES to 27.41 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.

28.1 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]

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

29. 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 []

29.01 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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

29.02 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)
.....

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

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

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

29.05 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
.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [] No [X]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

29.06 For those firms or individuals listed in the table for 29.05 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
.....

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

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total

30.3 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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

31. 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 (+)
31.1 Bonds	83,344,601	88,814,500	5,469,899
31.2 Preferred stocks			
31.3 Totals	83,344,601	88,814,500	5,469,899

31.4 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.

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

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No [X]

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

For our private placement securities, the company receives the fair value price from an outside private placement manager's firm. For all other securities not priced by IDC the company looks to outside security brokers who are market makers in that type of security.

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

33.2 If no, list exceptions:

34. 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]

35. 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]

36. 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]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$793,561

38.2 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
.....

39.1 Amount of payments for legal expenses, if any?\$250

39.2 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
WILLIAMS MULLEN	250

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

40.2 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
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [] No [X]
1.2	If yes, indicate premium earned on U. S. business only.	\$
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$
1.31	Reason for excluding	
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.	\$
1.6	Individual policies:	Most current three years: 1.61 Total premium earned \$ 1.62 Total incurred claims \$ 1.63 Number of covered lives
		All years prior to most current three years 1.64 Total premium earned \$ 1.65 Total incurred claims \$ 1.66 Number of covered lives
1.7	Group policies:	Most current three years: 1.71 Total premium earned \$ 1.72 Total incurred claims \$ 1.73 Number of covered lives
		All years prior to most current three years 1.74 Total premium earned \$ 1.75 Total incurred claims \$ 1.76 Number of covered lives
2.	Health Test:	1 Current Year 2 Prior Year
2.1	Premium Numerator	
2.2	Premium Denominator	
2.3	Premium Ratio (2.1/2.2)	0.000
2.4	Reserve Numerator	
2.5	Reserve Denominator	2,232
2.6	Reserve Ratio (2.4/2.5)	0.000
3.1	Did the reporting entity issue participating policies during the calendar year?	Yes [] No [X]
3.2	If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year: 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 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	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
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 licenses Risk Management Solutions and Applied Insurance Research to run our exposure data internally through these catastrophe models to analyze our PML's in addition the company has engaged with Guy Carpenter who uses the catastrophe models from RMS and AIR 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 catastrophic reinsurance program insuring losses \$700 million excess \$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 noncancelable 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 36 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 reinsurance 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 []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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

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

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
12.11 Unpaid losses \$
12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$

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

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

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

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

12.6 If yes, state the amount thereof at December 31 of the current year:
12.61 Letters of credit \$
12.62 Collateral and other funds \$

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

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

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

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

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

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

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

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

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

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

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

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

* Disclose type of coverage:
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [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 2021 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 2021	2 2020	3 2019	4 2018	5 2017
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)	279,507,856	257,976,133	252,119,243	251,875,096	248,982,970
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	79,384,142	74,745,590	70,378,133	68,643,606	68,510,573
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	97,377,144	93,686,150	94,557,458	98,793,664	101,675,545
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)	456,269,142	426,407,873	417,054,834	419,312,366	419,169,088
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)	5,361,211	3,139,840	3,618,396	5,594,566	4,724,313
15. Total other income (Line 15)		646	518	933	
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	595,874	490,260	498,177	470,357	742,651
18. Net income (Line 20)	4,765,337	2,650,226	3,120,737	5,125,141	3,981,662
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	165,596,186	150,260,538	146,520,755	135,609,648	132,971,976
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)		124			
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)	39,939,855	34,944,052	35,431,968	33,491,369	32,972,583
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)	125,656,332	115,316,486	111,088,787	102,118,279	99,999,393
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	4,310,454	(872,200)	10,040,234	7,411,856	(7,614,632)
Risk-Based Capital Analysis					
28. Total adjusted capital	125,656,332	115,316,486	111,088,787	102,118,279	99,999,393
29. Authorized control level risk-based capital	6,573,028	5,000,721	4,798,228	3,305,874	3,248,575
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)	63.5	66.6	69.2	73.2	71.6
31. Stocks (Lines 2.1 & 2.2)	33.5	29.8	28.8	24.5	24.8
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)	3.0	3.7	2.0	2.2	3.0
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
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)					

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2021	2 2020	3 2019	4 2018	5 2017
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	5,651,855	1,469,369	5,852,986	(3,003,524)	3,048,079
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	10,339,845	4,227,699	8,970,508	2,118,886	6,820,033
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)	88,718,169	93,788,606	105,412,605	101,221,450	104,474,768
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	38,879,798	30,673,647	29,361,785	36,854,369	29,778,730
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	36,331,008	37,705,944	43,367,587	38,776,316	44,729,777
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)	163,928,975	162,168,198	178,141,978	176,852,135	178,983,276
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)	0.0				
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 2021 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								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	2,858	2,858	133	133	161	161			XXX	
2. 2012	233,507	233,507		118,825	118,825	10,663	10,663	19,241	19,241			XXX	
3. 2013	312,989	312,989		132,336	132,336	15,948	15,948	20,486	20,486			XXX	
4. 2014	375,993	375,993		164,497	164,497	18,840	18,840	24,901	24,901			XXX	
5. 2015	426,973	426,973		163,883	163,883	19,966	19,966	24,146	24,146			XXX	
6. 2016	432,819	432,819		181,147	181,147	18,975	18,975	23,470	23,470			XXX	
7. 2017	421,630	421,630		163,726	163,726	17,175	17,175	22,537	22,537			XXX	
8. 2018	420,770	420,770		160,159	160,159	14,264	14,264	21,486	21,486			XXX	
9. 2019	414,313	414,313		123,440	123,440	10,529	10,529	21,159	21,159			XXX	
10. 2020	419,855	419,855		100,626	100,626	6,218	6,218	18,057	18,057			XXX	
11. 2021	438,383	438,383		67,812	67,812	2,208	2,208	10,671	10,671			XXX	
12. Totals	XXX	XXX	XXX	1,379,308	1,379,308	134,919	134,919	206,315	206,315			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.	21,938	21,938	40,093	40,093			2,172	2,172	109	109			XXX			
2. 2012	1,732	1,732	5,068	5,068			511	511	.71	.71			XXX			
3. 2013	4,622	4,622	4,551	4,551			899	899	103	103			XXX			
4. 2014	9,086	9,086	5,105	5,105			1,489	1,489	301	301			XXX			
5. 2015	10,062	10,062	8,377	8,377			2,395	2,395	754	754			XXX			
6. 2016	11,400	11,400	9,026	9,026			3,731	3,731	1,077	1,077			XXX			
7. 2017	21,686	21,686	10,427	10,427			5,532	5,532	1,189	1,189			XXX			
8. 2018	23,644	23,644	11,969	11,969			8,765	8,765	1,393	1,393			XXX			
9. 2019	41,589	41,589	17,745	17,745			14,177	14,177	2,411	2,411			XXX			
10. 2020	57,749	57,749	38,182	38,182			20,495	20,495	5,885	5,885			XXX			
11. 2021	90,307	90,307	56,748	56,748			25,802	25,802	13,358	13,358			XXX			
12. Totals	293,814	293,814	207,291	207,291			85,968	85,968	26,651	26,651			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 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. 2012	156,112	156,112		.66.9	.66.9						
3. 2013	178,944	178,944		.57.2	.57.2						
4. 2014	224,219	224,219		.59.6	.59.6						
5. 2015	229,584	229,584		.53.8	.53.8						
6. 2016	248,826	248,826		.57.5	.57.5						
7. 2017	242,272	242,272		.57.5	.57.5						
8. 2018	241,680	241,680		.57.4	.57.4						
9. 2019	231,050	231,050		.55.8	.55.8						
10. 2020	247,212	247,212		.58.9	.58.9						
11. 2021	266,906	266,906		.60.9	.60.9						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

Schedule P - Part 2 - Summary

N O N E

Schedule P - Part 3 - Summary

N O N E

Schedule P - Part 4 - Summary

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE THE CINCINNATI INDEMNITY COMPANY

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	8,859,808	8,998,030		2,468,770	3,641,568	8,019,004	974	
2. Alaska	AK	L							
3. Arizona	AZ	L	12,172,351	11,902,030		4,588,499	4,075,415	12,939,192	347
4. Arkansas	AR	L	4,276,648	4,014,538		917,740	690,764	5,550,125	530
5. California	CA	L	1,067,279	.857,515		.66,360	.330,691	744,014	
6. Colorado	CO	L	17,074,338	17,300,679		7,980,339	7,524,592	14,594,141	108
7. Connecticut	CT	L	1,731,855	1,533,362		1,639,372	143,695	679,287	5
8. Delaware	DE	L	1,487,848	1,630,429		472,682	533,452	2,089,865	232
9. District of Columbia	DC	L	502,588	.376,680		47,651	155,787	432,411	8
10. Florida	FL	L	37,005,656	36,201,296		13,497,967	18,429,702	30,453,531	2,410
11. Georgia	GA	L	14,407,435	14,330,820		4,820,297	7,236,788	17,755,227	924
12. Hawaii	HI	L	.5,484	9,869			600	3,715	
13. Idaho	ID	L	6,702,404	6,298,752		2,213,681	1,520,933	5,709,517	328
14. Illinois	IL	L	34,058,486	34,064,005		13,110,750	18,371,064	57,774,992	2,520
15. Indiana	IN	L	15,909,387	15,410,169		6,431,695	8,627,830	24,192,890	1,299
16. Iowa	IA	L	7,711,621	7,698,614		8,103,744	13,124,583	24,147,129	1,211
17. Kansas	KS	L	5,616,518	5,234,047		1,418,258	1,492,404	7,232,024	651
18. Kentucky	KY	L	9,441,151	8,853,715		2,589,003	2,453,350	9,749,122	1,455
19. Louisiana	LA	L	393,753	.297,207		190,809	305,480	508,622	
20. Maine	ME	L	332,894	.339,663		27,735	34,898	120,088	
21. Maryland	MD	L	8,863,139	8,620,060		2,584,328	4,720,324	13,217,029	408
22. Massachusetts	MA	L	1,678,578	1,182,300		148,351	519,898	571,753	19
23. Michigan	MI	L	15,118,978	15,453,041		4,637,414	4,742,055	20,336,365	1,327
24. Minnesota	MN	L	9,685,556	9,662,292		1,962,030	676,635	9,021,615	1,051
25. Mississippi	MS	L	144,635	.200,675		78,032	139,960	227,900	30
26. Missouri	MO	L	14,813,948	13,812,193		5,328,954	5,338,140	17,348,305	680
27. Montana	MT	L	2,906,744	2,834,243		1,431,890	318,890	1,627,561	296
28. Nebraska	NE	L	3,983,144	4,325,369		1,561,995	3,656,211	9,174,868	165
29. Nevada	NV	L	293,675	.282,611		.31,036	94,491	204,062	
30. New Hampshire	NH	L	3,886,710	3,858,046		873,880	1,799,110	3,109,944	255
31. New Jersey	NJ	L	1,616,470	1,363,940		293,524	719,071	907,854	19
32. New Mexico	NM	L	8,749,432	8,268,321		3,050,707	3,944,228	7,945,348	64
33. New York	NY	L	7,849,239	7,861,088		2,168,682	3,096,834	9,165,986	344
34. North Carolina	NC	L	17,304,512	17,126,518		4,114,878	3,999,887	16,210,582	1,655
35. North Dakota	ND	L	527,291	.613,636		256,796	19,030	313,704	.175
36. Ohio	OH	L	36,237,288	.33,896,954		10,341,750	10,465,875	20,637,519	10,860
37. Oklahoma	OK	L	235,287	.204,856		31,947	143,621	257,292	
38. Oregon	OR	L	5,619,534	5,300,439		888,955	63,734	1,597,185	78
39. Pennsylvania	PA	L	39,032,197	36,717,213		15,009,918	13,435,097	47,809,935	5,400
40. Rhode Island	RI	L	.154,795	.155,003		.30,864	48,124	121,053	
41. South Carolina	SC	L	5,797,424	4,302,197		2,541,270	5,085,532	8,468,252	59
42. South Dakota	SD	L	1,761,694	1,763,388		509,283	1,177,457	3,196,841	85
43. Tennessee	TN	L	.15,158,241	14,911,554		5,367,727	3,587,235	19,954,994	1,314
44. Texas	TX	L	22,788,619	20,970,336		12,135,821	12,401,119	17,153,072	204
45. Utah	UT	L	6,442,179	5,712,870		2,251,242	3,063,225	6,207,455	221
46. Vermont	VT	L	5,089,442	4,736,452		1,316,667	2,560,270	4,192,059	55
47. Virginia	VA	L	20,119,722	18,351,333		7,061,749	7,370,163	20,620,544	1,460
48. Washington	WA	L	7,997,733	7,144,167		2,449,652	2,035,335	4,413,551	35
49. West Virginia	WV	L	3,342,773	3,264,711		1,009,000	863,069	2,110,496	218
50. Wisconsin	WI	L	8,662,922	8,253,418		3,759,244	2,960,585	11,638,176	1,423
51. Wyoming	WY	L	1,649,728	1,882,816		105,293	201,069	370,687	68
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	456,269,140	438,383,463		163,918,231	187,939,869	500,826,882	40,970
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.....

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.....

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

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

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

	Domiciliary Location	FEIN	NAIC Co. Code
Cincinnati Financial Group (Parent)	OH	31-0746871	
CFC Investment Company	OH	31-0790388	
The Cincinnati Insurance Company (Insurer)	OH	31-0542366	10677
The Cincinnati Casualty Company (Insurer)	OH	31-0826946	28665
The Cincinnati Indemnity Company (Insurer)	OH	31-1241230	23280
The Cincinnati Life Insurance Company (Insurer)	OH	31-1213778	76236
CLIC District 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	
CIC BP Investments G, LLC	OH	35-2698966	
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 2021 OF THE THE CINCINNATI INDEMNITY COMPANY
OVERFLOW PAGE FOR WRITE-INS