



LIFE AND ACCIDENT AND HEALTH COMPANIES — ASSOCIATION EDITION

**ANNUAL STATEMENT**For the Year Ended December 31, 2011  
OF THE CONDITION AND AFFAIRS OF THE**CINCINNATI LIFE INSURANCE COMPANY**

NAIC Group Code	00244 (Current Period)	00244 (Prior Period)	NAIC Company Code	76236	Employer's ID Number		31-1213778
Organized under the Laws of Ohio			State of Domicile or Port of Entry			Ohio	
Country of Domicile			United States				
Incorporated/Organized 07/02/1987			Commenced Business			02/01/1988	
Statutory Home Office 6200 SOUTH GILMORE ROAD (Street and Number)						FAIRFIELD, OH 45014-5141 (City or Town, State and Zip Code)	
Main Administrative Office 6200 SOUTH GILMORE ROAD (Street and Number)						FAIRFIELD, OH 45014-5141 (City or Town, State and Zip Code) 513-870-2000 (Area Code) (Telephone Number)	
Mail Address 6200 SOUTH GILMORE ROAD (Street and Number or P.O. Box)						FAIRFIELD, OH 45014-5141 (City or Town, State and Zip Code)	
Primary Location of Books and Records 6200 SOUTH GILMORE ROAD (Street and Number)						FAIRFIELD, OH 45014-5141 513-870-2000 (City or Town, State and Zip Code) (Area Code) (Telephone Number)	
Internet Web Site Address			WWW.CINFIN.COM				
Statutory Statement Contact KEVIN CHRISTOPHER SMITH (Name)						513-603-5564 (Area Code) (Telephone Number) (Extension)	
KEVIN_SMITH@CINFIN.COM (E-Mail Address)						513-603-5500 (FAX Number)	

**OFFICERS**

Name	Title	Name	Title
DAVID HUGH POPPLEWELL	PRESIDENT	MICHAEL JAMES SEWELL #	CFO & SENIOR VICE PRESIDENT
TODD HANCOCK PENDERY	TREASURER & VICE PRESIDENT	ROGER ANDREW BROWN	ACTUARY & VICE PRESIDENT

**OTHER OFFICERS**

KENNETH WILLIAM STECHER #	CHAIRMAN OF THE BOARD	STEVEN JUSTUS JOHNSTON #	CHIEF EXECUTIVE OFFICER
JACOB FERDINAND SCHERER JR #	EXECUTIVE VICE PRESIDENT	BRAD ERIC BERHINGER	SENIOR VICE PRESIDENT
TERESA CURRIN CRACAS	SENIOR VICE PRESIDENT	CRAIG WILLIAM FORRESTER	SENIOR VICE PRESIDENT
MARTIN FRANCIS HOLLENBECK	SENIOR VICE PRESIDENT	JOHN SCOTT KELLINGTON	SENIOR VICE PRESIDENT
LISA ANNE LOVE #	SENIOR VICE PRESIDENT	ERIC NEIL MATHEWS	SENIOR VICE PRESIDENT
GLENN DOUGLAS NICHOLSON	SENIOR VICE PRESIDENT	TIMOTHY LEE TIMMEL	SENIOR VICE PRESIDENT
MICHAEL RAY ABRAMS	VICE PRESIDENT	ROGER ANDREW BROWN	VICE PRESIDENT
DAVID LEWIS BURBRINK	VICE PRESIDENT	JOSEPH MICHAEL DEMPSEY	VICE PRESIDENT
ANTHONY WAYNE DUNN	VICE PRESIDENT	HAROLD LEE EGGERS	VICE PRESIDENT
WILLIAM JAMES GEIER	VICE PRESIDENT	SCOTT ALAN GILLIAM	VICE PRESIDENT
TERESA ANN HOFFER	VICE PRESIDENT	RICHARD LOUIS MATHEWS	VICE PRESIDENT
RICHARD PARKS MATSON	VICE PRESIDENT	DENNIS EUGENE McDANIEL #	VICE PRESIDENT
MICHAEL KEVIN O'CONNOR	VICE PRESIDENT	TODD HANCOCK PENDERY	VICE PRESIDENT
THOMAS JOSEPH SCHEID	VICE PRESIDENT	GREGORY DALE SCHMIDT	VICE PRESIDENT
STEVEN ANTHONY SOLORIA	VICE PRESIDENT	DOUGLAS WAYNE STANG #	VICE PRESIDENT
MICHAEL BERNARD WEDIG	VICE PRESIDENT	MARK ALAN WELSH	VICE PRESIDENT
BRIAN KEITH WOOD	VICE PRESIDENT		

**DIRECTORS OR TRUSTEES**

WILLIAM FORREST BAHL	GREGORY THOMAS BIER	ROGER ANDREW BROWN #	MARTIN FRANCIS HOLLENBECK
STEVEN JUSTUS JOHNSTON	WILLIAM RODNEY McMULLEN	MARTIN JOSEPH MULLEN	GLENN DOUGLAS NICHOLSON
DAVID HUGH POPPLEWELL	JACOB FERDINAND SCHERER JR	JOHN JEFFERSON SCHIFF JR	THOMAS REID SCHIFF
KENNETH WILLIAM STECHER	TIMOTHY LEE TIMMEL	EARNEST ANTHONY WOODS	

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.

DAVID HUGH POPPLEWELL PRESIDENT	MICHAEL JAMES SEWELL CHIEF FINANCIAL OFFICER	TODD HANCOCK PENDERY TREASURER
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Subscribed and sworn to before me this  
17TH day of FEBRUARY, 2012

KAREN S. DONNER, NOTARY PUBLIC  
OCTOBER 26, 2014

a. Is this an original filing?

Yes [ X ] No [ ]

b. If no:

1. State the amendment number
2. Date filed
3. Number of pages attached



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,126,552			.616	4,127,169
2. Annuity considerations		1,678,036				1,678,036
3. Deposit-type contract funds		145,239	XXX		XXX	145,239
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		5,949,828	0	0	616	5,950,444
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		1,856,223			2,500	1,858,723
10. Matured endowments						0
11. Annuity benefits		237,093				237,093
12. Surrender values and withdrawals for life contracts		280,525			.631	281,155
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		2,373,841	0	0	3,131	2,376,971
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>		
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0	
17. Incurred during current year	22	1,856,223					.5	2,500	.27	1,858,723	
Settled during current year:											
18.1 By payment in full	22	1,856,223					.5	2,500	.27	1,858,723	
18.2 By payment on compromised claims									0	0	
18.3 Totals paid	22	1,856,223	0	0	0	0	.5	2,500	.27	1,858,723	
18.4 Reduction by compromise									0	0	
18.5 Amount rejected									0	0	
18.6 Total settlements	22	1,856,223	0	0	0	0	.5	2,500	.27	1,858,723	
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0	
<b>POLICY EXHIBIT</b>											
20. In force December 31, prior year	6,258	1,432,192,710	0	(a)	0	0	.1	1,126	6,259	1,432,193,836	
21. Issued during year	.863	121,591,954							.863	121,591,954	
22. Other changes to in force (Net)	(608)	(105,958,514)							(79)	(608)	(105,958,593)
23. In force December 31 of current year	6,513	1,447,826,150	0	(a)	0	0	1	1,047	6,514	1,447,827,197	

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	270	102			
25.2 Guaranteed renewable (b)	94,603	112,149		119,446	(77,555)
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	.22	.7			
25.5 All other (b)	843	247		.602	(321)
25.6 Totals (sum of Lines 25.1 to 25.5)	95,738	112,505	0	120,048	(77,876)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	95,738	112,505	0	120,048	(77,876)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		32,479				32,479
2. Annuity considerations		150,000				150,000
3. Deposit-type contract funds			XXX			0
4. Other considerations				XXX		0
5. Totals (Sum of Lines 1 to 4)		182,479	0	0	0	182,479
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	31	962,117	0	(a)	0	0	0	0	31	962,117
21. Issued during year									0	0
22. Other changes to in force (Net)	(11)	(217,789)							(11)	(217,789)
23. In force December 31 of current year	20	744,328	0	(a)	0	0	0	0	20	744,328

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						0
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX			0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		0	0	0	0	0
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	0	0	0	0	(a)	No. of Policies				
21. Issued during year .....	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net) .....										0
23. In force December 31 of current year .....	0	0	0	0		0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ ..... , current year \$ .....  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,437,902					1,437,902
2. Annuity considerations .....	.49,248					.49,248
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	1,487,150	0		0	0	1,487,150
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	108,511					108,511
10. Matured endowments .....	4,465					4,465
11. Annuity benefits .....	231,471			.600		232,071
12. Surrender values and withdrawals for life contracts .....	139,486					139,486
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	483,933	0		600	0	484,533
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.5	112,976							.5	112,976
Settled during current year:										
18.1 By payment in full .....	.5	112,976							.5	112,976
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	.5	112,976	0	0	0	0	0	0	.5	112,976
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	.5	112,976	0	0	0	0	0	0	.5	112,976
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	1,309	502,900,583	0	(a)	0	0	0	0	1,309	502,900,583
21. Issued during year .....	.150	70,803,917			0	0	0	0	.150	70,803,917
22. Other changes to in force (Net) .....	(207)	(51,024,579)							(207)	(51,024,579)
23. In force December 31 of current year .....	1,252	522,679,921	0	(a)	0	0	0	0	1,252	522,679,921

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....	.128	.48			
25.2 Guaranteed renewable (b) .....	.17,867	.18,310			.643
25.3 Non-renewable for stated reasons only (b) .....	.6	.2			
25.4 Other accident only .....	.11	.3			
25.5 All other (b) .....	18,012	18,363	0	0	.643
25.6 Totals (sum of Lines 25.1 to 25.5) .....	18,012	18,363	0	0	.643
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	18,012	18,363	0	0	.643

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,106,464					2,106,464
2. Annuity considerations .....	164,725					164,725
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	2,271,189	0		0	0	2,271,189
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	639,681					639,681
10. Matured endowments .....						0
11. Annuity benefits .....	250,418					250,418
12. Surrender values and withdrawals for life contracts .....	355,248					355,248
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	1,245,347	0		0	0	1,245,347
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	639,681							1	639,681
Settled during current year:										
18.1 By payment in full .....	1	639,681							1	639,681
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	639,681	0	0	0	0	0	0	1	639,681
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	639,681	0	0	0	0	0	0	1	639,681
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
	20. In force December 31, prior year .....	1,997	667,192,733	0	(a)	0	19,571,424	0	1,998	686,764,157
21. Issued during year .....	171	56,949,613		0		1		0	171	56,949,613
22. Other changes to in force (Net) .....	(157)	(33,278,877)					293,124		(157)	(32,985,753)
23. In force December 31 of current year .....	2,011	690,863,469	0	(a)	0	1	19,864,548	0	0	710,728,017

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	281	281			
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,127	3,911			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	22	7			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,150	3,918	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,431	4,199	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	4,996,386				1,098	4,997,484
2. Annuity considerations .....	2,073,677					2,073,677
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	7,070,063	0		0	1,098	7,071,161
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	1,219,097				1,500	1,220,597
10. Matured endowments .....	500					500
11. Annuity benefits .....	374,131			50,319		424,450
12. Surrender values and withdrawals for life contracts .....	253,330				2,160	255,490
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	1,847,058	0	50,319		3,660	1,901,037
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	18	1,219,597					3	1,500	21	1,221,097
Settled during current year:										
18.1 By payment in full .....	18	1,219,597					3	1,500	21	1,221,097
18.2 By payment on compromised claims .....								0	0	0
18.3 Totals paid .....	18	1,219,597	0	0	0	0	3	1,500	21	1,221,097
18.4 Reduction by compromise .....								0	0	0
18.5 Amount rejected .....								0	0	0
18.6 Total settlements .....	18	1,219,597	0	0	0	0	3	1,500	21	1,221,097
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	10,950	1,464,522,466	0	(a)	0	0	657	635,666	11,607	1,465,158,132
21. Issued during year .....	.847	153,330,751			0				.847	153,330,751
22. Other changes to in force (Net) .....	(900)	(107,974,433)					(36)	(44,996)	(936)	(108,019,429)
23. In force December 31 of current year .....	10,897	1,509,878,784	0	(a)	0	0	621	590,670	11,518	1,510,469,454

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	.40,669	.55,258		.47,955	-(59,214)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	234	.77			
25.5 All other (b) .....	500	.147			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.41,403	.55,482	0	.47,955	-(59,214)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	41,403	.55,482	0	.47,955	-(59,214)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		1,731				1,731
2. Annuity considerations .....			XXX		XXX	0
3. Deposit-type contract funds .....						0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		1,731	0	0	0	1,731
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....	0	0	0	0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		828,580				828,580
2. Annuity considerations		44,450				44,450
3. Deposit-type contract funds		87,744	XXX		XXX	87,744
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		960,775	0	0	0	960,775
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		44,374				44,374
10. Matured endowments						0
11. Annuity benefits		234,594				234,594
12. Surrender values and withdrawals for life contracts		24,042				24,042
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		303,009	0	0	0	303,009
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.5	44,374							.5	44,374
Settled during current year:										
18.1 By payment in full	.5	44,374							.5	44,374
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.5	44,374	0	0	0	0	0	0	.5	44,374
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	.5	44,374	0	0	0	0	0	0	.5	44,374
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	.671	197,166,455	0	(a)	0	0	0	0	.671	197,166,455
21. Issued during year	.118	31,230,206	0		0	0	0	0	.118	31,230,206
22. Other changes to in force (Net)	(137)	(31,419,436)							(137)	(31,419,436)
23. In force December 31 of current year	652	196,977,225	0	(a)	0	0	0	0	652	196,977,225

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ ,

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ ,

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ ,

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	24,376	25,037		8,100	4,304
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	24,376	25,037	0	8,100	4,304
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	24,376	25,037	0	8,100	4,304

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		342,294				342,294
2. Annuity considerations .....		405,154				405,154
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		747,448	0	0	0	747,448
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....		47,316				47,316
10. Matured endowments .....						0
11. Annuity benefits .....		21,666				21,666
12. Surrender values and withdrawals for life contracts .....		47,609				47,609
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		116,591	0	0	0	116,591
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.3	47,316							.3	47,316
Settled during current year:										
18.1 By payment in full .....	.3	47,316							.3	47,316
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	.3	47,316	0	0	0	0	0	0	.3	47,316
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	.3	47,316	0	0	0	0	0	0	.3	47,316
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	.654	88,498,678	0	(a)	0	0	0	0	.654	88,498,678
21. Issued during year .....	.9	3,120,001			0	0	0	0	.9	3,120,001
22. Other changes to in force (Net) .....	(32)	(13,663,153)							(32)	(13,663,153)
23. In force December 31 of current year .....	631	77,955,526	0	(a)	0	0	0	0	631	77,955,526

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	3,030	3,050			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	57	17			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	3,087	3,067	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,087	3,067	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	229,796					229,796
2. Annuity considerations .....	1,148,672					1,148,672
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	1,378,467	0		0	0	1,378,467
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	1,000					1,000
10. Matured endowments .....						0
11. Annuity benefits .....	100,841					100,841
12. Surrender values and withdrawals for life contracts .....	5,339					5,339
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	107,180	0		0	0	107,180
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.2	.1,000							.2	.1,000
Settled during current year:										
18.1 By payment in full .....	.2	.1,000							.2	.1,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	.2	.1,000	0	0	0	0	0	0	.2	.1,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	.2	.1,000	0	0	0	0	0	0	.2	.1,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	226	46,778,132	0	(a)	0	0	0	0	226	46,778,132
21. Issued during year .....	33	8,305,012	0		0	0	0	0	.33	8,305,012
22. Other changes to in force (Net) .....	(23)	(2,204,042)							(23)	(2,204,042)
23. In force December 31 of current year .....	236	52,879,102	0	(a)	0	0	0	0	236	52,879,102

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,802	4,822			.148
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	.29	.8			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,831	4,830	0	0	.148
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,831	4,830	0	0	.148

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.70,348				.3,242	.73,590
2. Annuity considerations .....			XXX			0
3. Deposit-type contract funds .....					XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	70,348	0		0	3,242	.73,590
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	.0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	.0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						.3,295
10. Matured endowments .....						.638
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	.116					.4,132
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	.0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	116	0		0	8,065	8,180
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	.0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	.0	.0	0	.0	0	.0	.0	.0	0	.0
17. Incurred during current year .....							.8	.3,933	.8	.3,933
Settled during current year:										
18.1 By payment in full .....							.8	.3,933	.8	.3,933
18.2 By payment on compromised claims .....									0	.0
18.3 Totals paid .....	.0	.0	0	.0	0	.0	.8	.3,933	.8	.3,933
18.4 Reduction by compromise .....									0	.0
18.5 Amount rejected .....									0	.0
18.6 Total settlements .....	.0	.0	0	.0	0	.0	.8	.3,933	.8	.3,933
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	152	5,067,031	0	(a)	0	0	734	753,381	886	5,820,412
21. Issued during year .....	.2	350,000			0				2	350,000
22. Other changes to in force (Net) .....	(18)	(1,087,812)					(40)	(52,778)	(58)	(1,140,590)
23. In force December 31 of current year .....	136	4,329,219	0	(a)	0	0	694	700,603	830	5,029,822

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	443	.681			
25.3 Non-renewable for stated reasons only (b) .....	11	4			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.454	.684	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	454	.684	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		5,410,316				5,410,316
2. Annuity considerations		4,071,328				4,071,328
3. Deposit-type contract funds		41,185	XXX		XXX	41,185
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		9,522,829	0	0	0	9,522,829
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		5,380,713				5,380,713
10. Matured endowments		10,668				10,668
11. Annuity benefits		2,359,633				2,359,633
12. Surrender values and withdrawals for life contracts		653,546				653,546
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		8,404,560	0	0	0	8,404,560
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	54	5,391,381							54	5,391,381
Settled during current year:										
18.1 By payment in full	54	5,391,381							54	5,391,381
18.2 By payment on compromised claims									0	0
18.3 Totals paid	54	5,391,381	0	0	0	0	0	0	54	5,391,381
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	54	5,391,381	0	0	0	0	0	0	54	5,391,381
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	7,339	1,364,865,043	0	(a)	0	0	0	0	7,339	1,364,865,043
21. Issued during year	622	132,188,063							622	132,188,063
22. Other changes to in force (Net)	(954)	(142,934,803)							(954)	(142,934,803)
23. In force December 31 of current year	7,007	1,354,118,303	0	(a)	0	0	0	0	7,007	1,354,118,303

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	1,054	1,054		1,714	1,714
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	165,144	174,937		59,672	(2,209)
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	10	3			
25.5 All other (b)	2,386	700		9,417	(5,018)
25.6 Totals (sum of Lines 25.1 to 25.5)	167,540	175,641	0	69,088	(7,227)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	168,594	176,695	0	70,802	(5,513)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	11,595,186					11,595,186
2. Annuity considerations .....	756,084					756,084
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	12,351,270		0	0	0	12,351,270
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		3,002,807				3,002,807
9. Death benefits .....	3,002,807					3,002,807
10. Matured endowments .....						0
11. Annuity benefits .....	252,856					252,856
12. Surrender values and withdrawals for life contracts .....	1,253,563					1,253,563
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	4,509,226		0	0	0	4,509,226
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	96	3,002,807							.96	3,002,807
Settled during current year:										
18.1 By payment in full .....	96	3,002,807							.96	3,002,807
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	96	3,002,807	0	0	0	0	0	.96	3,002,807	
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	96	3,002,807	0	0	0	0	0	.96	3,002,807	
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	20,425	3,336,790,170	0	(a)	0	0	0	0	20,425	3,336,790,170
21. Issued during year .....	2,862	458,548,760							2,862	458,548,760
22. Other changes to in force (Net) .....	(2,224)	(202,548,665)							(2,224)	(202,548,665)
23. In force December 31 of current year .....	21,063	3,592,790,265	0	(a)	0	0	0	0	21,063	3,592,790,265

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....	11,129	11,028		.95,172	143,708
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....	17	17			
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	388,806	406,957		.51,040	(69,093)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	792	261			
25.5 All other (b) .....	1,052	309			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	390,650	407,526		.51,040	(69,093)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	401,796	418,571		146,212	74,615

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



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**DIRECT BUSINESS IN THE STATE OF Guam**

DURING THE YEAR 2011

## LIFE INSURANCE

NAIC Group Code 00244

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						.0
2. Annuity considerations						.0
3. Deposit-type contract funds			.XXX		.XXX	.0
4. Other considerations						.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0	0
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						.0
6.2 Applied to pay renewal premiums						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						.0
6.4 Other						.0
6.5 Totals (Sum of Lines 6.1 to 6.4)	.0	.0	.0	.0	.0	0
Annuities:						
7.1 Paid in cash or left on deposit						.0
7.2 Applied to provide paid-up annuities						.0
7.3 Other						.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	.0	.0	.0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						.0
10. Matured endowments						.0
11. Annuity benefits						.0
12. Surrender values and withdrawals for life contracts						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	.0	.0	.0	.0	.0	0
14. All other benefits, except accident and health						.0
15. Totals	0	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	.0	.0	.0	.0	.0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	..0	..0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										0
Settled during current year: .....										0
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	..0	..0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	..0	..0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	..0	..0	0	(a)	0	0	0	0	0	0
21. Issued during year .....										0
22. Other changes to in force (Net) .....										0
23. In force December 31 of current year .....	0	0	0	(a)	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ ..... , current year \$ .....  
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guarantee renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only .....					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5).....	.0	.0	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		.40,431				.40,431
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		40,431	0	0	0	40,431
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	.51	13,009,460	0	(a)	0	0	0	0	.51	13,009,460
21. Issued during year	.1	1,000,000	0		0	0	0	0	1	1,000,000
22. Other changes to in force (Net)	(8)	(2,047,879)	0						(8)	(2,047,879)
23. In force December 31 of current year	44	11,961,581	0	(a)	0	0	0	0	44	11,961,581

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	584	.588			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	584	.588	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	584	.588	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		558,493				558,493
2. Annuity considerations .....		301,578				301,578
3. Deposit-type contract funds .....			XXX			0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		860,071	0	0	0	860,071
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		52,180				52,180
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		52,180	0	0	0	52,180
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										0
Settled during current year:										0
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
	20. In force December 31, prior year .....	752	254,244,392	0	(a)	0	0	0	752	254,244,392
21. Issued during year .....	83	28,320,021		0		0	0	0	.83	28,320,021
22. Other changes to in force (Net) .....	(48)	(17,556,645)		0					(48)	(17,556,645)
23. In force December 31 of current year .....	787	265,007,768	0	(a)	0	0	0	0	787	265,007,768

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,668	4,699			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,668	4,699	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,668	4,699	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		16,014,090			178	16,014,268
2. Annuity considerations		7,204,561				7,204,561
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		23,218,650	0	0	178	23,218,828
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		10,553,073			2,000	10,553,073
10. Matured endowments					8,170	8,170
11. Annuity benefits		4,202,431				4,202,431
12. Surrender values and withdrawals for life contracts		2,666,150				2,666,150
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		17,421,655	0	0	10,170	17,431,825
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	111	10,553,073					16	10,170	127	10,563,243
Settled during current year:										
18.1 By payment in full	111	10,553,073					16	10,170	127	10,563,243
18.2 By payment on compromised claims								0	0	0
18.3 Totals paid	111	10,553,073	0	0	0	0	16	10,170	127	10,563,243
18.4 Reduction by compromise								0	0	0
18.5 Amount rejected								0	0	0
18.6 Total settlements	111	10,553,073	0	0	0	0	16	10,170	127	10,563,243
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	27,454	5,219,100,241	0	(a)	0	30,000	6,042	382,016	33,497	5,219,512,257
21. Issued during year	2,050	386,275,149			1				2,050	386,275,149
22. Other changes to in force (Net)	(1,621)	(238,565,906)					(176)	(8,170)	(1,797)	(238,574,076)
23. In force December 31 of current year	27,883	5,366,809,484	0	(a)	0	30,000	5,866	373,846	33,750	5,367,213,330

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	2,482	2,460			
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	1,766	1,766			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	522,358	599,001		137,283	7,744
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	1,120	369			
25.5 All other (b)	765	224		1,061	(566)
25.6 Totals (sum of Lines 25.1 to 25.5)	524,242	599,594	0	138,345	7,178
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	528,491	603,820	0	138,345	7,178

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		15,293,370			4,930	15,298,300
2. Annuity considerations		5,394,040				5,394,040
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		20,687,410	0	0	4,930	20,692,340
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		8,368,258			120,878	3,851
10. Matured endowments		2,897				2,897
11. Annuity benefits		3,620,535			5,465	3,626,000
12. Surrender values and withdrawals for life contracts		1,920,828				7,722
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		13,912,518	0	126,343	11,573	14,050,434
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	115	8,371,155			1	120,878	.8	3,851	124	8,495,884
Settled during current year:										
18.1 By payment in full	115	8,371,155			1	120,878	.8	3,851	124	8,495,884
18.2 By payment on compromised claims									0	0
18.3 Totals paid	115	8,371,155	0	0	1	120,878	.8	3,851	124	8,495,884
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	115	8,371,155	0	0	1	120,878	.8	3,851	124	8,495,884
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	29,571	4,903,846,871	0	(a)	0	40,000	3,100	2,864,275	32,671	4,906,751,146
21. Issued during year	3,358	430,279,548							3,358	430,279,548
22. Other changes to in force (Net)	(2,536)	(285,624,733)					(168)	(201,368)	(2,704)	(285,826,101)
23. In force December 31 of current year	30,393	5,048,501,686	0	(a)	0	40,000	2,932	2,662,907	33,325	5,051,204,593

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	513	508			
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	68	68			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	344	129			
25.2 Guaranteed renewable (b)	419,981	462,136			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	111	37			
25.5 All other (b)	2,276	668			
25.6 Totals (sum of Lines 25.1 to 25.5)	422,712	462,970			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	423,292	463,546			

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		8,614,048				8,614,048
2. Annuity considerations		26,532,547				26,532,547
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		35,146,594	0	0	0	35,146,594
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		3,109,581				3,109,581
10. Matured endowments						0
11. Annuity benefits		15,958,017				15,958,017
12. Surrender values and withdrawals for life contracts		1,387,461				1,387,461
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		20,455,059	0	0	0	20,455,059
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	26	3,109,581							26	3,109,581
Settled during current year:										
18.1 By payment in full	26	3,109,581							26	3,109,581
18.2 By payment on compromised claims									0	0
18.3 Totals paid	26	3,109,581	0	0	0	0	0	0	26	3,109,581
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	26	3,109,581	0	0	0	0	0	0	26	3,109,581
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	12,637	3,150,697,889	0	(a)	0	20,000	0	0	12,637	3,150,717,889
21. Issued during year	1,590	323,188,352							1,590	323,188,352
22. Other changes to in force (Net)	(560)	(120,180,337)							(560)	(120,180,337)
23. In force December 31 of current year	13,667	3,353,705,904	0	(a)	0	20,000	0	0	13,667	3,353,725,904

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ ,

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ ,

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ ,

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	44	44			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	111,095	115,329			2,580
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	16,429	5,412		4,308	(2,380)
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	127,524	120,741	0	4,308	200
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	127,568	120,785	0	4,308	200

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,777,290				2,777,290
2. Annuity considerations		1,329,529				1,329,529
3. Deposit-type contract funds		198,702	XXX		XXX	198,702
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		4,305,520	0	0	0	4,305,520
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		362,106				362,106
10. Matured endowments						0
11. Annuity benefits		391,162				391,162
12. Surrender values and withdrawals for life contracts		114,691				114,691
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		867,959	0	0	0	867,959
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	12	362,106							12	362,106
Settled during current year:										
18.1 By payment in full	12	362,106							12	362,106
18.2 By payment on compromised claims									0	0
18.3 Totals paid	12	362,106	0	0	0	0	0	0	12	362,106
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	12	362,106	0	0	0	0	0	0	12	362,106
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	2,785	848,645,921	0	(a)	0	0	0	0	2,785	848,645,921
21. Issued during year	310	103,925,807			0	0	0	0	310	103,925,807
22. Other changes to in force (Net)	(166)	(43,733,386)							(166)	(43,733,386)
23. In force December 31 of current year	2,929	908,838,342	0	(a)	0	0	0	0	2,929	908,838,342

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	39,731	44,480		12,870	(34,646)
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	39,731	44,480	0	12,870	(34,646)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	39,731	44,480	0	12,870	(34,646)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	8,208,761				4,249	8,213,010
2. Annuity considerations .....	867,973					867,973
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	9,076,734	0		0	4,249	9,080,983
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	2,122,620				1,000	2,123,620
10. Matured endowments .....						0
11. Annuity benefits .....	207,943					207,943
12. Surrender values and withdrawals for life contracts .....	873,051				7,265	880,315
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	3,203,614	0		0	8,265	3,211,879
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	95	2,122,620					2	1,000	.97	2,123,620
Settled during current year:										
18.1 By payment in full .....	95	2,122,620					2	1,000	.97	2,123,620
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	95	2,122,620	0	0	0	0	2	1,000	.97	2,123,620
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	95	2,122,620	0	0	0	0	2	1,000	.97	2,123,620
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	14,676	2,683,797,754	0	(a)	0	0	447	478,237	15,123	2,684,275,991
21. Issued during year .....	1,513	268,247,142							1,513	268,247,142
22. Other changes to in force (Net) .....	(1,433)	(186,836,920)					(24)	(33,503)	(1,457)	(186,870,423)
23. In force December 31 of current year .....	14,756	2,765,207,976	0	(a)	0	0	423	444,734	15,179	2,765,652,710

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	522	522			
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	.263,147	.283,122		.56,470	.108,563
25.3 Non-renewable for stated reasons only (b) .....	(850)			.62,150	(58,763)
25.4 Other accident only .....	.449	.148			
25.5 All other (b) .....	3,351	983		1,197	(638)
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.266,097	.284,253	0	119,818	.49,162
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	266,620	284,776	0	119,818	.49,162

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		408,732				408,732
2. Annuity considerations .....		160,000				160,000
3. Deposit-type contract funds .....			XXX			0
4. Other considerations .....				XXX		0
5. Totals (Sum of Lines 1 to 4) .....		568,732	0	0	0	568,732
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....		54,747				54,747
10. Matured endowments .....						0
11. Annuity benefits .....		20,000				20,000
12. Surrender values and withdrawals for life contracts .....		16,259				16,259
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		91,005	0	0	0	91,005
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.3	54,747							.3	54,747
Settled during current year:										
18.1 By payment in full .....	.3	54,747							.3	54,747
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	.3	54,747	0	0	0	0	0	0	.3	54,747
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	.3	54,747	0	0	0	0	0	0	.3	54,747
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	.430	49,451,327	0	(a)	0	0	0	0	.430	49,451,327
21. Issued during year .....	.608	28,984,100			0	0	0	0	.608	28,984,100
22. Other changes to in force (Net) .....	(.68)	(6,646,402)							(.68)	(6,646,402)
23. In force December 31 of current year .....	970	71,789,025	0	(a)	0	0	0	0	970	71,789,025

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	1,166	1,174			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	.7	.2			
25.5 All other (b) .....	.82	.24			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,255	1,201	0		
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,255	1,201	0		

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.40,350					.40,350
2. Annuity considerations .....			XXX		XXX	0
3. Deposit-type contract funds .....						0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	40,350	0		0	0	40,350
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....	7,833					7,833
12. Surrender values and withdrawals for life contracts .....	6,894					6,894
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	14,727	0		0	0	14,727
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										0
Settled during current year:										0
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	.55	7,083,484	0	(a)	0	0	0	0	.55	.7,083,484
21. Issued during year .....	.7	3,210,001	0		0	0	0	0	7	3,210,001
22. Other changes to in force (Net) .....	(28)	(1,675,241)	0		0	0	0	0	(28)	(1,675,241)
23. In force December 31 of current year .....	34	8,618,244	0	(a)	0	0	0	0	34	8,618,244

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,214,031				.810	2,214,841
2. Annuity considerations .....	380,968					380,968
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	2,594,999	0		0	.810	2,595,809
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		1,137,870				1,000
9. Death benefits .....						1,138,870
10. Matured endowments .....						0
11. Annuity benefits .....	202,535					202,535
12. Surrender values and withdrawals for life contracts .....	.89,943				3,990	.93,933
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	1,430,348	0		0	4,990	1,435,338
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	11	1,137,870					2	1,000	13	1,138,870
Settled during current year:										
18.1 By payment in full .....	11	1,137,870					2	1,000	13	1,138,870
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	11	1,137,870	0	0	0	0	2	1,000	13	1,138,870
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	11	1,137,870	0	0	0	0	2	1,000	13	1,138,870
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	2,459	848,542,609	0	(a)	0	0	245	264,124	2,704	848,806,733
21. Issued during year .....	244	111,658,869							244	111,658,869
22. Other changes to in force (Net) .....	(127)	(48,136,012)					(14)	(18,503)	(141)	(48,154,515)
23. In force December 31 of current year .....	2,576	912,065,466	0	(a)	0	0	231	245,621	2,807	912,311,087

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	.44,789	.49,735			.503
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	.178	.52			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.44,967	.49,787	0	0	.503
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	44,967	49,787	0	0	.503

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		417,467				417,467
2. Annuity considerations						0
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		417,467	0	0	0	417,467
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		7,293				7,293
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		7,293	0	0	0	7,293
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	341	158,923,980	0	(a)	0	0	0	0	341	158,923,980
21. Issued during year	66	22,221,008	0		0	0	0	0	66	22,221,008
22. Other changes to in force (Net)	(29)	(13,758,488)							(29)	(13,758,488)
23. In force December 31 of current year	378	167,386,500	0	(a)	0	0	0	0	378	167,386,500

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	.8	.3			
25.2 Guaranteed renewable (b)	3,950	4,600		6,218	(7,518)
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	21	.7			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	3,980	4,610	0	6,218	(7,518)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,980	4,610	0	6,218	(7,518)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		11,577,571			27,918	11,605,489
2. Annuity considerations		9,205,947				9,205,947
3. Deposit-type contract funds		40,386	XXX		XXX	40,386
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		20,823,904	0	0	27,918	20,851,822
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		2,664,429			.54,827	.2,719,256
10. Matured endowments		1,000			1,500	.2,500
11. Annuity benefits		3,845,515				3,845,515
12. Surrender values and withdrawals for life contracts		864,039			.60,756	.924,796
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		7,374,984	0	0	117,083	7,492,067
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.289	2,665,429					132	.56,327	421	.2,721,756
Settled during current year:										
18.1 By payment in full	.289	2,665,429					132	.56,327	421	.2,721,756
18.2 By payment on compromised claims								0	0	0
18.3 Totals paid	.289	2,665,429	0	0	0	0	132	.56,327	421	.2,721,756
18.4 Reduction by compromise								0	0	0
18.5 Amount rejected								0	0	0
18.6 Total settlements	.289	2,665,429	0	0	0	0	132	.56,327	421	.2,721,756
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	18,518	4,240,293,159	0	(a)	0	0	3,248	3,525,428	21,766	4,243,818,587
21. Issued during year	1,346	381,796,911							1,346	381,796,911
22. Other changes to in force (Net)	(1,150)	(204,897,482)					(178)	(250,693)	(1,328)	(205,148,175)
23. In force December 31 of current year	18,714	4,417,192,588	0	(a)	0	0	3,070	3,274,735	21,784	4,420,467,323

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	89	89			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	96	36			
25.2 Guaranteed renewable (b)	468,130	502,674			
25.3 Non-renewable for stated reasons only (b)	1,463	429			
25.4 Other accident only	231	76			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	469,920	503,216			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	470,009	503,304			

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,778,157				7,778,157
2. Annuity considerations		18,804,396				18,804,396
3. Deposit-type contract funds		325,118	XXX		XXX	325,118
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		26,907,671	0	0	0	26,907,671
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		3,658,147				3,658,147
10. Matured endowments						0
11. Annuity benefits		1,710,896				1,710,896
12. Surrender values and withdrawals for life contracts		.49,859				.49,859
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		5,418,902	0	0	0	5,418,902
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	11	3,658,147							11	3,658,147
Settled during current year:										
18.1 By payment in full	11	3,658,147							11	3,658,147
18.2 By payment on compromised claims									0	0
18.3 Totals paid	11	3,658,147	0	0	0	0	0	0	11	3,658,147
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	11	3,658,147	0	0	0	0	0	0	11	3,658,147
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					<b>No. of Policies</b>					
20. In force December 31, prior year	10,163	3,596,982,141	0	(a)	0	0	0	0	10,163	3,596,982,141
21. Issued during year	1,065	409,764,460			0	0	0	0	1,065	409,764,460
22. Other changes to in force (Net)	(462)	(163,922,766)							(462)	(163,922,766)
23. In force December 31 of current year	10,766	3,842,823,835	0	(a)	0	0	0	0	10,766	3,842,823,835

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	11,276	11,173		19,308	29,154
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	201	201			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	.87,252	.90,480		.61,071	.29,601
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	11	3			
25.6 Totals (sum of Lines 25.1 to 25.5)	.87,263	.90,483	0	.61,071	.29,601
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	98,740	101,857	0	80,379	58,755

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		221,953				221,953
2. Annuity considerations		1,350				1,350
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		223,303	0	0	0	223,303
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		94,985				94,985
9. Death benefits						
10. Matured endowments						0
11. Annuity benefits		1,329				1,329
12. Surrender values and withdrawals for life contracts		10,145				10,145
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		106,459	0	0	0	106,459
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	16	94,985							16	94,985
Settled during current year:										
18.1 By payment in full	16	94,985							16	94,985
18.2 By payment on compromised claims									0	0
18.3 Totals paid	16	94,985	0	0	0	0	0	0	16	94,985
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	16	94,985	0	0	0	0	0	0	16	94,985
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	481	29,823,801	0	(a)	0	0	0	0	481	29,823,801
21. Issued during year	75	10,184,749	0		0	0	0	0	75	10,184,749
22. Other changes to in force (Net)	(122)	(6,831,790)							(122)	(6,831,790)
23. In force December 31 of current year	434	33,176,760	0	(a)	0	0	0	0	434	33,176,760

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,528	1,629			
25.3 Non-renewable for stated reasons only (b)	31	10			
25.4 Other accident only	202	59			
25.5 All other (b)	1,761	1,699	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	1,761	1,699	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,761	1,699	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,863,345				23	6,863,368
2. Annuity considerations	1,539,074					1,539,074
3. Deposit-type contract funds	28,615		XXX			28,615
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	8,431,035		0	0	23	8,431,057
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0		0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0		0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits	3,342,945					3,342,945
10. Matured endowments						0
11. Annuity benefits	879,016					879,016
12. Surrender values and withdrawals for life contracts	734,474					734,474
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health						0
15. Totals	4,956,435		0	0	0	4,956,435
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	43	3,342,945							43	3,342,945
Settled during current year:										
18.1 By payment in full	43	3,342,945							43	3,342,945
18.2 By payment on compromised claims									0	0
18.3 Totals paid	43	3,342,945	0	0	0	0	0	0	43	3,342,945
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	43	3,342,945	0	0	0	0	0	0	43	3,342,945
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	10,763	2,627,352,865	0	(a)	0	0	2	2,252	10,765	2,627,355,117
21. Issued during year	945	244,726,642							945	244,726,642
22. Other changes to in force (Net)	(656)	(119,930,638)							(158)	(656)
23. In force December 31 of current year	11,052	2,752,148,869	0	(a)	0	0	2	2,094	11,054	2,752,150,963

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ ,

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ ,

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ ,

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	68	68			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	.76,870	.79,822			.1,884
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	229	67			
25.6 Totals (sum of Lines 25.1 to 25.5)	.77,099	.79,889	0	0	.1,884
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	77,166	79,957	0	0	.1,884

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	807,980					807,980
2. Annuity considerations .....	91,000					91,000
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	898,980	0		0	0	898,980
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....	148,844					148,844
12. Surrender values and withdrawals for life contracts .....	1,842					1,842
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	150,685	0		0	0	150,685
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										0
Settled during current year:										0
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
	20. In force December 31, prior year .....	829	305,410,344	0	(a)	0	0	0	829	305,410,344
21. Issued during year .....	82	27,753,402		0		0	0	0	82	27,753,402
22. Other changes to in force (Net) .....	(51)	(18,573,634)		0					(51)	(18,573,634)
23. In force December 31 of current year .....	860	314,590,112	0	(a)	0	0	0	0	860	314,590,112

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	6,563	6,624			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	34	10			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	6,597	6,634	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	6,597	6,634	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,408,662					1,408,662
2. Annuity considerations .....	1,249,417					1,249,417
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	2,658,079	0	0	0	0	2,658,079
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		437,878				437,878
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....	501,215					501,215
12. Surrender values and withdrawals for life contracts .....	10,937					10,937
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	950,030	0	0	0	0	950,030
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	4	437,878					4		4	437,878
Settled during current year:										
18.1 By payment in full .....	4	437,878					4		4	437,878
18.2 By payment on compromised claims .....							0		0	0
18.3 Totals paid .....	4	437,878	0	0	0	0	4		4	437,878
18.4 Reduction by compromise .....							0		0	0
18.5 Amount rejected .....							0		0	0
18.6 Total settlements .....	4	437,878	0	0	0	0	4		4	437,878
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	1,607	439,460,920	0	(a)	0	0	0	0	1,607	439,460,920
21. Issued during year .....	209	49,702,655			0	0	0	0	209	49,702,655
22. Other changes to in force (Net) .....	(99)	(23,035,288)							(99)	(23,035,288)
23. In force December 31 of current year .....	1,717	466,128,287	0	(a)	0	0	0	0	1,717	466,128,287

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	10,902	12,859			344
25.3 Non-renewable for stated reasons only (b) .....	1,019	336			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	11,921	13,195	0	0	344
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	11,921	13,195	0	0	344

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		282,198				282,198
2. Annuity considerations		9,690				9,690
3. Deposit-type contract funds		30,499	XXX		XXX	30,499
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		322,387	0	0	0	322,387
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		299,795				299,795
10. Matured endowments						0
11. Annuity benefits		28,888				28,888
12. Surrender values and withdrawals for life contracts		10,162				10,162
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		338,845	0	0	0	338,845
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1	299,795							1	299,795
Settled during current year:										
18.1 By payment in full	1	299,795							1	299,795
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	299,795	0	0	0	0	0	0	1	299,795
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	299,795	0	0	0	0	0	0	1	299,795
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	210	36,481,268	0	(a)	0	0	0	0	210	36,481,268
21. Issued during year	10	12,468,323			0	0	0	0	10	12,468,323
22. Other changes to in force (Net)	(38)	(5,833,529)							(38)	(5,833,529)
23. In force December 31 of current year	182	43,116,062	0	(a)	0	0	0	0	182	43,116,062

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	10,447	10,527			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	820	241		881	(470)
25.6 Totals (sum of Lines 25.1 to 25.5)	11,267	10,768	0	881	(470)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	11,267	10,768	0	881	(470)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		317,681				317,681
2. Annuity considerations		450				450
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		318,131	0	0	0	318,131
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		260,000				260,000
10. Matured endowments						0
11. Annuity benefits		2,556				2,556
12. Surrender values and withdrawals for life contracts		1,708				1,708
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		264,264	0	0	0	264,264
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.3	260,000							.3	260,000
Settled during current year:										
18.1 By payment in full	.3	260,000							.3	260,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.3	260,000	0	0	0	0	0	0	.3	260,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	.3	260,000	0	0	0	0	0	0	.3	260,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	215	73,758,554	0	(a)	0	0	0	0	215	73,758,554
21. Issued during year	30	13,190,002	0		0	0	0	0	30	13,190,002
22. Other changes to in force (Net)	(32)	(6,482,886)							(32)	(6,482,886)
23. In force December 31 of current year	213	80,465,670	0	(a)	0	0	0	0	213	80,465,670

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	5,775	6,243			.89
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	5,775	6,243	0	0	.89
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,775	6,243	0	0	.89

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		511,829				511,829
2. Annuity considerations		236,039				236,039
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		747,869	0	0	0	747,869
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		29,054				29,054
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		423,409				423,409
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		452,463	0	0	0	452,463
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.7	29,054							.7	29,054
Settled during current year:										
18.1 By payment in full	.7	29,054							.7	29,054
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.7	29,054	0	0	0	0	0	0	.7	29,054
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	.7	29,054	0	0	0	0	0	0	.7	29,054
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	310	54,528,938	0	(a)	0	0	0	0	310	54,528,938
21. Issued during year	28	7,505,000	0		0	0	0	0	28	7,505,000
22. Other changes to in force (Net)	(57)	(20,864,246)							(57)	(20,864,246)
23. In force December 31 of current year	281	41,169,692	0	(a)	0	0	0	0	281	41,169,692

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ ,

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ ,

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ ,

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	.189	.189			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,511	1,593			
25.3 Non-renewable for stated reasons only (b)	.17	.6			
25.4 Other accident only	.331	.97			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,859	1,696			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,048	1,885			

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		364,380				364,380
2. Annuity considerations		308,280				308,280
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		672,660	0	0	0	672,660
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		6,654				6,654
10. Matured endowments						0
11. Annuity benefits		57,039				57,039
12. Surrender values and withdrawals for life contracts		6,200				6,200
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		69,893	0	0	0	69,893
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.3	.6,654							.3	.6,654
Settled during current year:										
18.1 By payment in full	.3	.6,654							.3	.6,654
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.3	.6,654	0	0	0	0	0	0	.3	.6,654
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	.3	.6,654	0	0	0	0	0	0	.3	.6,654
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	.556	47,499,996	0	(a)	0	0	0	0	.556	47,499,996
21. Issued during year	.225	14,977,291			0	0	0	0	.225	14,977,291
22. Other changes to in force (Net)	(144)	(7,937,341)							(144)	(7,937,341)
23. In force December 31 of current year	637	54,539,946	0	(a)	0	0	0	0	637	54,539,946

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	7,443	7,672			224
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	7,443	7,672	0	0	224
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,443	7,672	0	0	224

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		327,629				327,629
2. Annuity considerations		6,000				6,000
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		333,629	0	0	0	333,629
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		2,500				2,500
10. Matured endowments						0
11. Annuity benefits		.99,536				.99,536
12. Surrender values and withdrawals for life contracts		.43,484				.43,484
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		145,521	0	0	0	145,521
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.3	.2,500							.3	.2,500
Settled during current year:										
18.1 By payment in full	.3	.2,500							.3	.2,500
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.3	.2,500	0	0	0	0	0	0	.3	.2,500
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	.3	.2,500	0	0	0	0	0	0	.3	.2,500
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	184	.24,186,761	0	(a)	0	0	0	0	184	.24,186,761
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net)	(104)	(19,450,144)							(104)	(19,450,144)
23. In force December 31 of current year	80	4,736,617	0	(a)	0	0	0	0	80	4,736,617

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	3,760	5,731			(2,503)
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	10	.3			(312)
25.6 Totals (sum of Lines 25.1 to 25.5)	3,770	5,734	0	.586	(2,815)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,770	5,734	0	.586	(2,815)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	10,714,257					10,714,257
2. Annuity considerations .....	474,726					474,726
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	11,188,982	0		0		11,188,982
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0		0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0		0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0		0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	3,888,391					3,888,391
10. Matured endowments .....	4,267					4,267
11. Annuity benefits .....	269,585					270,831
12. Surrender values and withdrawals for life contracts .....	772,288			1,246		772,288
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0		0
14. All other benefits, except accident and health .....						0
15. Totals .....	4,934,530	0		1,246		4,935,776
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0		0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0		0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	136	3,892,657							136	3,892,657
Settled during current year:										
18.1 By payment in full .....	136	3,892,657							136	3,892,657
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	136	3,892,657	0	0	0	0	0	0	136	3,892,657
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	136	3,892,657	0	0	0	0	0	0	136	3,892,657
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	17,116	3,166,662,199	0	(a)	0	0	0	0	17,116	3,166,662,199
21. Issued during year .....	1,819	342,696,918			0	0	0	0	1,819	342,696,918
22. Other changes to in force (Net) .....	(1,798)	(194,531,409)							(1,798)	(194,531,409)
23. In force December 31 of current year .....	17,137	3,314,827,708	0	(a)	0	0	0	0	17,137	3,314,827,708

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	293,875	322,027		159,284	65,323
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	.419	.138			
25.5 All other (b) .....	2,034	.597		.170	(91)
25.6 Totals (sum of Lines 25.1 to 25.5) .....	296,328	322,762	0	159,454	65,233
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	296,328	322,762	0	159,454	65,233

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,201,956					1,201,956
2. Annuity considerations .....	829,200					829,200
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	2,031,157	0	0	0	0	2,031,157
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		54,155				54,155
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....	164,979					164,979
12. Surrender values and withdrawals for life contracts .....	226					226
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	219,360	0	0	0	0	219,360
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.3	54,155							.3	54,155
Settled during current year:										
18.1 By payment in full .....	.3	54,155							.3	54,155
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	.3	54,155	0	0	0	0	0	0	.3	54,155
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	.3	54,155	0	0	0	0	0	0	.3	54,155
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	1,465	576,019,392	0	(a)	0	0	0	0	1,465	576,019,392
21. Issued during year .....	.155	66,845,026							.155	66,845,026
22. Other changes to in force (Net) .....	(68)	(41,683,970)							(68)	(41,683,970)
23. In force December 31 of current year .....	1,552	601,180,448	0	(a)	0	0	0	0	1,552	601,180,448

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....	3,104	3,076		5,049	7,623
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,223	4,252			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,223	4,252	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,327	7,328	0	5,049	7,623

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



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

## DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2011

## LIFE INSURANCE

NAIC Group Code 00244

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						.0
2. Annuity considerations						.0
3. Deposit-type contract funds			.XXX		.XXX	.0
4. Other considerations						.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0	0
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						.0
6.2 Applied to pay renewal premiums						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						.0
6.4 Other						.0
6.5 Totals (Sum of Lines 6.1 to 6.4)	.0	.0	.0	.0	.0	0
Annuities:						
7.1 Paid in cash or left on deposit						.0
7.2 Applied to provide paid-up annuities						.0
7.3 Other						.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	.0	.0	.0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						.0
10. Matured endowments						.0
11. Annuity benefits						.0
12. Surrender values and withdrawals for life contracts						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	.0	.0	.0	.0	.0	0
14. All other benefits, except accident and health						.0
15. Totals	0	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	.0	.0	.0	.0	.0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	..0	..0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										0
Settled during current year: .....										0
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	..0	..0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	..0	..0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	..0	..0	0	(a)	0	0	0	0	0	0
21. Issued during year .....										0
22. Other changes to in force (Net) .....										0
23. In force December 31 of current year .....	0	0	0	(a)	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ ..... , current year \$ .....  
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....  
.....

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guarantee renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only .....					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5).....	.0	.0	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	42,066,477			107,141	68,218	42,241,836
2. Annuity considerations	6,702,991					6,702,991
3. Deposit-type contract funds	1,394,459		XXX		XXX	1,394,459
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	50,163,926		0	107,141	68,218	50,339,285
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0		0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0		0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits	25,896,402			1,085,175	111,870	27,093,447
10. Matured endowments	15,715				15,329	31,045
11. Annuity benefits	6,313,014			93,452		6,406,466
12. Surrender values and withdrawals for life contracts	6,541,009				203,665	6,744,674
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health						0
15. Totals	38,766,140		0	1,178,627	330,865	40,275,632
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1,116	25,912,117			6	1,085,175	513	127,200	1,635	27,124,492
Settled during current year:										
18.1 By payment in full	1,116	25,912,117			6	1,085,175	513	127,200	1,635	27,124,492
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1,116	25,912,117	0	0	6	1,085,175	513	127,200	1,635	27,124,492
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1,116	25,912,117	0	0	6	1,085,175	513	127,200	1,635	27,124,492
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	81,220	13,875,526,911	0	(a)	0	1,922,694,788	12,022	13,001,542	93,249	15,811,223,241
21. Issued during year	4,869	1,090,401,913				17,034,500			4,869	1,107,436,413
22. Other changes to in force (Net)	(4,138)	(400,525,944)			(1)	20,708,305	(661)	(919,652)	(4,800)	(380,737,291)
23. In force December 31 of current year	81,951	14,565,402,880	0	(a)	0	1,960,437,593	11,361	12,081,890	93,318	16,537,922,363

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)	26,114	16,463		904,982	1,366,502
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	1,426	1,426		1,094	1,094
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	266	100			
25.2 Guaranteed renewable (b)	1,413,798	1,527,935		850,166	351,480
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	6,462	2,129		6	(3)
25.5 All other (b)	12,904	3,786		14,421	(7,685)
25.6 Totals (sum of Lines 25.1 to 25.5)	1,433,430	1,533,949	0	864,593	343,791
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,460,969	1,551,837	0	1,770,670	1,711,387

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	320,275					320,275
2. Annuity considerations .....	90,000					90,000
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	410,275	0		0		410,275
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0		0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0		0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0		0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		97,810				97,810
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....	44,087					44,087
12. Surrender values and withdrawals for life contracts .....	50,756					50,756
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0		0
14. All other benefits, except accident and health .....						0
15. Totals .....	192,654	0		0		192,654
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0		0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0		0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	11	97,810							11	97,810
Settled during current year:										
18.1 By payment in full .....	11	97,810							11	97,810
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	11	97,810	0	0	0	0	0	0	11	97,810
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	11	97,810	0	0	0	0	0	0	11	97,810
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	878	31,722,829	0	(a)	0	0	0	0	878	31,722,829
21. Issued during year .....	89	18,773,438			0	0	0	0	89	18,773,438
22. Other changes to in force (Net) .....	(175)	(10,817,367)							(175)	(10,817,367)
23. In force December 31 of current year .....	792	39,678,900	0	(a)	0	0	0	0	792	39,678,900

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		477,060				477,060
2. Annuity considerations		88,000				88,000
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		565,060	0	0	0	565,060
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits		147,032				147,032
12. Surrender values and withdrawals for life contracts		13,339				13,339
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		160,371	0	0	0	160,371
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	694	68,314,090	0	(a)	0	0	0	0	694	68,314,090
21. Issued during year	50	34,073,139			0	0	0	0	50	34,073,139
22. Other changes to in force (Net)	(60)	(5,513,381)							(60)	(5,513,381)
23. In force December 31 of current year	684	96,873,848	0	(a)	0	0	0	0	684	96,873,848

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	3,013	3,034			
25.3 Non-renewable for stated reasons only (b)	66	22			
25.4 Other accident only	25	7			
25.5 All other (b)	3,104	3,063	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	3,104	3,063	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,104	3,063	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	16,725,528				27,884	16,753,412
2. Annuity considerations .....	11,059,206					11,059,206
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	27,784,733	0		0	27,884	27,812,617
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	5,508,267				56,708	5,564,975
10. Matured endowments .....	7,575				10,905	18,480
11. Annuity benefits .....	4,013,096				7,431	4,020,527
12. Surrender values and withdrawals for life contracts .....	1,397,695					120,016
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	10,926,633	0		7,431	187,629	11,121,692
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	607	5,515,843					256	67,613	863	5,583,455
Settled during current year:										
18.1 By payment in full .....	607	5,515,843					256	67,613	863	5,583,455
18.2 By payment on compromised claims .....								0	0	0
18.3 Totals paid .....	607	5,515,843	0	0	0	0	256	67,613	863	5,583,455
18.4 Reduction by compromise .....								0	0	0
18.5 Amount rejected .....								0	0	0
18.6 Total settlements .....	607	5,515,843	0	0	0	0	256	67,613	863	5,583,455
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	30,912	5,479,654,849	0	(a)	0	0	5,824	5,488,793	36,736	5,485,143,642
21. Issued during year .....	2,315	527,300,124							2,315	527,300,124
22. Other changes to in force (Net) .....	(1,950)	(238,729,813)					(320)	(388,700)	(2,270)	(239,118,513)
23. In force December 31 of current year .....	31,277	5,768,225,160	0	(a)	0	0	5,504	5,100,093	36,781	5,773,325,253

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ .  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ .  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	1,314	1,314			
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	356,361	385,311		115,940	(16,693)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	320	105			
25.5 All other (b) .....	2,968	871		321	(171)
25.6 Totals (sum of Lines 25.1 to 25.5) .....	359,649	386,287	0	116,261	(16,864)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	360,964	387,601	0	116,261	(16,864)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		2,227				2,227
2. Annuity considerations .....			XXX		XXX	0
3. Deposit-type contract funds .....						0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		2,227	0	0	0	2,227
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
21. Issued during year .....										
22. Other changes to in force (Net) .....										0
23. In force December 31 of current year .....	0	0	0	0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.47,355					.47,355
2. Annuity considerations .....			XXX		XXX	0
3. Deposit-type contract funds .....						0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	47,355	0		0	0	47,355
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	9,232					9,232
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	9,232	0		0	0	9,232
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	42	11,129,358	0	(a)	0	75,000	0	0	.43	11,204,358
21. Issued during year .....	14	4,105,000			1				.14	4,105,000
22. Other changes to in force (Net) .....	(12)	(2,483,778)				(10,000)			(12)	(2,493,778)
23. In force December 31 of current year .....	44	12,750,580	0	(a)	0	65,000	0	0	45	12,815,580

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_, Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,782,872				2,782,872
2. Annuity considerations		112,330				112,330
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		2,895,202	0	0	0	2,895,202
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		1,620,323				1,620,323
10. Matured endowments		1,000				1,000
11. Annuity benefits		24,894				24,894
12. Surrender values and withdrawals for life contracts		294,678				294,678
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		1,940,894	0	0	0	1,940,894
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	27	1,621,323							27	1,621,323
Settled during current year:										
18.1 By payment in full	27	1,621,323							27	1,621,323
18.2 By payment on compromised claims									0	0
18.3 Totals paid	27	1,621,323	0	0	0	0	0	0	27	1,621,323
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	27	1,621,323	0	0	0	0	0	0	27	1,621,323
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	4,662	766,152,683	0	(a)	0	0	0	0	4,662	766,152,683
21. Issued during year	.830	64,575,936							.830	64,575,936
22. Other changes to in force (Net)	(471)	(49,411,327)							(471)	(49,411,327)
23. In force December 31 of current year	5,021	781,317,292	0	(a)	0	0	0	0	5,021	781,317,292

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ ,

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ ,

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ ,

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	112,939	117,454		.45,242	.48,217
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)	.393	.115		.500	(266)
25.6 Totals (sum of Lines 25.1 to 25.5)	113,331	117,570	0	.45,742	.47,951
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	113,331	117,570	0	.45,742	.47,951

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		731,246				731,246
2. Annuity considerations		1,358,916				1,358,916
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		2,090,162	0	0	0	2,090,162
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		75,000				75,000
10. Matured endowments						0
11. Annuity benefits		157,182				157,182
12. Surrender values and withdrawals for life contracts		8,783				8,783
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		240,964	0	0	0	240,964
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.2	75,000							.2	75,000
Settled during current year:										
18.1 By payment in full	.2	75,000							.2	75,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.2	75,000	0	0	0	0	0	0	.2	75,000
18.4 Reduction by compromise										0
18.5 Amount rejected									0	0
18.6 Total settlements	.2	75,000	0	0	0	0	0	0	.2	75,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	842	278,334,835	0	(a)	0	0	0	0	842	278,334,835
21. Issued during year	206	47,616,258			0	0	0	0	206	47,616,258
22. Other changes to in force (Net)	(46)	(10,624,783)							(46)	(10,624,783)
23. In force December 31 of current year	1,002	315,326,310	0	(a)	0	0	0	0	1,002	315,326,310

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	.839	.832		.63	.95
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,215	1,224			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,215	1,224	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,054	2,055	0	63	.95

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	7,178,734				5,008	7,183,742
2. Annuity considerations	5,525,206					5,525,206
3. Deposit-type contract funds	175,409		XXX			175,409
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	12,879,349		0	0	5,008	12,884,357
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0		0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0		0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits	2,605,111				1,750	2,606,861
10. Matured endowments	14,047					14,047
11. Annuity benefits	236,679					236,679
12. Surrender values and withdrawals for life contracts	752,167				8,039	760,206
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health						0
15. Totals	3,608,005		0	0	9,789	3,617,794
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	96	2,619,158					4	1,750	100	2,620,908
Settled during current year:										
18.1 By payment in full	96	2,619,158					4	1,750	100	2,620,908
18.2 By payment on compromised claims									0	0
18.3 Totals paid	96	2,619,158	0	0	0	0	4	1,750	100	2,620,908
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	96	2,619,158	0	0	0	0	4	1,750	100	2,620,908
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	9,977	2,749,112,265	0	(a)	0	0	382	505,389	10,359	2,749,617,654
21. Issued during year	1,471	333,245,978							1,471	333,245,978
22. Other changes to in force (Net)	(954)	(159,037,367)					(22)	(36,335)	(976)	(159,073,702)
23. In force December 31 of current year	10,494	2,923,320,876	0	(a)	0	0	360	469,054	10,854	2,923,789,930

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	4,535	4,535			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	149,725	145,934		253,043	177,447
25.3 Non-renewable for stated reasons only (b)				16,556	(15,654)
25.4 Other accident only	279	92			
25.5 All other (b)	2,524	741		1,002	(534)
25.6 Totals (sum of Lines 25.1 to 25.5)	152,528	146,767	0	270,600	161,260
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	157,063	151,302	0	270,600	161,260

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		5,829,700				5,829,700
2. Annuity considerations		2,236,603				2,236,603
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		8,066,303	0	0	0	8,066,303
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		3,045,795				3,045,795
10. Matured endowments						0
11. Annuity benefits		347,757				347,757
12. Surrender values and withdrawals for life contracts		1,159,469				1,159,469
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		4,553,021	0	0	0	4,553,021
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	145	3,045,795							145	3,045,795
Settled during current year:										
18.1 By payment in full	145	3,045,795							145	3,045,795
18.2 By payment on compromised claims									0	0
18.3 Totals paid	145	3,045,795	0	0	0	0	0	0	145	3,045,795
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	145	3,045,795	0	0	0	0	0	0	145	3,045,795
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	17,572	893,765,398	0	(a)	0	0	0	0	17,572	893,765,398
21. Issued during year	2,036	206,128,292							2,036	206,128,292
22. Other changes to in force (Net)	(2,020)	(100,013,157)							(2,020)	(100,013,157)
23. In force December 31 of current year	17,588	999,880,533	0	(a)	0	0	0	0	17,588	999,880,533

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ ,

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ ,

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ ,

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	16	16			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	29,933	27,626		.51,210	15,399
25.3 Non-renewable for stated reasons only (b)	.89	.29			
25.4 Other accident only	282	83			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	30,304	27,738	0	.51,210	15,399
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	30,320	27,754	0	.51,210	15,399

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



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands**

DURING THE YEAR 2011

## LIFE INSURANCE

NAIC Group Code 00244

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						.0
2. Annuity considerations						.0
3. Deposit-type contract funds			.XXX		.XXX	.0
4. Other considerations						.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0	0
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						.0
6.2 Applied to pay renewal premiums						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						.0
6.4 Other						.0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						.0
7.2 Applied to provide paid-up annuities						.0
7.3 Other						.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits						.0
10. Matured endowments						.0
11. Annuity benefits						.0
12. Surrender values and withdrawals for life contracts						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	.0
14. All other benefits, except accident and health						.0
15. Totals	0	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	..0	..0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										0
Settled during current year: .....										0
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	..0	..0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	..0	..0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	..0	..0	0	(a)	0	0	0	0	0	0
21. Issued during year .....										0
22. Other changes to in force (Net) .....										0
23. In force December 31 of current year .....	0	0	0	(a)	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ ..... , current year \$ .....  
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....  
.....

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guarantee renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only .....					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5).....	.0	.0	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		718,791				718,791
2. Annuity considerations		262,924				262,924
3. Deposit-type contract funds		13,080	XXX		XXX	13,080
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		994,796	0	0	0	994,796
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		10,796				10,796
10. Matured endowments						0
11. Annuity benefits		411,078				411,078
12. Surrender values and withdrawals for life contracts		16,109				16,109
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		437,983	0	0	0	437,983
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	.3	10,796							.3	10,796
Settled during current year:										
18.1 By payment in full	.3	10,796							.3	10,796
18.2 By payment on compromised claims									0	0
18.3 Totals paid	.3	10,796	0	0	0	0	0	0	.3	10,796
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	.3	10,796	0	0	0	0	0	0	.3	10,796
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year	731	304,395,147	0	(a)	0	0	0	0	731	304,395,147
21. Issued during year	168	83,355,057			0	0	0	0	168	83,355,057
22. Other changes to in force (Net)	(72)	(23,710,270)							(72)	(23,710,270)
23. In force December 31 of current year	827	364,039,934	0	(a)	0	0	0	0	827	364,039,934

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,175	1,183			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,175	1,183	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,175	1,183	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.328,964					.328,964
2. Annuity considerations .....	.50,000					.50,000
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	378,964	0		0		378,964
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	.0	.0		0		0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	.0	.0		0		0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0		0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	112,316					112,316
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	6,204					6,204
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	.0	.0		0		0
14. All other benefits, except accident and health .....						0
15. Totals .....	118,521	0		0		118,521
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	.0	.0		0		0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0		0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year .....	.1	.112,316							.1	.112,316
Settled during current year:										
18.1 By payment in full .....	.1	.112,316							.1	.112,316
18.2 By payment on compromised claims .....									0	.0
18.3 Totals paid .....	.1	.112,316	0	.0	.0	.0	.0	.0	.1	.112,316
18.4 Reduction by compromise .....									0	.0
18.5 Amount rejected .....									0	.0
18.6 Total settlements .....	.1	.112,316	0	.0	.0	.0	.0	.0	.1	.112,316
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					No. of Policies					
20. In force December 31, prior year .....	.494	.120,294,397	0	(a)	0	.0	.0	.0	.494	.120,294,397
21. Issued during year .....	.69	.18,958,755							.69	.18,958,755
22. Other changes to in force (Net) .....	(19)	.640,296							(19)	.640,296
23. In force December 31 of current year .....	544	.139,893,448	0	(a)	0	0	0	0	544	.139,893,448

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	6,811	7,522			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	6,811	7,522		0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	6,811	7,522		0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,122,228			6,689	4,128,916
2. Annuity considerations		3,377,110				3,377,110
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		7,499,338	0	0	6,689	7,506,026
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		917,214			1,500	918,714
10. Matured endowments		992				992
11. Annuity benefits		949,421				949,421
12. Surrender values and withdrawals for life contracts		417,107			10,352	427,459
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		2,284,734	0	0	11,852	2,296,586
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	168	918,206					.5	1,500	173	919,706
Settled during current year:										
18.1 By payment in full	168	918,206					.5	1,500	173	919,706
18.2 By payment on compromised claims								0	0	0
18.3 Totals paid	168	918,206	0	0	0	0	.5	1,500	173	919,706
18.4 Reduction by compromise								0	0	0
18.5 Amount rejected								0	0	0
18.6 Total settlements	168	918,206	0	0	0	0	.5	1,500	173	919,706
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	7,127	1,285,659,241	0	(a)	0	0	219	368,766	7,346	1,286,028,007
21. Issued during year	.513	94,537,748							513	94,537,748
22. Other changes to in force (Net)	(622)	(74,438,664)					(12)	(25,834)	(634)	(74,464,498)
23. In force December 31 of current year	7,018	1,305,758,325	0	(a)	0	0	207	342,932	7,225	1,306,101,257

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	.174	.174			
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	101,979	116,390		.830	(1,609)
25.3 Non-renewable for stated reasons only (b)	602	177			
25.4 Other accident only	100	33			
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	102,681	116,599	0	.830	(1,609)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	102,855	116,774	0	.830	(1,609)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		846,039				846,039
2. Annuity considerations .....		477,737				477,737
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		1,323,776	0	0	0	1,323,776
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....		28,425				28,425
10. Matured endowments .....						0
11. Annuity benefits .....		12,000				12,000
12. Surrender values and withdrawals for life contracts .....		5,480				5,480
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		45,904	0	0	0	45,904
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	2	28,425					2			28,425
Settled during current year:										
18.1 By payment in full .....	2	28,425					2			28,425
18.2 By payment on compromised claims .....							0			0
18.3 Totals paid .....	2	28,425	0	0	0	0	2			28,425
18.4 Reduction by compromise .....							0			0
18.5 Amount rejected .....							0			0
18.6 Total settlements .....	2	28,425	0	0	0	0	2			28,425
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	703	241,608,560	0	(a)	0	0	0	0	703	241,608,560
21. Issued during year .....	226	100,090,035							226	100,090,035
22. Other changes to in force (Net) .....	(80)	(16,601,534)							(80)	(16,601,534)
23. In force December 31 of current year .....	849	325,097,061	0	(a)	0	0	0	0	849	325,097,061

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	5,591	6,528			
25.3 Non-renewable for stated reasons only (b) .....	56	19			
25.4 Other accident only .....	32	9			
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	5,680	6,556	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	5,680	6,556	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,942,703				19,930	1,962,633
2. Annuity considerations .....	1,497,035					1,497,035
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	3,439,738	0		0	19,930	3,459,668
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	724,340				.36,464	760,804
10. Matured endowments .....	2,968				1,185	4,153
11. Annuity benefits .....	.86,170					.86,170
12. Surrender values and withdrawals for life contracts .....	415,724				.19,703	435,427
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	1,229,202	0		0	57,352	1,286,554
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	139	.727,308					64	.37,649	203	.764,957
Settled during current year:										
18.1 By payment in full .....	139	.727,308					64	.37,649	203	.764,957
18.2 By payment on compromised claims .....								0		0
18.3 Totals paid .....	139	.727,308	0	0	0	0	64	.37,649	203	.764,957
18.4 Reduction by compromise .....								0		0
18.5 Amount rejected .....								0		0
18.6 Total settlements .....	139	.727,308	0	0	0	0	64	.37,649	203	.764,957
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....	4,865	489,830,040	0	(a)	0	0	949	.876,355	5,814	.490,706,395
21. Issued during year .....	.577	.65,577,406							.577	.65,577,406
22. Other changes to in force (Net) .....	(450)	(32,893,444)					(52)	(61,611)	(502)	(32,955,055)
23. In force December 31 of current year .....	4,992	522,514,002	0	(a)	0	0	897	814,744	5,889	523,328,746

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	20,688	20,688			9,526
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	.67,869	.55,448		.19,338	(22,363)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	.588	.194			
25.5 All other (b) .....	1,977	.580		.618	(330)
25.6 Totals (sum of Lines 25.1 to 25.5) .....	70,435	.56,222	0	.19,956	(22,693)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	91,122	.76,910	0	.29,482	(13,166)

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,422,568				7,422,568
2. Annuity considerations		4,175,049				4,175,049
3. Deposit-type contract funds		39,578	XXX		XXX	39,578
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		11,637,196	0	0	0	11,637,196
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		2,258,102				2,258,102
10. Matured endowments						0
11. Annuity benefits		1,881,699				1,881,699
12. Surrender values and withdrawals for life contracts		388,099				388,099
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		4,527,899	0	0	0	4,527,899
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	25	2,258,102							25	2,258,102
Settled during current year:										
18.1 By payment in full	25	2,258,102							25	2,258,102
18.2 By payment on compromised claims									0	0
18.3 Totals paid	25	2,258,102	0	0	0	0	0	0	25	2,258,102
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	25	2,258,102	0	0	0	0	0	0	25	2,258,102
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
					<b>No. of Policies</b>					
20. In force December 31, prior year	11,430	3,039,246,065	0	(a)	0	0	0	0	11,430	3,039,246,065
21. Issued during year	1,258	271,249,955			0	0	0	0	1,258	271,249,955
22. Other changes to in force (Net)	(568)	(134,042,907)							(568)	(134,042,907)
23. In force December 31 of current year	12,120	3,176,453,113	0	(a)	0	0	0	0	12,120	3,176,453,113

(a) Includes Individual Credit Life Insurance: prior year \$ , current year \$ . Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ , current year \$ . Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$ .

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	226,269	232,608		10,876	9,502
25.3 Non-renewable for stated reasons only (b)	1,154	380			
25.4 Other accident only	620	182		1,153	(614)
25.5 All other (b)	228,043	233,170	0	12,029	8,888
25.6 Totals (sum of Lines 25.1 to 25.5)	228,043	233,170	0	12,029	8,888
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	228,043	233,170	0	12,029	8,888

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	98,402					98,402
2. Annuity considerations .....			XXX		XXX	0
3. Deposit-type contract funds .....						0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	98,402	0		0	0	98,402
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	500					500
10. Matured endowments .....						0
11. Annuity benefits .....	51,031					51,031
12. Surrender values and withdrawals for life contracts .....	3,403					3,403
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	54,934	0		0	0	54,934
<b>DETAILS OF WRITE-INS</b>						
1301 .....						
1302 .....						
1303 .....						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.1	.500							.1	.500
Settled during current year:										
18.1 By payment in full .....	.1	.500							.1	.500
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	.1	.500	0	0	0	0	0	0	.1	.500
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	.1	.500	0	0	0	0	0	0	.1	.500
19. Unpaid Dec. 31, current year (16 + 17 - 18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	96	32,958,704	0	(a)		0	0	0	96	32,958,704
21. Issued during year .....	25	13,954,692	0	0		0	0	0	25	13,954,692
22. Other changes to in force (Net) .....	(13)	(2,041,588)							(13)	(2,041,588)
23. In force December 31 of current year .....	108	44,871,808	0	(a)	0	0	0	0	108	44,871,808

(a) Includes Individual Credit Life Insurance: prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_,  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b) .....					
24.1 Federal Employees Health Benefits Program premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	0	0	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Grand Aliens

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,758	0	0	0	1,758
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,758	0	0	0	1,758
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	<b>Ordinary</b>		<b>Credit Life (Group and Individual)</b>		<b>Group</b>		<b>Industrial</b>		<b>Total</b>	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	0	0	0	0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	0	0	0	0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ 0, current year \$ 0. Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ 0, current year \$ 0. Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0, current year \$ 0.

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employees Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2011

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance		219,785,622	0	107,141	170,793	220,063,556
2. Annuity considerations		122,481,247	0	0	0	122,481,247
3. Deposit-type contract funds		2,520,014	XXX	0	XXX	2,520,014
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		344,786,882	0	107,141	170,793	345,064,817
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits		95,647,311	0	1,206,053	278,265	97,131,629
10. Matured endowments		66,096	0	0	37,728	103,823
11. Annuity benefits		51,057,695	0	158,512	0	51,216,208
12. Surrender values and withdrawals for life contracts		24,555,577	0	0	448,431	25,004,007
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		171,326,679	0	1,364,565	764,423	173,455,667
<b>DETAILS OF WRITE-INS</b>						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	3,441	95,713,407	0	0	7	1,206,053	1,018	315,992	4,466	97,235,452
Settled during current year:										
18.1 By payment in full	3,441	95,713,407	0	0	7	1,206,053	1,018	315,992	4,466	97,235,452
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3,441	95,713,407	0	0	7	1,206,053	1,018	315,992	4,466	97,235,452
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3,441	95,713,407	0	0	7	1,206,053	1,018	315,992	4,466	97,235,452
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	375,885	72,130,445,756	0	0	10	1,942,431,212	33,872	29,147,350	409,767	74,102,024,318
21. Issued during year	36,212	7,299,283,379	0	0	0	17,034,500	0	0	36,212	7,316,317,879
22. Other changes to in force (Net)	(28,326)	(3,751,294,203)	0	0	(1)	20,991,429	(1,703)	(2,042,380)	(30,030)	(3,732,345,154)
23. In force December 31 of current year	383,771	75,678,434,932	0	0	9	1,980,457,141	32,169	27,104,970	415,949	77,685,997,043

(a) Includes Individual Credit Life Insurance: prior year \$ 0, current year \$ 0  
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ 0, current year \$ 0  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0, current year \$ 0

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred	
24. Group policies (b)	55,458	45,539	0	1,024,573	1,547,082
24.1 Federal Employees Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	32,452	32,452	0	12,335	12,335
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,113	418	0	0	0
25.2 Guaranteed renewable (b)	5,610,292	6,050,307	0	2,234,302	707,885
25.3 Non-renewable for stated reasons only (b)	(850)	0	0	78,706	(74,416)
25.4 Other accident only	30,043	9,897	0	4,314	(2,383)
25.5 All other (b)	39,013	11,445	0	37,346	(19,903)
25.6 Totals (sum of Lines 25.1 to 25.5)	5,679,611	6,072,068	0	2,354,668	611,183
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,767,520	6,150,059	0	3,391,576	2,170,599

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

## FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

## Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	(2,021,514)
2. Current year's realized pre-tax capital gains/(losses) of \$ 8,064,818 transferred into the reserve net of taxes of \$ 2,822,686	5,242,132
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	3,220,618
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	638,379
6. Reserve as of December 31, current year (Line 4 minus Line 5)	2,582,238

## Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
1. 2011	179,475	458,905	0	638,379
2. 2012	(379,023)	581,297	0	202,275
3. 2013	(108,348)	536,565	0	428,216
4. 2014	24,551	520,414	0	544,965
5. 2015	65,865	504,970	0	570,835
6. 2016	40,135	488,576	0	528,710
7. 2017	62,811	452,461	0	515,272
8. 2018	41,484	399,119	0	440,603
9. 2019	(4,011)	338,175	0	334,164
10. 2020	(53,715)	280,967	0	227,252
11. 2021	(46,701)	211,756	0	165,055
12. 2022	(19,416)	162,537	0	143,121
13. 2023	(3,003)	130,777	0	127,774
14. 2024	4,146	95,280	0	99,426
15. 2025	9,064	59,784	0	68,847
16. 2026	(29,600)	20,551	0	(9,049)
17. 2027	(89,531)	0	0	(89,531)
18. 2028	(118,344)	0	0	(118,344)
19. 2029	(141,796)	0	0	(141,796)
20. 2030	(162,801)	0	0	(162,801)
21. 2031	(178,981)	0	0	(178,981)
22. 2032	(180,466)	0	0	(180,466)
23. 2033	(192,943)	0	0	(192,943)
24. 2034	(205,393)	0	0	(205,393)
25. 2035	(189,274)	0	0	(189,274)
26. 2036	(150,614)	0	0	(150,614)
27. 2037	(108,445)	0	0	(108,445)
28. 2038	(64,879)	0	0	(64,879)
29. 2039	(21,875)	0	0	(21,875)
30. 2040	116	0	0	116
31. 2041 and Later	0	0	0	0
32. Total (Lines 1 to 31)	(2,021,514)	5,242,132	0	3,220,618

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**ASSET VALUATION RESERVE**

	Default Component			Equity Component			7 Total Amount (Cols. 3+6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1+2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4+5)	
1. Reserve as of December 31, prior year .....	4,689,640	0	4,689,640	10,776,892	55,493	10,832,385	15,522,026
2. Realized capital gains/(losses) net of taxes-General Account .....	(584,358)		(584,358)	(13,030,893)		(13,030,893)	(13,615,251)
3. Realized capital gains/(losses) net of taxes-Separate Accounts .....	(1,691,728)		(1,691,728)			0	(1,691,728)
4. Unrealized capital gains/(losses) net of deferred taxes-General Account .....			0	6,814,550		6,814,550	6,814,550
5. Unrealized capital gains/(losses) net of deferred taxes-Separate Accounts .....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....			0			0	0
7. Basic contribution .....	3,292,712	0	3,292,712	0	16,959	16,959	3,309,671
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	5,706,266	0	5,706,266	4,560,550	72,452	4,633,002	10,339,268
9. Maximum reserve .....	16,960,732	0	16,960,732	307,104	127,190	434,294	17,395,026
10. Reserve objective .....	11,718,776	0	11,718,776	307,104	97,513	404,616	12,123,392
11. 20% of (Line 10 - Line 8) .....	1,202,502	0	1,202,502	(850,689)	5,012	(845,677)	356,825
12. Balance before transfers (Lines 8 + 11) .....	6,908,768	0	6,908,768	3,709,861	77,464	3,787,325	10,696,093
13. Transfers .....			0			0	XXX
14. Voluntary contribution .....			0			0	0
15. Adjustment down to maximum/up to zero .....			0	(3,402,757)		(3,402,757)	(3,402,757)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	6,908,768	0	6,908,768	307,103	77,464	384,567	7,293,335

## ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
LONG-TERM BONDS												
1	1	Exempt Obligations .....	157,523,638	XXX	XXX	157,523,638	0.0000	0	0.0000	0	0.0000	0
2		Highest Quality .....	1,202,324,890	XXX	XXX	1,202,324,890	0.0004	480,930	0.0023	2,765,347	0.0030	3,606,975
3		High Quality .....	956,663,185	XXX	XXX	956,663,185	0.0019	1,817,660	0.0058	5,548,646	0.0090	8,609,969
4		Medium Quality .....	22,157,134	XXX	XXX	22,157,134	0.0093	206,061	0.0230	509,614	0.0340	753,343
5		Low Quality .....	13,144,317	XXX	XXX	13,144,317	0.0213	279,974	0.0530	696,649	0.0750	985,824
6		Lower Quality .....	600,428	XXX	XXX	600,428	0.0432	25,938	0.1100	66,047	0.1700	102,073
7		In or Near Default .....	1,234,389	XXX	XXX	1,234,389	0.0000	0	0.2000	246,878	0.2000	246,878
8		Total Unrated Multi-class Securities Acquired by Conversion .....		XXX	XXX	0	XXX	XXX	XXX	XXX	XXX	
9		Total Bonds (Sum of Lines 1 through 8) .....	2,353,647,981	XXX	XXX	2,353,647,981	XXX	2,810,564	XXX	9,833,181	XXX	14,305,060
PREFERRED STOCK												
10	1	Highest Quality .....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11		High Quality .....	8,146,800	XXX	XXX	8,146,800	0.0019	15,479	0.0058	47,251	0.0090	73,321
12		Medium Quality .....	3,499,687	XXX	XXX	3,499,687	0.0093	32,547	0.0230	80,493	0.0340	118,989
13		Low Quality .....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14		Lower Quality .....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15		In or Near Default .....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17	Total Preferred Stocks (Sum of Lines 10 through 16) .....		11,646,487	XXX	XXX	11,646,487	XXX	48,026	XXX	127,744	XXX	192,311
SHORT-TERM BONDS												
18	1	Exempt Obligations .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19		Highest Quality .....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20		High Quality .....		XXX	XXX	0	0.019	0	0.0058	0	0.0090	0
21		Medium Quality .....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22		Low Quality .....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23		Lower Quality .....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24		In or Near Default .....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25	Total Short-term Bonds (Sum of Lines 18 through 24) .....		0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
DERIVATIVE INSTRUMENTS												
26		Exchange Traded .....		XXX	XXX	0	0.0004	.0	0.0023	0	0.0030	
27	1	Highest Quality .....		XXX	XXX	0	0.0004	.0	0.0023	0	0.0030	
28	2	High Quality .....		XXX	XXX	0	0.0019	.0	0.0058	0	0.0090	
29	3	Medium Quality .....		XXX	XXX	0	0.0093	.0	0.0230	0	0.0340	
30	4	Low Quality .....		XXX	XXX	0	0.0213	.0	0.0530	0	0.0750	
31	5	Lower Quality .....		XXX	XXX	0	0.0432	.0	0.1100	0	0.1700	
32	6	In or Near Default .....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	
33		Total Derivative Instruments .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
34		Total (Lines 9 + 17 + 25 + 33)	2,365,294,468	XXX	XXX	2,365,294,468	XXX	2,858,590	XXX	9,960,926	XXX	
MORTGAGE LOANS												
35		In Good Standing:			XXX	0	0.0063 (a)	.0	0.0120 (a)	0	0.0190 (a)	
36		Farm Mortgages .....			XXX	0	0.0003	.0	0.0006	0	0.0010	
37		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0013	.0	0.0030	0	0.0040	
38		Residential Mortgages - All Other .....			XXX	0	0.0003	.0	0.0006	0	0.0010	
39		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0063 (a)	.0	0.0120 (a)	0	0.0190 (a)	
40		Commercial Mortgages - All Other .....			XXX	0	0.2800 (b)	.0	0.6200 (b)	0	1.0000 (b)	
41		In Good Standing With Restructured Terms..			XXX	0	0.0420	.0	0.0760	0	0.1200	
42		Overdue, Not in Process:			XXX	0	0.0005	.0	0.0012	0	0.0020	
43		Farm Mortgages .....			XXX	0	0.0025	.0	0.0058	0	0.0090	
44		Residential Mortgages - All Other .....			XXX	0	0.0005	.0	0.0012	0	0.0020	
45		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0420	.0	0.0760	0	0.1200	
46		In Process of Foreclosure:			XXX	0	0.0000	.0	0.1700	0	0.1700	
47		Farm Mortgages .....			XXX	0	0.0000	.0	0.0040	0	0.0040	
48		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0000	.0	0.0130	0	0.0130	
49		Residential Mortgages - All Other .....			XXX	0	0.0000	.0	0.0040	0	0.0040	
50		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0000	.0	0.1700	0	0.1700	
51		Total Schedule B Mortgages .....	0	0	XXX	0	XXX	0	XXX	0	XXX	
52		Schedule DA Mortgages .....			XXX	0	(c)	0	(c)	0	(c)	
53		Total Mortgage Loans on Real Estate (Lines 51 + 52)	0	0	XXX	0	XXX	0	XXX	0	XXX	

(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**ASSET VALUATION RESERVE  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
32		<b>COMMON STOCK</b>										
1		Unaffiliated Public .....	3,071,035	XXX	XXX	3,071,035	0.0000	0	0.1000 <sup>(d)</sup>	307,104	0.1000 <sup>(d)</sup>	307,104
2		Unaffiliated Private .....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
3		Federal Home Loan Bank .....		XXX	XXX	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
5		Affiliated Investment Subsidiary:										
6		Fixed Income Exempt Obligations .....	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed Income Highest Quality .....	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed Income High Quality .....	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed Income Medium Quality .....	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed Income Low Quality .....	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed Income Lower Quality .....	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Fixed Income In or Near Default .....	0	0	0	0	XXX	0	XXX	0	XXX	0
13		Unaffiliated Common Stock Public .....				0	0.0000	0	0.1300 <sup>(d)</sup>	0	0.1300 <sup>(d)</sup>	0
14		Unaffiliated Common Stock Private .....				0	0.0000	0	0.1600	0	0.1600	0
15		Mortgage Loans .....				0	(c)	0	(c)	0	(c)	0
16		Real Estate .....				0	(e)	0	(e)	0	(e)	0
17		Affiliated-Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
18		Affiliated - All Other .....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
		Total Common Stock (Sum of Lines 1 through 17)	3,071,035	0	0	3,071,035	XXX	0	XXX	307,104	XXX	307,104
		<b>REAL ESTATE</b>										
19		Home Office Property (General Account only) .....				0	0.0000	0	0.0750	0	0.0750	0
20		Investment Properties .....				0	0.0000	0	0.0750	0	0.0750	0
21		Properties Acquired in Satisfaction of Debt .....				0	0.0000	0	0.1100	0	0.1100	0
22		Total Real Estate (Sum of Lines 19 through 21)	0	0	0	0	XXX	0	XXX	0	XXX	0
		<b>OTHER INVESTED ASSETS</b>										
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS</b>										
23	1	Exempt Obligations .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
24		Highest Quality .....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
25		High Quality .....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
26		Medium Quality .....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
27		Low Quality .....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
28		Lower Quality .....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
29	6	In or Near Default .....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
30		Total with Bond characteristics (Sum of Lines 23 through 29)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Number	NAIC Designation	Description	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS</b>										
31	1	Highest Quality .....	42,396,810	XXX	XXX	42,396,810	0.0004	16,959	0.0023	97,513	0.0030	127,190
32	2	High Quality .....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
33	3	Medium Quality .....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
34	4	Low Quality .....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
35	5	Lower Quality .....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
36	6	In or Near Default .....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
37		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
38		Total with Preferred Stock characteristics (Sum of Lines 31 through 37)	42,396,810	XXX	XXX	42,396,810	XXX	16,959	XXX	97,513	XXX	127,190
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS</b>										
33		In Good Standing:										
		Farm Mortgages .....			XXX	0	0.0063	0	0.0120	0	0.0190	0
		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0003	0	0.0006	0	0.0010	0
		Residential Mortgages - All Other .....		XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0003	0	0.0006	0	0.0010	0
		Commercial Mortgages - All Other .....			XXX	0	0.0063	0	0.0120	0	0.0190	0
		In Good Standing With Restructured Terms .....			XXX	0	0.2800	0	0.6200	0	1.0000	0
		Overdue, Not in Process:										
		Farm Mortgages .....			XXX	0	0.0420	0	0.0760	0	0.1200	0
		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0005	0	0.0012	0	0.0020	0
		Residential Mortgages - All Other .....			XXX	0	0.0025	0	0.0058	0	0.0090	0
		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0005	0	0.0012	0	0.0020	0
		Commercial Mortgages - All Other .....			XXX	0	0.0420	0	0.0760	0	0.1200	0
		In Process of Foreclosure:										
		Farm Mortgages .....			XXX	0	0.0000	0	0.1700	0	0.1700	0
		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0000	0	0.0040	0	0.0040	0
		Residential Mortgages - All Other .....			XXX	0	0.0000	0	0.0130	0	0.0130	0
		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0000	0	0.0040	0	0.0040	0
		Commercial Mortgages - All Other .....			XXX	0	0.0000	0	0.1700	0	0.1700	0
		Total with Mortgage Loan Characteristics (Sum of Lines 39 through 54)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
56		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCKS</b>										
56		Unaffiliated Public .....		XXX	XXX	0	0.0000	0	0.1300 <sup>(d)</sup>	0	0.1300 <sup>(d)</sup>	
57		Unaffiliated Private .....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	
58		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
59		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	
60		Affiliated Other - All Other .....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	
61		Total with Common Stock Characteristics (Sum of Lines 56 through 60)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
62		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE</b>										
62		Home Office Property (General Account only) .....				0	0.0000	0	0.0750	0	0.0750	
63		Investment Properties .....				0	0.0000	0	0.0750	0	0.0750	
64		Properties Acquired in Satisfaction of Debt .....				0	0.0000	0	0.1100	0	0.1100	
65		Total with Real Estate Characteristics (Lines 62 through 64)	0	0	0	0	XXX	0	XXX	0	XXX	
66		<b>LOW INCOME HOUSING TAX CREDIT INVESTMENTS</b>										
66		Guaranteed Federal Low Income Housing Tax Credit .....	0			0	0.0003	0	0.0006	0	0.0010	
67		Non-guaranteed Federal Low Income Housing Tax Credit .....	0			0	0.0063	0	0.0120	0	0.0190	
68		State Low Income Housing Tax Credit .....	0			0	0.0273	0	0.0600	0	0.0975	
69		All Other Low Income Housing Tax Credit .....	0			0	0.0273	0	0.0600	0	0.0975	
70		Total LIHTC	0	0	0	0	XXX	0	XXX	0	XXX	
71		<b>ALL OTHER INVESTMENTS</b>										
71		Other Invested Assets - Schedule BA .....		XXX		0	0.0000	0	0.1300	0	0.1300	
72		Other Short-term Invested Assets - Schedule DA .....		XXX		0	0.0000	0	0.1300	0	0.1300	
73		Total All Other (Sum of Lines 71 + 72) .....	0	XXX	0	0	XXX	0	XXX	0	XXX	
74		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)	42,396,810	0	0	42,396,810	XXX	16,959	XXX	97,513	XXX	

(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a Company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

(d) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).

(e) Determined using same factors and breakdowns used for directly owned real estate.

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

## Asset Valuation Reserve (Continued)

### Basic Contribution, Reserve Objective and Maximum Reserve Calculations Replications (Synthetic) Assets

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE F**

Showing all claims for death losses and all other contract claims resisted or compromised during the year, and  
all claims for death losses and all other contract claims resisted December 31 of current year

1 Contract Numbers	2 Claim Numbers	3 State of Residence of Claimant	4 Year of Claim for Death or Disability	5 Amount Claimed	6 Amount Paid During the Year	7 Amount Resisted Dec. 31 of Current Year	8 Why Compromised or Resisted
<b>Disposed Death Claims - Ordinary</b>							
6012142L		MO	2010	100,000	54,299		SETTLEMENT REACHED.....
6194481L		NC	2011	100,000	1,863		CASE CLOSED.....
5020355L		NC	2010	200,000	2,509		JUDGEMENT IN COMPANY'S FAVOR.....
6023760L		OH	2007	200,000	56,823		SETTLEMENT REACHED.....
L2604868		OH	2010	100,000	149		CASE CLOSED.....
6118198L		WA	2009	500,000	26,633		SETTLEMENT REACHED.....
<b>0199999 - Disposed Death Claims - Ordinary</b>				1,200,000	142,276	0	XXX
<b>0599999 - Subtotals - Disposed - Death Claims</b>				1,200,000	142,276	0	XXX
<b>2699999 - Subtotals - Claims Disposed of During Current Year</b>				1,200,000	142,276	0	XXX
<b>Resisted Death Claims - Ordinary</b>							
6166721L		GA	2009	750,000		750,000	MATERIAL MISREPRESENTATION.....
6120944L		MO	2009	75,000		75,000	MATERIAL MISREPRESENTATION.....
6115336P		PA	2010	34,345		34,345	MATERIAL MISREPRESENTATION.....
6185559L		PA	2010	224,000		224,000	MATERIAL MISREPRESENTATION.....
<b>2799999 - Resisted Death Claims - Ordinary</b>				1,083,345		0	1,083,345
<b>3199999 - Subtotals - Resisted - Death Claims</b>				1,083,345		0	1,083,345
<b>5299999 - Subtotals - Claims Resisted During Current Year</b>				1,083,345		0	1,083,345
5399999 Totals				2,283,345	142,276	1,083,345	XXX

## ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

## SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
<b>PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS</b>																		
1. Premiums written .....	2,513,806	XXX	559,668	XXX	XXX	XXX	617	XXX	1,925,887	XXX	XXX	XXX	13,761	XXX	13,873	XXX		
2. Premiums earned .....	2,945,756	XXX	560,579	XXX	XXX	XXX	402	XXX	764	XXX	2,345,081	XXX	XXX	XXX	17,903	XXX	21,027	XXX
3. Incurred claims .....	(138,388)	(4.7)	575,343	102.6	0.0	(9,833)	(2,446.0)	0.0	0.0	(524,949)	(22.4)	0.0	0.0	(72,627)	(405.7)	(106,322)	(505.6)	
4. Cost containment expenses .....	8,531	.0.3	8,531	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	(129,857)	(4.4)	583,874	104.2	0	0.0	(9,833)	(2,446.0)	0	0.0	(524,949)	(22.4)	0	0.0	(72,627)	(405.7)	(106,322)	(505.6)
6. Increase in contract reserves .....	1,021,112	34.7	0	0.0	0	0.0	0	0.0	0	0.0	1,021,112	43.5	0	0.0	0	0.0	0	0.0
7. Commissions (a) .....	(49,055)	(1.7)	(25,031)	(4.5)	0.0	0.0	0.0	0.0	15	2.0	(24,773)	(1.1)	0.0	0.0	351	2.0	383	1.8
8. Other general insurance expenses .....	1,961,252	66.6	436,765	77.9	0.0	0.0	7,871	1,958.0	243	31.8	1,433,750	61.1	0.0	0.0	21,138	118.1	61,485	292.4
9. Taxes, licenses and fees .....	267,841	9.1	80,442	14.3	0.0	0.0	206	51.2	6	0.8	182,278	7.8	0.0	0.0	1,155	6.5	3,754	17.9
10. Total other expenses incurred .....	2,180,038	74.0	492,176	87.8	0	0.0	8,077	2,009.2	264	34.6	1,591,255	67.9	0	0.0	22,644	126.5	65,622	312.1
11. Aggregate write-ins for deductions .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds .....	(125,537)	(4.3)	(515,471)	(92.0)	0	0.0	2,158	536.8	500	65.4	257,663	11.0	0	0.0	67,886	379.2	61,727	293.6
13. Dividends or refunds .....	0	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
14. Gain from underwriting after dividends or refunds .....	(125,537)	(4.3)	(515,471)	(92.0)	0	0.0	2,158	536.8	500	65.4	257,663	11.0	0	0.0	67,886	379.2	61,727	293.6
<b>DETAILS OF WRITE-INS</b>																		
1101.																		
1102.																		
1103.																		
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

(a) Includes \$ ..... reported as "Contract, membership and other fees retained by agents."

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

	1 Total	2 Group Accident and Health	3 Credit A&H (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
<b>PART 2 - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums	481,113	953			60	477,226		1,373	1,501
2. Advance premiums	27,790				.4	27,585		96	105
3. Reserve for rate credits	0								
4. Total premium reserves, current year	508,903	953	0	0	64	504,811	0	1,469	1,606
5. Total premium reserves, prior year	940,852	1,864	0	402	210	924,006	0	5,610	8,760
6. Increase in total premium reserves	(431,949)	(911)	0	(402)	(146)	(419,195)	0	(4,141)	(7,154)
B. Contract Reserves:									
1. Additional reserves (a)	6,087,367					6,087,367			
2. Reserve for future contingent benefits	0								
3. Total contract reserves, current year	6,087,367	0	0	0	0	6,087,367	0	0	0
4. Total contract reserves, prior year	5,066,255	0	0	0	0	5,066,255	0	0	0
5. Increase in contract reserves	1,021,112	0	0	0	0	1,021,112	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	9,906,773	6,076,744		(1)		3,820,477		1,022	8,531
2. Total prior year	11,428,330	6,306,445	0	9,832	0	4,910,972	0	76,440	124,641
3. Increase	(1,521,557)	(229,701)	0	(9,833)	0	(1,090,495)	0	(75,418)	(116,110)

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year	954,635	673,529				269,665		2,669	8,772
1.2 On claims incurred during current year	428,533	131,515				295,881		.122	1,015
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	7,311,087	4,437,918				2,872,518		.70	.581
2.2 On claims incurred during current year	2,595,688	1,638,826		(1)		947,959		.953	7,951
3. Test:									
3.1 Lines 1.1 and 2.1	8,265,722	5,111,447	0	0	0	3,142,183	0	2,739	9,353
3.2 Claim reserves and liabilities, December 31 prior year	11,428,330	6,306,446	0	9,832	0	4,910,971	0	76,440	124,641
3.3 Line 3.1 minus Line 3.2	(3,162,608)	(1,194,999)	0	(9,832)	0	(1,768,788)	0	(73,701)	(115,288)

PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	0								
2. Premiums earned	0								
3. Incurred claims	0								
4. Commissions	0								
B. Reinsurance Ceded:									
1. Premiums written	4,262,253	.515,516		.735	23	3,744,486		.611	882
2. Premiums earned	4,234,860	.515,516		.735	23	3,717,093		.611	882
3. Incurred claims	2,308,989	.971,738				1,325,074		1,302	10,875
4. Commissions	800,675	25,776				774,899			

(a) Includes \$ 0 premium deficiency reserve.

## SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims.....	1,845,009		325,590	2,170,599
2. Beginning Claim Reserves and Liabilities.....	16,776,512	0	2,960,561	19,737,073
3. Ending Claim Reserves and Liabilities.....	15,738,682		2,777,414	18,516,096
4. Claims Paid.....	2,882,840	0	508,736	3,391,576
B. Assumed Reinsurance:				
5. Incurred Claims.....				0
6. Beginning Claim Reserves and Liabilities.....	0	0	0	0
7. Ending Claim Reserves and Liabilities.....				0
8. Claims Paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....	1,962,640		346,348	2,308,988
10. Beginning Claim Reserves and Liabilities.....	7,153,245	0	1,262,337	8,415,583
11. Ending Claim Reserves and Liabilities.....	7,479,604		1,319,930	8,799,534
12. Claims Paid.....	1,636,281	0	288,755	1,925,037
D. Net:				
13. Incurred Claims.....	(117,630)	0	(20,758)	(138,389)
14. Beginning Claim Reserves and Liabilities.....	9,623,266	0	1,698,223	11,321,490
15. Ending Claim Reserves and Liabilities.....	8,259,077	0	1,457,484	9,716,562
16. Claims Paid.....	1,246,559	0	219,981	1,466,539
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses.....	(109,099)		(20,758)	(129,858)
18. Beginning Reserves and Liabilities.....	9,623,266	0	1,698,223	11,321,490
19. Ending Reserves and Liabilities.....	8,259,077		1,457,484	9,716,562
20. Paid Claims and Cost Containment Expenses	1,255,090	0	219,981	1,475,071

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE S - PART 1 - SECTION 1**

**Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities  
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year**

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE S - PART 1 - SECTION 2**

#### Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE S - PART 2**

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
<b>Life and Annuity - Non-Affiliates - U.S. Non-Affiliates</b>						
67466	.95-1079000	.04/01/2002	PACIFIC LIFE INSURANCE COMPANY.....	CA	140,000	.279,910
68713	.84-0499703	.09/15/1997	SECURITY LIFE OF DENVER.....	CO	304,500	.323,555
71706	.57-0290111	.07/01/1970	STANDARD LIFE AND CASUALTY.....	SC	1,225	.4,000
82627	.06-0839705	.08/01/1970	SWISS RE LIFE & HEALTH AMERICA INC.....	NY	1,022,761	.1,471,255
66346	.58-0828824	.02/01/1988	MUNICH AMERICAN REASSURANCE COMPANY.....	GA	200,000	
65676	.35-0472300	.09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN	330,000	.898,422
88340	.59-2859797	.04/01/2002	HANNOVER LIFE REASSURANCE COMPANY.....	FL	48,000	.39,910
68276	.48-1024691	.01/01/1990	EMPLOYERS REASSURANCE CORPORATION.....	KS	50,000	.47,555
93572	.43-1235868	.09/01/1995	RGA REINSURANCE COMPANY.....	MO		.612,750
<b>0499999 - Life and Annuity - Non-Affiliates - U.S. Non-Affiliates</b>					2,096,486	3,677,357
<b>0699999 - Life and Annuity - Non-Affiliates - Total Non-Affiliates</b>					2,096,486	3,677,357
<b>0799999 - Life and Annuity - Total Life and Annuity</b>					2,096,486	3,677,357
<b>Accident and Health - Non-Affiliates - U.S. Non-Affiliates</b>						
68276	.48-1024691	.01/01/1990	EMPLOYERS REASSURANCE CORPORATION.....	KS	7,800	
93572	.43-1235868	.09/01/1995	RGA REINSURANCE COMPANY.....	MO	66,750	.8,001
82627	.06-0839705	.08/01/1970	SWISS RE LIFE & HEALTH AMERICA INC.....	NY	29,228	.1,148
66346	.58-0828824	.02/01/1988	MUNICH AMERICAN REASSURANCE COMPANY.....	GA	86,436	.9,715
67105	.41-0451140	.02/01/2004	RELIASTAR LIFE INSURANCE COMPANY.....	MN		.147,121
<b>1199999 - Accident and Health - Non-Affiliates - U.S. Non-Affiliates</b>					190,213	165,984
<b>1399999 - Accident and Health - Non-Affiliates - Total Non-Affiliates</b>					190,213	165,984
<b>1499999 - Accident and Health - Total Accident and Health</b>					190,213	165,984
<b>1599999 - Total U.S. (Sum of 0199999, 0499999, 0899999 and 1199999)</b>					2,286,699	3,843,341
<b>1799999 Total (Sum of 0799999 and 1499999)</b>						
					2,286,699	3,843,341

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE S - PART 3 - SECTION 1**

**Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year**

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Re- insurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8 Current Year	9 Prior Year		11 Current Year	12 Prior Year		
<b>General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates</b>													
71706.....	57-0290111.....	07/01/1970.....	STANDARD LIFE & CASUALTY.....	SC.....	.CO/I.....	1,821,138.....	.965,544.....	.967,887.....	22,540.....				
97071.....	13-3126819.....	03/01/1981.....	GENERALI USA LIFE REASSURANCE COMPANY.....	MO.....	.CO/I.....	7,513,433.....	.88,740.....	.81,038.....	.98,249.....				
97071.....	13-3126819.....	08/13/1969.....	GENERALI USA LIFE REASSURANCE COMPANY.....	MO.....	.YRT/I.....	455,603.....	.5,766.....	.5,328.....	.7,171.....				
97071.....	13-3126819.....	07/30/1986.....	GENERALI USA LIFE REASSURANCE COMPANY.....	MO.....	.ACO/I.....		.211,521.....	.206,383.....					
97071.....	13-3126819.....	08/13/1969.....	GENERALI USA LIFE REASSURANCE COMPANY.....	MO.....	.DIS/I.....		.294,648.....	.274,808.....					
97071.....	13-3126819.....	08/13/1969.....	GENERALI USA LIFE REASSURANCE COMPANY.....	MO.....	.OTH/G.....	250,389.....	.20,242.....	.18,851.....	.354,725.....				
86258.....	13-2572994.....	08/01/2001.....	GENERAL RE LIFE CORPORATION.....	CT.....	.CO/I.....	64,885,611.....	2,240,229.....	2,038,581.....	.107,061.....				
86258.....	13-2572994.....	01/01/1967.....	GENERAL RE LIFE CORPORATION.....	CT.....	.YRT/I.....	541,162.....	.8,892.....	.74,788.....	.15,272.....				
86258.....	13-2572994.....	01/01/1967.....	GENERAL RE LIFE CORPORATION.....	CT.....	.DIS/I.....		.17,435.....	.15,794.....	.1,091.....				
68276.....	48-1024691.....	01/01/1990.....	EMPLOYERS REASSURANCE CORPORATION.....	KS.....	.CO/I.....	188,782,887.....	.19,551,517.....	.18,852,673.....	.644,278.....				
68276.....	48-1024691.....	01/01/1990.....	EMPLOYERS REASSURANCE CORPORATION.....	KS.....	.YRT/I.....	39,938,967.....	.143,257.....	.191,901.....	.213,236.....				
68276.....	48-1024691.....	01/01/1990.....	EMPLOYERS REASSURANCE CORPORATION.....	KS.....	.DIS/I.....		.47,416.....	.25,807.....	.8,891.....				
88340.....	59-2859797.....	04/01/2002.....	HANNOVER LIFE REASSURANCE COMPANY.....	FL.....	.CO/I.....	636,100,077.....	.13,503,080.....	.12,982,482.....	.1,048,372.....				
88340.....	59-2859797.....	04/01/2002.....	HANNOVER LIFE REASSURANCE COMPANY.....	FL.....	.YRT/I.....	24,680,694.....	.31,694.....	.25,219.....	.40,487.....				
88340.....	59-2859797.....	04/01/2002.....	HANNOVER LIFE REASSURANCE COMPANY.....	FL.....	.DIS/I.....		.53,906.....	.49,372.....	.7,219.....				
65676.....	35-0472300.....	09/15/1997.....	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	.CO/I.....	4,442,220,293.....	.27,234,495.....	.26,812,945.....	.6,196,259.....				
65676.....	35-0472300.....	09/15/1997.....	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	.YRT/I.....	198,102,946.....	.602,546.....	.518,739.....	.758,238.....				
65676.....	35-0472300.....	09/15/1997.....	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	.DIS/I.....		.1,203,260.....	.992,548.....	.97,736.....				
66346.....	58-0828824.....	02/01/1988.....	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	.CO/I.....	70,625,614.....	.2,265,767.....	.2,063,343.....	.127,078.....				
66346.....	58-0828824.....	10/01/1994.....	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	.YRT/I.....	2,301,993,620.....	.2,797,583.....	.2,541,676.....	.2,737,717.....				
66346.....	58-0828824.....	02/01/1988.....	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	.DIS/I.....		.28,529.....	.26,558.....	.12,959.....				
66346.....	58-0828824.....	02/01/1988.....	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	.ADB/I.....				.152,354.....				
93572.....	43-1235868.....	09/01/1995.....	RGA REINSURANCE COMPANY.....	MO.....	.YRT/I.....	6,525,778,894.....	.7,380,496.....	.6,210,369.....	.6,677,295.....				
93572.....	43-1235868.....	09/01/1995.....	RGA REINSURANCE COMPANY.....	MO.....	.DIS/I.....		.25,767.....	.24,027.....	.28,902.....				
93572.....	43-1235868.....	02/01/2004.....	RGA REINSURANCE COMPANY.....	MO.....	.OTH/G.....	156,282,000.....		.10,864.....	.552,549.....				
70211.....	23-6200031.....	01/01/1999.....	REASSURANCE AMERICA LIFE INSURANCE COMPANY.....	TX.....	.CO/I.....	.12,372,998.....	.7,951,631.....	.8,461,512.....	.172,851.....				
67466.....	95-1079000.....	04/01/2002.....	PACIFIC LIFE INSURANCE COMPANY.....	CA.....	.CO/I.....	2,197,103,633.....	.42,064,063.....	.38,966,834.....	.3,552,513.....				
67466.....	95-1079000.....	04/01/2002.....	PACIFIC LIFE INSURANCE COMPANY.....	CA.....	.YRT/I.....	9,963,837.....	.23,124.....	.19,011.....	.34,337.....				
67466.....	95-1079000.....	04/01/2002.....	PACIFIC LIFE INSURANCE COMPANY.....	CA.....	.DIS/I.....		.158,354.....	.138,709.....	.24,330.....				
68713.....	84-0499703.....	09/15/1997.....	SECURITY LIFE OF DENVER.....	CO.....	.CO/I.....	4,074,520,261.....	.83,744,536.....	.78,241,369.....	.6,465,494.....				
68713.....	84-0499703.....	09/15/1997.....	SECURITY LIFE OF DENVER.....	CO.....	.YRT/I.....	312,635,457.....	.1,861,046.....	.1,952,614.....	.1,237,069.....				
68713.....	84-0499703.....	09/15/1997.....	SECURITY LIFE OF DENVER.....	CO.....	.DIS/I.....		.391,895.....	.335,007.....	.61,896.....				
68713.....	84-0499703.....	09/15/1997.....	SECURITY LIFE OF DENVER.....	CO.....	.OTH/G.....	7,196,627.....	.7,453.....	.6,884.....	.15,586.....				
82627.....	06-0839705.....	05/01/1981.....	SWISS RE LIFE & HEALTH AMERICA INC.....	NY.....	.CO/I.....	9,319,738,672.....	.144,860,135.....	.138,803,495.....	.14,524,627.....				
82627.....	06-0839705.....	08/01/1978.....	SWISS RE LIFE & HEALTH AMERICA INC.....	NY.....	.YRT/I.....	2,528,813,620.....	.2,688,977.....	.1,912,372.....	.2,344,331.....				
82627.....	06-0839705.....	08/01/1978.....	SWISS RE LIFE & HEALTH AMERICA INC.....	NY.....	.DIS/I.....		.1,459,798.....	.1,236,257.....	.152,270.....				
82627.....	06-0839705.....	06/01/1974.....	SWISS RE LIFE & HEALTH AMERICA INC.....	NY.....	.OTH/G.....	.306,035,229.....	.7,582.....	.7,024.....	.863,922.....				
86231.....	39-0989781.....	04/01/2008.....	TRANSAMERICA OCCIDENTAL.....	NC.....	.YRT/I.....	2,258,813,469.....	.1,856,586.....	.1,285,980.....	.1,249,648.....				
86231.....	39-0989781.....	04/01/2008.....	TRANSAMERICA OCCIDENTAL.....	NC.....	.DIS/I.....		.6,409.....	.5,066.....	.8,108.....				
0499999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						35,687,167,131	365,803,919	346,384,115	50,586,117	0	0	0	0
General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates													
AA-1440076.....	10/01/2000.....	SIRIUS INTERNATIONAL INSURANCE COMPANY L.....	BR.....	.YRT/I.....	3,179,084.....	.15,571.....	.19,789.....	.10,799.....					
0599999 - General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates						3,179,084	.15,571	.19,789	.10,799	0	0	0	0
0699999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates						35,690,346,215	365,819,490	346,403,904	50,596,916	0	0	0	0
0799999 -						35,690,346,215	365,819,490	346,403,904	50,596,916	0	0	0	0
1599999 - General Account - Total General Account Authorized and Unauthorized						35,690,346,215	365,819,490	346,403,904	50,596,916	0	0	0	0
3199999 - Total U.S. (Sum of 0199999, 0499999, 0899999, 1199999, 1699999, 1999999, 2399999 and 2699999)						35,687,167,131	365,803,919	346,384,115	50,586,117	0	0	0	0
3299999 - Total Non-U.S. (Sum of 0299999, , 0599999, 0999999, 1299999, 1799999, 2099999, 2499999 and 2799999)						3,179,084	.15,571	.19,789	.10,799	0	0	0	0
3399999 Total (Sum of 1599999 and 3099999)						35,690,346,215	365,819,490	346,403,904	50,596,916	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE S - PART 3 - SECTION 2**

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Premiums	8 Unearned Premiums (Estimated)	9 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates												
33197.....06-0949141.....07/01/1999.....COLOGNE REINSURANCE COMPANY OF AMERICA.....				CT.....	CO/I.....	2,108,866	721,157	18,788,662				
82627.....06-0839705.....08/01/1997.....SWISS RE LIFE & HEALTH AMERICA INC.....				NY.....	YRT/I.....	1,509,540	369,816	3,666,960				
66346.....58-0828824.....02/01/1998.....MUNICH AMERICA REASSURANCE COMPANY.....				GA.....	CO/I.....	643,847	7,323	2,845,164				
0499999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						4,262,252	1,098,295	25,300,786	0	0	0	0
0699999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates						4,262,252	1,098,295	25,300,786	0	0	0	0
0799999 - General Account - Authorized - Total General Account Authorized						4,262,252	1,098,295	25,300,786	0	0	0	0
1599999 - General Account - Total General Account Authorized and Unauthorized						4,262,252	1,098,295	25,300,786	0	0	0	0
3199999 - Total U.S. (Sum of 0199999, 0499999, 0899999, 1199999, 1699999, 1999999, 2399999 and 2699999)						4,262,252	1,098,295	25,300,786	0	0	0	0
3399999 Total (Sum of 1599999 and 3099999)						4,262,252	1,098,295	25,300,786	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE S - PART 4**

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5+6+7)	9 Letters of Credit	Letter of Credit Issuing or Confirming Bank (a)			13 Trust Agreements	14 Funds Deposited by and Withheld from Reinsurers	15 Other	16 Miscellaneous Balances (Credit)	17 Sum of Cols 9+13+14+15+16 But Not in Excess of Col. 8
									10 American Bankers Association (ABA) Routing Number	11 Letter of Credit Code	12 Bank Name					
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates																
00000.....AA-1440076.....10/01/2000	SIRIUS INTERNATIONAL INSURANCE CO LTD.			15,571			15,571	15,571	021000089	1.....	CITIBANK, N.A.					15,571
0599999 - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates				15,571	0	0	15,571	15,571	XXX	XXX	XXX	0	0	0	0	15,571
0699999 - General Account - Life and Annuity - Non-Affiliates - Total Non-Affiliates				15,571	0	0	15,571	15,571	XXX	XXX	XXX	0	0	0	0	15,571
0799999 - General Account - Life and Annuity - Total Life and Annuity				15,571	0	0	15,571	15,571	XXX	XXX	XXX	0	0	0	0	15,571
1599999 - General Account - Total General Account				15,571	0	0	15,571	15,571	XXX	XXX	XXX	0	0	0	0	15,571
2499999 - Total Non-U.S. (Sum of 0299999, 0599999, 0999999, 1299999, 1799999 and 2099999)				15,571	0	0	15,571	15,571	XXX	XXX	XXX	0	0	0	0	15,571
2599999 Total (Sum of 1599999 and 2299999)				15,571	0	0	15,571	15,571	XXX	XXX	XXX	0	0	0	0	15,571

(a) Code	American Bankers Association (ABA) Routing Number	Bank Name
.....		
.....		
.....		
.....		

## SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business (000 OMITTED)

	1 2011	2 2010	3 2009	4 2008	5 2007
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts	54,859	53,504	53,123	54,359	53,117
2. Commissions and reinsurance expense allowances	6,732	7,152	7,380	8,045	8,979
3. Contract claims	29,923	47,597	27,110	38,140	21,868
4. Surrender benefits and withdrawals for life contracts	578	3,276	1,695	621	607
5. Dividends to policyholders		0	0	0	0
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserves for life and accident and health contracts	21,342	20,700	16,266	14,823	28,522
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	15,365	15,243	15,398	14,836	15,022
9. Aggregate reserves for life and accident and health contracts	392,219	370,876	350,177	333,910	309,491
10. Liability for deposit-type contracts		0	0	0	0
11. Contract claims unpaid	3,843	9,385	1,639	5,491	3,017
12. Amounts recoverable on reinsurance	2,287	3,692	1,137	1,789	1,376
13. Experience rating refunds due or unpaid		0	0	0	0
14. Policyholders' dividends (not included in Line 10)		0	0	0	0
15. Commissions and reinsurance expense allowances unpaid	1,871	2,030	2,178	2,189	2,303
16. Unauthorized reinsurance offset	0	0	0	179	163
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
17. Funds deposited by and withheld from (F)	0	0	0	0	0
18. Letters of credit (L)	16	20	184	6,171	6,152
19. Trust agreements (T)	0	0	0	0	0
20. Other (O)	0	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE S - PART 6**

**Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance**

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	2,554,397,561		2,554,397,561
2. Reinsurance (Line 16) .....	4,158,045	(4,158,045)	0
3. Premiums and considerations (Line 15) .....	94,315,309	15,364,995	109,680,304
4. Net credit for ceded reinsurance .....	XXX	384,854,961	384,854,961
5. All other admitted assets (balance) .....	82,528,166		82,528,166
6. Total assets excluding Separate Accounts (Line 26) .....	2,735,399,080	396,061,911	3,131,460,991
7. Separate Account assets (Line 27) .....	621,868,503		621,868,503
8. Total assets (Line 28) .....	3,357,267,584	396,061,911	3,753,329,495
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	2,174,329,259	392,218,570	2,566,547,828
10. Liability for deposit-type contracts (Line 3) .....	200,241,900		200,241,900
11. Claim reserves (Line 4) .....	15,891,828	3,843,341	19,735,169
12. Policyholder dividends/reserves (Lines 5 through 7) .....	110		110
13. Premium & annuity considerations received in advance (Line 8) .....	927,435		927,435
14. Other contract liabilities (Line 9) .....	17,947,234		17,947,234
15. Reinsurance in unauthorized companies (Line 24.2) .....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.3) .....	0	0	0
17. All other liabilities (balance) .....	44,877,374		44,877,374
18. Total liabilities excluding Separate Accounts (Line 26) .....	2,454,215,139	396,061,911	2,850,277,050
19. Separate Account liabilities (Line 27) .....	621,868,503		621,868,503
20. Total liabilities (Line 28) .....	3,076,083,643	396,061,911	3,472,145,554
21. Capital & surplus (Line 38) .....	281,183,941	XXX	281,183,941
22. Total liabilities, capital & surplus (Line 39) .....	3,357,267,584	396,061,911	3,753,329,495
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
23. Contract reserves .....	392,218,570		
24. Claim reserves .....	3,843,341		
25. Policyholder dividends/reserves .....	0		
26. Premium & annuity considerations received in advance .....	0		
27. Liability for deposit-type contracts .....	0		
28. Other contract liabilities .....	0		
29. Reinsurance ceded assets .....	4,158,045		
30. Other ceded reinsurance recoverables .....	0		
31. Total ceded reinsurance recoverables .....	400,219,956		
32. Premiums and considerations .....	15,364,995		
33. Reinsurance in unauthorized companies .....	0		
34. Funds held under reinsurance treaties with unauthorized reinsurers .....	0		
35. Other ceded reinsurance payables/offsets .....	0		
36. Total ceded reinsurance payable/offsets .....	15,364,995		
37. Total net credit for ceded reinsurance .....	384,854,961		

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE T – PART 2**  
**INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN**

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama .....	AL .....	4,127,169	1,678,036	31,331	40,825	145,239
2. Alaska .....	AK .....	32,479	150,000			182,479
3. Arizona .....	AZ .....	1,437,902	.49,248	.5,384	.11,727	1,504,261
4. Arkansas .....	AR .....	2,106,464	.164,725	.4,057		2,275,246
5. California .....	CA .....	4,997,484	2,073,677	12,976	965	7,085,102
6. Colorado .....	CO .....	.828,580	.44,450	23,440		984,215
7. Connecticut .....	CT .....	.342,294	.405,154	.3,030		.750,478
8. Delaware .....	DE .....	.229,796	1,148,672	.2,091	2,701	.1,383,259
9. District of Columbia .....	DC .....	.73,590	.0			.73,590
10. Florida .....	FL .....	5,410,316	4,071,328	.12,225	.130,056	.41,185
11. Georgia .....	GA .....	11,595,186	756,084	.68,374	.273,831	12,693,474
12. Hawaii .....	HI .....	.40,431	.0	.584		.41,015
13. Idaho .....	ID .....	.558,493	.301,578	.4,668		.864,739
14. Illinois .....	IL .....	16,014,268	.7,204,561	.199,940	.205,381	
15. Indiana .....	JN .....	15,298,300	.5,394,040	.281,094	.62,232	21,035,666
16. Iowa .....	JA .....	.8,614,048	.26,532,547	.48,647	.50,864	.35,246,106
17. Kansas .....	KS .....	2,777,290	1,329,529	.16,713	.14,397	.198,702
18. Kentucky .....	KY .....	.8,213,010	.867,973	.84,696	.151,909	.9,317,587
19. Louisiana .....	LA .....	.408,732	.160,000	.1,166		.569,899
20. Maine .....	ME .....	.40,350	.0			.40,350
21. Maryland .....	MD .....	.2,214,841	.380,968	.26,753	.9,175	.2,631,737
22. Massachusetts .....	MA .....	.417,467	.0	.2,777		.420,243
23. Michigan .....	MI .....	11,605,489	.9,205,947	.272,381	.153,703	.40,386
24. Minnesota .....	MN .....	.7,778,157	.18,804,396	.42,747	.37,814	.325,118
25. Mississippi .....	MS .....	.221,953	.1,350	.1,355		.224,659
26. Missouri .....	MO .....	.6,863,368	.1,539,074	.35,835	.34,884	.8,501,776
27. Montana .....	MT .....	.807,980	.91,000	.6,531		.905,511
28. Nebraska .....	NE .....	.1,408,662	.1,249,417	.995	.6,279	.2,665,353
29. Nevada .....	NV .....	.282,198	.9,690	.10,430		.332,817
30. New Hampshire .....	NH .....	.317,681	.450	.3,327	.1,618	.0
31. New Jersey .....	NJ .....	.511,829	.236,039	.1,019		.748,888
32. New Mexico .....	NM .....	.364,380	.308,280	.2,963	.4,090	.679,713
33. New York .....	NY .....	.327,629	.6,000		.2,866	.336,495
34. North Carolina .....	NC .....	10,714,257	.474,726	.126,879	.117,549	.0
35. North Dakota .....	ND .....	.1,201,956	.829,200	.4,223		.2,035,380
36. Ohio .....	OH .....	.42,241,836	.6,702,991	.448,480	.720,707	.1,394,459
37. Oklahoma .....	OK .....	.320,275	.90,000			.410,275
38. Oregon .....	OR .....	.477,060	.88,000	.3,013		.568,074
39. Pennsylvania .....	PA .....	16,753,412	.11,059,206	.223,685	.86,872	.0
40. Rhode Island .....	RI .....	.47,355	.0			.47,355
41. South Carolina .....	SC .....	.2,782,872	.112,330	.21,476	.78,997	.0
42. South Dakota .....	SD .....	.731,246	.1,358,916	.1,215		.2,091,377
43. Tennessee .....	TN .....	.7,183,742	.5,525,206	.99,957	.46,573	.175,409
44. Texas .....	TX .....	.5,829,700	.2,236,603	.8,848	.20,293	.0
45. Utah .....	UT .....	.718,791	.262,924	.1,175		.13,080
46. Vermont .....	VT .....	.328,964	.50,000	.5,559		.384,523
47. Virginia .....	VA .....	.4,128,916	.3,377,110	.44,880	.30,542	.0
48. Washington .....	WA .....	.846,039	.477,737	.3,898		.1,327,674
49. West Virginia .....	WV .....	.1,962,633	.1,497,035	.41,953	.12,289	.0
50. Wisconsin .....	WI .....	.7,422,568	.4,175,049	.102,110	.105,594	.39,578
51. Wyoming .....	WY .....	.98,402	.0			.98,402
52. American Samoa .....	AS .....	.0	.0			.0
53. Guam .....	GU .....	.0	.0			.0
54. Puerto Rico .....	PR .....	.2,227	.0			.2,227
55. US Virgin Islands .....	VI .....	.0	.0			.0
56. Northern Mariana Islands .....	MP .....	.0	.0			.0
57. Canada .....	CN .....	.1,731	.0			.1,731
58. Aggregate Other Alien .....	OT .....	.1,758	.0			.1,758
59. Totals .....		220,063,556	122,481,247	2,344,880	2,414,730	2,520,014
						349,824,427

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE Y**  
**PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

## Asterisk

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## Explanation

**ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

## SCHEDULE Y

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

# ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

### Responses

#### MARCH FILING

1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....YES.....
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....YES.....
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? .....YES.....
4. Will an actuarial opinion be filed by March 1? .....YES.....

#### APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1? .....YES.....
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? .....YES.....
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1? .....YES.....
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....YES.....

#### JUNE FILING

9. Will an audited financial report be filed by June 1? .....YES.....
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....YES.....

#### AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? .....YES.....

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

#### MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? .....NO.....
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....YES.....
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....NO.....
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....YES.....
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....YES.....
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....YES.....
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? .....YES.....
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....
27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

# ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? .....NO.....

34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1? .....NO.....

35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? .....YES.....

36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....NO.....

37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....NO.....

38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....NO.....

39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1? .....NO.....

### APRIL FILING

40. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....YES.....

41. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1? .....YES.....

42. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....NO.....

43. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....YES.....

44. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1? .....YES.....

45. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1? .....YES.....

46. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....YES.....

47. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1? .....YES.....

### AUGUST FILING

48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....YES.....

#### Explanation:

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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**Bar code:**



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

27.   
7 6 2 3 6 2 0 1 1 4 5 2 0 0 0 0 0 0

28.   
7 6 2 3 6 2 0 1 1 4 5 3 0 0 0 0 0 0

29.   
7 6 2 3 6 2 0 1 1 4 3 6 0 0 0 0 0 0

30.   
7 6 2 3 6 2 0 1 1 4 3 7 0 0 0 0 0 0

31.   
7 6 2 3 6 2 0 1 1 4 3 8 0 0 0 0 0 0

32.   
7 6 2 3 6 2 0 1 1 4 3 9 0 0 0 0 0 0

33.   
7 6 2 3 6 2 0 1 1 4 5 4 0 0 0 0 0 0

34.   
7 6 2 3 6 2 0 1 1 4 9 5 0 0 0 0 0 0

36.   
7 6 2 3 6 2 0 1 1 3 6 5 0 0 0 0 0 0

37.   
7 6 2 3 6 2 0 1 1 2 2 4 0 0 0 0 0 0

38.   
7 6 2 3 6 2 0 1 1 2 2 5 0 0 0 0 0 0

39.   
7 6 2 3 6 2 0 1 1 2 2 6 0 0 0 0 0 0

42.   
7 6 2 3 6 2 0 1 1 2 3 0 5 9 0 0 0 0

## OVERFLOW PAGE FOR WRITE-INS

L002 Additional Aggregate Lines for Page 02 Line 25.

\*ASSETS - Assets

	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 – 2)	4 Net Admitted Assets
2504. RETURNED CHECKS.....	.....(289)	.....(289)	.....0	.....0
2505. AGENTS' BALANCES.....	.....46,138	.....46,138	.....0	.....0
2506. TUITION REIMBURSEMENT RECEIVABLE.....	.....165,171	.....22,646	.....142,526	.....158,666
2597. Summary of remaining write-ins for Line 25 from Page 02	.....211,021	.....68,495	.....142,526	.....158,666

L003 Additional Aggregate Lines for Page 03 Line 25.

\*LIAB - Liabilities

	1 Current Year	2 Prior Year
2504. ACCOUNTS PAYABLE - LONG TERM CARE.....	.....127,855	.....118,603
2505. RETIRED LIVES RESERVE.....	.....20,877	.....20,368
2597. Summary of remaining write-ins for Line 25 from Page 3	.....148,732	.....138,971

L018 Additional Aggregate Lines for Page 18 Line 25.

\*EXNONADMIT - Exhibit of Nonadmitted Assets

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2504. AGENTS' BALANCES.....	.....46,138	.....42,421	.....(3,717)
2505. TUITION REIMBURSEMENT RECEIVABLE.....	.....22,646	.....42,421	.....(22,646)
2597. Summary of remaining write-ins for Line 25 from page 18	.....68,784	.....42,421	.....(26,363)



**SUPPLEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2011

(To Be Filed by March 1)

**FOR THE STATE OF Florida**

NAIC Group Code 00244

Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141

Person Completing This Exhibit Roger A. Brown

Title Vice President & Actuary

NAIC Company Code 76236

Telephone Number 513-870-2000

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2008			Policies Issued in 2009, 2010, 2011				
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13	Percent of Premiums Earned		16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
Yes	6655	P	Yes	0034000	02/20/1987			01/01/1989	Medicare Supplement Policy	915	.1,456	159.1	1			0.0	
Yes	1588/1590	P	Yes	0034000				01/01/1989	Medicare Supplement Policy	1,374	.7,960	579.3	2			0.0	
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										2,289	9,416	411.4	3	0	0	0.0	0
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0

**GENERAL INTERROGATORIES**

- If response in Column 1 is no, give full and complete details:
- Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c) (3) (E) for this state
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Billing address and contact person for user fees established under 41 U.S.C. 1395u(h) (3) (B).
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Explain any policies identified above as policy type "O"



**SUPPLEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2011

(To Be Filed by March 1)

**FOR THE STATE OF Illinois**

NAIC Group Code 00244  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141  
 Person Completing This Exhibit Roger A. Brown  
 Title Vice President & Actuary

NAIC Company Code 76236  
 Telephone Number 513-870-2000

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2008				Policies Issued in 2009, 2010, 2011			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13	Percent of Premiums Earned		16	17	Percent of Premiums Earned
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
Yes	6655	P	Yes	0034000	03/20/1987			01/01/1989	Medicare Supplement Policy	555	1,061	191.2	1			0.0	
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										555	1,061	191.2	1	0	0	0.0	0
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0

**GENERAL INTERROGATORIES**

- If response in Column 1 is no, give full and complete details:
- Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c) (3) (E) for this state
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Billing address and contact person for user fees established under 41 U.S.C. 1395u(h) (3) (B).
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Explain any policies identified above as policy type "O"



**SUPPLEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2011

(To Be Filed by March 1)

**FOR THE STATE OF Indiana**

NAIC Group Code 00244  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141  
 Person Completing This Exhibit Roger A. Brown  
 Title Vice President & Actuary

NAIC Company Code 76236  
 Telephone Number 513-870-2000

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2008			14	Policies Issued in 2009, 2010, 2011			
										11	Incurred Claims		15	Incurred Claims		18	
											12	13		16	17		
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
Yes.....	1588/1590	P	Yes.....	0034000	11/08/1982			01/01/1989	Medicare Supplement Policy.....	1,949	.4,617	.236.9	3			0.0	
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										1,949	4,617	236.9	3	0	0	0.0	0
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0

**GENERAL INTERROGATORIES**

- If response in Column 1 is no, give full and complete details:
- Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c) (3) (E) for this state
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Billing address and contact person for user fees established under 41 U.S.C. 1395u(h) (3) (B).
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Explain any policies identified above as policy type "O"



**SUPPLEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2011

(To Be Filed by March 1)

**FOR THE STATE OF Nevada**

NAIC Group Code 00244  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141  
 Person Completing This Exhibit Roger A. Brown  
 Title Vice President & Actuary

NAIC Company Code 76236  
 Telephone Number 513-870-2000

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2008			14	Policies Issued in 2009, 2010, 2011			
										11	Incurred Claims		15	Incurred Claims		18	
											12	13		16	17		
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
Yes.....	1588/1590	P	Yes.....	0034000				01/01/1989.....	Medicare Supplement Policy.....	820	.881	107.4	1			0.0	
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										820	881	107.4	1	0	0	0.0	0
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0

**GENERAL INTERROGATORIES**

- If response in Column 1 is no, give full and complete details:
- Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c) (3) (E) for this state
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Billing address and contact person for user fees established under 41 U.S.C. 1395u(h) (3) (B).
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Explain any policies identified above as policy type "O"



**SUPPLEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2011

(To Be Filed by March 1)

**FOR THE STATE OF Ohio**

NAIC Group Code 00244  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141  
 Person Completing This Exhibit Roger A. Brown  
 Title Vice President & Actuary

NAIC Company Code 76236

Telephone Number 513-870-2000

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2008			Policies Issued in 2009, 2010, 2011				
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13	Percent of Premiums Earned		16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
Yes	1588/1590	P	Yes	0034000	10/13/1982			01/01/1989	Medicare Supplement Policy	5,359	.6,467	120.7	5			0.0	
Yes	6655	P	Yes	0034000	02/27/1987			01/01/1989	Medicare Supplement Policy	2,007	2,570	128.1	2			0.0	
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										7,366	9,037	122.7	7	0	0	0.0	0
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0

**GENERAL INTERROGATORIES**

- If response in Column 1 is no, give full and complete details:
- Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c) (3) (E) for this state
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Billing address and contact person for user fees established under 41 U.S.C. 1395u(h) (3) (B).
  - Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
  - Contact Person and Phone Number: ANN BINZER 513-870-2282
- Explain any policies identified above as policy type "O"



**SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE O SUPPLEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2011

(To Be Filed By March 1)

Of The CINCINNATI LIFE INSURANCE COMPANY .....

Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141.....

NAIC Group Code 00244.....NAIC Company Code 76236.....Employer's ID Number 31-1213778.....

**SUPPLEMENTAL SCHEDULE O – PART 1**

Development of Incurred Losses  
(\$000 OMITTED)

**Section A–Group Accident and Health**

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2007	2 2008	3 2009	4 2010	5 2011(a)
1. Prior .....	481	.435	.355	.118	.156
2. 2007 .....	224	.150	.99	.97	.74
3. 2008 .....	XXX	.89	.166	.84	.106
4. 2009 .....	XXX	XXX	.189	.224	.92
5. 2010 .....	XXX	XXX	XXX	.235	.245
6. 2011 .....	XXX	XXX	XXX	XXX	.132

**Section B–Other Accident and Health**

1. Prior .....	883	.664	.383	.206	.73
2. 2007 .....	374	.258	.200	.131	.14
3. 2008 .....	XXX	.578	.162	.62	.55
4. 2009 .....	XXX	XXX	.650	.290	.26
5. 2010 .....	XXX	XXX	XXX	.599	.113
6. 2011 .....	XXX	XXX	XXX	XXX	.297

**Section C–Credit Accident and Health**

1. Prior .....	0	0	0	0	0
2. 2007 .....	0	0	0	0	0
3. 2008 .....	XXX	0	0	0	0
4. 2009 .....	XXX	XXX	0	0	0
5. 2010 .....	XXX	XXX	XXX	0	0
6. 2011 .....	XXX	XXX	XXX	XXX	XXX

**Section D -**

1. Prior .....	0	0	0	0	0
2. 2007 .....	0	0	0	0	0
3. 2008 .....	XXX	0	0	0	0
4. 2009 .....	XXX	XXX	0	0	0
5. 2010 .....	XXX	XXX	XXX	0	0
6. 2011 .....	XXX	XXX	XXX	XXX	XXX

**Section E -**

1. Prior .....	0	0	0	0	0
2. 2007 .....	0	0	0	0	0
3. 2008 .....	XXX	0	0	0	0
4. 2009 .....	XXX	XXX	0	0	0
5. 2010 .....	XXX	XXX	XXX	0	0
6. 2011 .....	XXX	XXX	XXX	XXX	XXX

**Section F-**

1. Prior .....	0	0	0	0	0
2. 2007 .....	0	0	0	0	0
3. 2008 .....	XXX	0	0	0	0
4. 2009 .....	XXX	XXX	0	0	0
5. 2010 .....	XXX	XXX	XXX	0	0
6. 2011 .....	XXX	XXX	XXX	XXX	XXX

**Section G-**

1. Prior .....	0	0	0	0	0
2. 2007 .....	0	0	0	0	0
3. 2008 .....	XXX	0	0	0	0
4. 2009 .....	XXX	XXX	0	0	0
5. 2010 .....	XXX	XXX	XXX	0	0
6. 2011 .....	XXX	XXX	XXX	XXX	XXX

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

**SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE O SUPPLEMENT**  
**SUPPLEMENTAL SCHEDULE O – PART 2**

**Development of Incurred Losses**

**(\$000 OMITTED)**

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2007	2 2008	3 2009	4 2010	5 2011
1. Prior.....		0	.0	0	0
2. 2007.....	.13	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**Section B - Other Accident and Health**

1. Prior.....		0	.0	0	0
2. 2007.....	0	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**Section C - Credit Accident and Health**

1. Prior.....		0	.0	0	0
2. 2007.....	0	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**Section D-**

1. Prior.....		0	.0	0	0
2. 2007.....	0	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**Section E-**

1. Prior.....		0	.0	0	0
2. 2007.....	0	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**Section F-**

1. Prior.....		0	.0	0	0
2. 2007.....	0	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**Section G-**

1. Prior.....		0	.0	0	0
2. 2007.....	0	0	.0	0	0
3. 2008.....	XXX	0	.0	0	0
4. 2009.....	XXX	XXX	.0	0	0
5. 2010.....	XXX	XXX	XXX	0	0
6. 2011.....	XXX	XXX	XXX	XXX	

**SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE O SUPPLEMENT**  
**SUPPLEMENTAL SCHEDULE O – PART 3**

**Development of Incurred Losses**

**(\$000 OMITTED)**

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2007	2 2008	3 2009	4 2010	5 2011
1. 2007 .....	457	.1,008	1,227	XXX	XXX
2. 2008 .....	XXX	.341	857	1,490	XXX
3. 2009 .....	XXX	XXX	1,081	1,245	1,364
4. 2010 .....	XXX	XXX	XXX	498	.540
5. 2011 .....	XXX	XXX	XXX	XXX	1,770

**Section B - Other Accident and Health**

1. 2007 .....	1,161	.1,376	.15,878	XXX	XXX
2. 2008 .....	XXX	.1,455	1,389	1,269	XXX
3. 2009 .....	XXX	XXX	1,468	1,495	1,369
4. 2010 .....	XXX	XXX	XXX	1,455	1,226
5. 2011 .....	XXX	XXX	XXX	XXX	1,254

**Section C - Credit Accident and Health**

1. 2007 .....	0	0	.0	XXX	XXX
2. 2008 .....	XXX	0	.0	0	XXX
3. 2009 .....	XXX	XXX	.0	0	0
4. 2010 .....	XXX	XXX	XXX	0	0
5. 2011 .....	XXX	XXX	XXX	XXX	

**Section D-**

1. 2007 .....	0	0	.0	XXX	XXX
2. 2008 .....	XXX	0	.0	0	XXX
3. 2009 .....	XXX	XXX	.0	0	0
4. 2010 .....	XXX	XXX	XXX	0	0
5. 2011 .....	XXX	XXX	XXX	XXX	

**Section E-**

1. 2007 .....	0	0	.0	XXX	XXX
2. 2008 .....	XXX	0	.0	0	XXX
3. 2009 .....	XXX	XXX	.0	0	0
4. 2010 .....	XXX	XXX	XXX	0	0
5. 2011 .....	XXX	XXX	XXX	XXX	

**Section F-**

1. 2007 .....	0	0	.0	XXX	XXX
2. 2008 .....	XXX	0	.0	0	XXX
3. 2009 .....	XXX	XXX	.0	0	0
4. 2010 .....	XXX	XXX	XXX	0	0
5. 2011 .....	XXX	XXX	XXX	XXX	

**Section G-**

1. 2007 .....	0	0	.0	XXX	XXX
2. 2008 .....	XXX	0	.0	0	XXX
3. 2009 .....	XXX	XXX	.0	0	0
4. 2010 .....	XXX	XXX	XXX	0	0
5. 2011 .....	XXX	XXX	XXX	XXX	

**SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2011 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE O SUPPLEMENT**  
**SUPPLEMENTAL SCHEDULE O – PART 4**

**Development of Incurred Losses**

**(\$000 OMITTED)**

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at the End of Year				
	1 2007	2 2008	3 2009	4 2010	5 2011
1. 2007.....	457	0	.0	0	0
2. 2008.....	XXX	0	.0	0	0
3. 2009.....	XXX	XXX	.0	0	0
4. 2010.....	XXX	XXX	XXX	0	0
5. 2011.....	XXX	XXX	XXX	XXX	XXX

**Section B – Other Accident and Health**

1. 2007.....	1,161	0	.0	0
2. 2008.....	XXX	0	.0	0
3. 2009.....	XXX	XXX	.0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

**Section C - Credit Accident and Health**

1. 2007.....	0	0	.0	0
2. 2008.....	XXX	0	.0	0
3. 2009.....	XXX	XXX	.0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

**Section D-**

1. 2007.....	0	0	.0	0
2. 2008.....	XXX	0	.0	0
3. 2009.....	XXX	XXX	.0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

**Section E-**

1. 2007.....	0	0	.0	0
2. 2008.....	XXX	0	.0	0
3. 2009.....	XXX	XXX	.0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

**Section F-**

1. 2007.....	0	0	.0	0
2. 2008.....	XXX	0	.0	0
3. 2009.....	XXX	XXX	.0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

**Section G-**

1. 2007.....	0	0	.0	0
2. 2008.....	XXX	0	.0	0
3. 2009.....	XXX	XXX	.0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

**SUPPLEMENTAL SCHEDULE O - PART 5**

**(\$000 OMITTED)**

**Reserve and Liability Methodology - Exhibits 6 and 8**

Line of Business	1 Methodology	2 Amount
1. Industrial life.....	OTHER.....	80
2. Ordinary life.....	OTHER.....	14,518
3. Individual annuity.....		
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....		
7. Group annuities.....	DEVELOPMENT.....	83
8. Group accident and health.....	DEVELOPMENT.....	6,077
9. Credit accident and health.....		
10. Other accident and health.....	DEVELOPMENT.....	3,830
11. Total.....		24,587

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