



LIFE AND ACCIDENT AND HEALTH COMPANIES — ASSOCIATION EDITION

ANNUAL STATEMENT
For the Year Ended December 31, 2012
OF THE CONDITION AND AFFAIRS OF THE
CINCINNATI LIFE INSURANCE COMPANY

NAIC Group Code 00244, 00244 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, FAIRFIELD, OH, 45014-5141
Main Administrative Office 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, 45014-5141 513-870-2000
Mail Address 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, 45014-5141
Primary Location of Books and Records 6200 SOUTH GILMORE ROAD, FAIRFIELD, OH, 45014-5141 513-870-2000
Internet Web Site Address WWW.CINFIN.COM
Statutory Statement Contact KEVIN CHRISTOPHER SMITH 513-603-5564
KEVIN\_SMITH@CINFIN.COM 513-603-5500

OFFICERS

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

OTHER OFFICERS

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

State of OHIO
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
CFO & SENIOR VICE PRESIDENT

TODD HANCOCK PENDERY
TREASURER & VICE PRESIDENT

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

Subscribed and sworn to before me this 15th day of February, 2013

KAREN S. DONNER, NOTARY PUBLIC
OCTOBER 26, 2014



**ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,366,237		0	588	4,366,825
2. Annuity considerations	630,151				630,151
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	4,996,389	0	0	588	4,996,977
<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	454,270		0	0	454,270
10. Matured endowments	0			0	0
11. Annuity benefits	525,489		0		525,489
12. Surrender values and withdrawals for life contracts	316,385			0	316,385
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	1,296,144	0	0	0	1,296,144
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	23	454,270			0	0	0	0	23	454,270
Settled during current year:										
18.1 By payment in full	23	454,270			0	0	0	0	23	454,270
18.2 By payment on compromised claims									0	0
18.3 Totals paid	23	454,270	0	0	0	0	0	0	23	454,270
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	23	454,270	0	0	0	0	0	0	23	454,270
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	6,513	1,447,826,150	0	0	0	0	1	1,047	6,514	1,447,827,197
21. Issued during year	712	132,078,830			0	0	0	0	712	132,078,830
22. Other changes to in force (Net)	(574)	(82,072,257)			0	0	52	69,296	(522)	(82,002,961)
23. In force December 31 of current year	6,651	1,497,832,723	0	0	0	0	53	70,343	6,704	1,497,903,066

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	102	102		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	270	77		0	0
25.2 Guaranteed renewable (b)	95,754	99,354		97,888	95,613
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	22	6		0	0
25.5 All other (b)	788	152		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	96,834	99,590	0	97,888	95,613
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	96,936	99,692	0	97,888	95,613

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	37,067		0	0	37,067
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	37,067	0	0	0	37,067
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	7,882			0	7,882
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	7,882	0	0	0	7,882
<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. Pols. & 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	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
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>										
20. In force December 31, prior year	20	744,328	(a)	0	0	0	0	0	20	744,328
21. Issued during year	1	500,000			0	0	0	0	1	500,000
22. Other changes to in force (Net)	(15)	(680,203)			0	0	0	0	(15)	(680,203)
23. In force December 31 of current year	6	564,125	(a)	0	0	0	0	0	6	564,125

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	0	0		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	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 \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary, 3-4 Credit Life, 5-6 Group, 7-8 Industrial, 9-10 Total. Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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 \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,633,096		0	36	1,633,132
2. Annuity considerations	108,755				108,755
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,741,851	0	0	36	1,741,887
<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	34,483		0	0	34,483
10. Matured endowments	0			0	0
11. Annuity benefits	118,950		1,200		120,150
12. Surrender values and withdrawals for life contracts	254,927			0	254,927
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health			1,200	0	0
15. Totals	408,359	0	1,200	0	409,559
<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. Pols. & 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	34,483			0	0	0	0	1	34,483
Settled during current year:										
18.1 By payment in full	1	34,483			0	0	0	0	1	34,483
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	34,483	0	0	0	0	0	0	1	34,483
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	34,483	0	0	0	0	0	0	1	34,483
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	1,252	522,679,921	0	0	0	0	0	0	1,252	522,679,921
21. Issued during year	261	95,308,323			0	0	0	0	261	95,308,323
22. Other changes to in force (Net)	(165)	(36,765,572)			0	0	7	6,000	(158)	(36,759,572)
23. In force December 31 of current year	1,348	581,222,672	0	0	0	0	7	6,000	1,355	581,228,672

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	96	28		0	0
25.2 Guaranteed renewable (b)	27,788	20,558		0	2,263
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	6	2		0	0
25.5 All other (b)	11	2		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	27,901	20,590	0	0	2,263
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	27,901	20,590	0	0	2,263

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF **Arkansas**

DURING THE YEAR **2012**

NAIC Group Code **00244**

**LIFE INSURANCE**

NAIC Company Code **76236**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,722,785		0	122	2,722,907
2. Annuity considerations	371,361				371,361
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,094,146	0	0	122	3,094,268
<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	509,825		0	0	509,825
10. Matured endowments	0			0	0
11. Annuity benefits	84,640		0		84,640
12. Surrender values and withdrawals for life contracts	219,884			0	219,884
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	814,349	0	0	0	814,349
<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. Pols. & 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	9	509,825			0	0	0	0	9	509,825
Settled during current year:										
18.1 By payment in full	9	509,825			0	0	0	0	9	509,825
18.2 By payment on compromised claims									0	0
18.3 Totals paid	9	509,825	0	0	0	0	0	0	9	509,825
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	9	509,825	0	0	0	0	0	0	9	509,825
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	2,011	690,863,469	0	(a)	1	19,864,548	0	0	2,012	710,728,017
21. Issued during year	210	95,027,246			0	0	0	0	210	95,027,246
22. Other changes to in force (Net)	(104)	(38,957,828)			0	208,070	7	8,000	(97)	(38,741,758)
23. In force December 31 of current year	2,117	746,932,887	0	(a)	1	20,072,618	7	8,000	2,125	767,013,505

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	278	278		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	5,816	5,536		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	37	7		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	5,852	5,543	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,130	5,821	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,298,250		0	726	5,298,977
2. Annuity considerations	1,160,917				1,160,917
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	6,459,167	0	0	726	6,459,893
<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	1,300,798		0	2,025	1,302,823
10. Matured endowments	0			0	0
11. Annuity benefits	404,166		0		404,166
12. Surrender values and withdrawals for life contracts	469,773			3,726	473,500
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	2,174,738	0	0	5,751	2,180,489
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	18	1,300,798			0	0	2	2,025	20	1,302,823
Settled during current year:										
18.1 By payment in full	18	1,300,798			0	0	2	2,025	20	1,302,823
18.2 By payment on compromised claims									0	0
18.3 Totals paid	18	1,300,798	0	0	0	0	2	2,025	20	1,302,823
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	18	1,300,798	0	0	0	0	2	2,025	20	1,302,823
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	10,897	1,509,878,784	0	(a)	0	0	621	590,670	11,518	1,510,469,454
21. Issued during year	845	166,578,746			0	0	0	0	845	166,578,746
22. Other changes to in force (Net)	(928)	(88,631,843)			0	0	(325)	(312,894)	(1,253)	(88,944,737)
23. In force December 31 of current year	10,814	1,587,825,687	0	(a)	0	0	296	277,776	11,110	1,588,103,463

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	28,778	31,299		60,321	33,190
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	143	37		0	0
25.5 All other (b)	527	102		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	29,448	31,437	0	60,321	33,190
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	29,448	31,437	0	60,321	33,190

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	0		0	0	0
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	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
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

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. Pols. & 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	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
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>										
20. In force December 31, prior year	0	0	(a)	0	No. of Policies	0	0	0	0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	(a)	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	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)					
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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various accident and health policy types.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	339,499		0	0	339,499
2. Annuity considerations	37,009				37,009
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	376,508	0	0	0	376,508
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	22,106			0	22,106
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	22,106	0	0	0	22,106
<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. Pols. & 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	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
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>										
20. In force December 31, prior year	631	77,955,526	(a)	0	No. of Policies	0	0	0	631	77,955,526
21. Issued during year	19	7,815,200			0	0	0	0	19	7,815,200
22. Other changes to in force (Net)	(34)	(9,949,403)			0	0	2	1,593	(32)	(9,947,811)
23. In force December 31 of current year	616	75,821,323	(a)	0	0	0	2	1,593	618	75,822,916

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	3,030	3,028		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	270	70		0	0
25.5 All other (b)	57	11		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	3,357	3,109	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,357	3,109	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	221,147		0	91	221,238
2. Annuity considerations	740,970				740,970
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	962,117	0	0	91	962,208
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	346,085		0		346,085
12. Surrender values and withdrawals for life contracts	2,131			0	2,131
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	348,216	0	0	0	348,216
<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. Pols. & 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	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
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>										
20. In force December 31, prior year	236	52,879,102	(a)	0	No. of Policies	0	0	0	236	52,879,102
21. Issued during year	59	13,524,304			0	0	0	0	59	13,524,304
22. Other changes to in force (Net)	(10)	(2,827,209)			0	0	5	3,685	(5)	(2,823,524)
23. In force December 31 of current year	285	63,576,197	(a)	0	0	0	5	3,685	290	63,579,882

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	4,923	4,899		8,133	101,461
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	31	6		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	4,954	4,905	0	8,133	101,461
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,954	4,905	0	8,133	101,461

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	94,305		0	2,949	97,254
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	94,305	0	0	2,949	97,254
<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	19,132		0	2,000	21,132
10. Matured endowments	1,000			0	1,000
11. Annuity benefits	0		0	0	0
12. Surrender values and withdrawals for life contracts	0			1,436	1,436
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	20,132	0	0	3,436	23,568
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	5	20,132			0	0	3	2,000	8	22,132
Settled during current year:										
18.1 By payment in full	5	20,132			0	0	3	2,000	8	22,132
18.2 By payment on compromised claims									0	0
18.3 Totals paid	5	20,132	0	0	0	0	3	2,000	8	22,132
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	5	20,132	0	0	0	0	3	2,000	8	22,132
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	136	4,329,219	0	0	0	0	694	700,603	830	5,029,822
21. Issued during year	4	2,500,000			0	0	0	0	4	2,500,000
22. Other changes to in force (Net)	(24)	(874,264)			0	0	(384)	(345,793)	(408)	(1,220,057)
23. In force December 31 of current year	116	5,954,955	0	0	0	0	310	354,810	426	6,309,765

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	2,497	2,513		0	1,009
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	6	2		0	0
25.5 All other (b)	73	14		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	2,576	2,529	0	0	1,009
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,576	2,529	0	0	1,009

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,740,928		0	312	5,741,240
2. Annuity considerations	1,214,293				1,214,293
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	6,955,221	0	0	312	6,955,533
<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	2,894,512		0	0	2,894,512
10. Matured endowments	0				0
11. Annuity benefits	2,097,921		0		2,097,921
12. Surrender values and withdrawals for life contracts	975,213				975,213
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	5,967,646	0	0	0	5,967,646
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	39	2,894,512			0	0	0	0	39	2,894,512
Settled during current year:										
18.1 By payment in full	39	2,894,512			0	0	0	0	39	2,894,512
18.2 By payment on compromised claims									0	0
18.3 Totals paid	39	2,894,512	0	0	0	0	0	0	39	2,894,512
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	39	2,894,512	0	0	0	0	0	0	39	2,894,512
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	7,007	1,354,118,303	0	(a)	0	0	0	0	7,007	1,354,118,303
21. Issued during year	550	96,256,220			0	0	0	0	550	96,256,220
22. Other changes to in force (Net)	(888)	(105,167,673)			0	0	31	34,435	(857)	(105,133,238)
23. In force December 31 of current year	6,669	1,345,206,850	0	(a)	0	0	31	34,435	6,700	1,345,241,285

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					0
24.3 Collectively renewable policies (b)	1,120	1,120			0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	182,614	177,944		65,045	62,496
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	10	3		0	0
25.5 All other (b)	1,493	289		3,792	1,097
25.6 Totals (sum of Lines 25.1 to 25.5)	184,117	178,235	0	68,838	63,594
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	185,236	179,354	0	68,838	63,594

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	12,052,571		0	1,618	12,054,189
2. Annuity considerations	868,004				868,004
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	12,920,575	0	0	1,618	12,922,193
<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	7,085,178		316,528	0	7,401,706
10. Matured endowments	2,500			0	2,500
11. Annuity benefits	842,634		0		842,634
12. Surrender values and withdrawals for life contracts	1,293,070			0	1,293,070
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	9,223,382	0	316,528	0	9,539,910
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	75	7,087,678			1	316,528	0	0	76	7,404,206
Settled during current year:										
18.1 By payment in full	75	7,087,678			1	316,528	0	0	76	7,404,206
18.2 By payment on compromised claims									0	0
18.3 Totals paid	75	7,087,678	0	0	1	316,528	0	0	76	7,404,206
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	75	7,087,678	0	0	1	316,528	0	0	76	7,404,206
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	21,063	3,592,790,265	0	(a)	0	0	0	0	21,063	3,592,790,265
21. Issued during year	2,937	410,972,644			0	0	0	0	2,937	410,972,644
22. Other changes to in force (Net)	(2,065)	(231,698,381)			0	0	96	86,685	(1,969)	(231,611,696)
23. In force December 31 of current year	21,935	3,772,064,528	0	(a)	0	0	96	86,685	22,031	3,772,151,213

(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)	13,355	13,352		12,407	27,807
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					0
24.3 Collectively renewable policies (b)	45	45		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	390,156	400,282		82,461	132,397
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	809	209		0	0
25.5 All other (b)	925	179		24	7
25.6 Totals (sum of Lines 25.1 to 25.5)	391,890	400,670	0	82,485	132,404
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	405,290	414,067	0	94,893	160,211

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	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
<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.					0
1302.					0
1303.					0
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. Pols. & 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										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	(a)	0	No. of Policies	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	(a)	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	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)					
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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	40,671		0	0	40,671
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	40,671	0	0	0	40,671
<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	0		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	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
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

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. Pols. & 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	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
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	44	11,961,581	0	0	0	0	0	0	44	11,961,581
21. Issued during year	0	0			0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(653,300)			0	0	0	0	(2)	(653,300)
23. In force December 31 of current year	42	11,308,281	0	0	0	0	0	0	42	11,308,281

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	590	589		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	39	10		272	80
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	629	599	0	272	80
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	629	599	0	272	80

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, Medicare Title XVIII, and various individual policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	16,472,742		0	183	16,472,925
2. Annuity considerations	4,484,596				4,484,596
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	20,957,338	0	0	183	20,957,521
<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	8,098,366		0	3,209	8,101,575
10. Matured endowments	269			17,844	18,113
11. Annuity benefits	4,018,038		0		4,018,038
12. Surrender values and withdrawals for life contracts	2,320,869			15	2,320,884
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	14,437,542	0	0	21,068	14,458,610
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	110	8,098,635			0	0	17	21,053	127	8,119,688
Settled during current year:										
18.1 By payment in full	110	8,098,635			0	0	17	21,053	127	8,119,688
18.2 By payment on compromised claims									0	0
18.3 Totals paid	110	8,098,635	0	0	0	0	17	21,053	127	8,119,688
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	110	8,098,635	0	0	0	0	17	21,053	127	8,119,688
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	27,883	5,366,809,484	0	0	1	30,000	5,866	373,846	33,750	5,367,213,330
21. Issued during year	2,110	413,055,095			0	0	0	0	2,110	413,055,095
22. Other changes to in force (Net)	(1,407)	(225,825,190)			0	0	(371)	(1,384)	(1,778)	(225,826,574)
23. In force December 31 of current year	28,586	5,554,039,388	0	0	1	30,000	5,495	372,462	34,082	5,554,441,850

(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)	3,310	3,309		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	1,586	1,586		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	512,805	523,234		74,567	85,403
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	1,087	280		0	0
25.5 All other (b)	613	119		1,601	463
25.6 Totals (sum of Lines 25.1 to 25.5)	514,505	523,633	0	76,168	85,866
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	519,401	528,528	0	76,168	85,866

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	16,743,729		0	4,297	16,748,026
2. Annuity considerations	3,108,334				3,108,334
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	19,852,064	0	0	4,297	19,856,360
<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	8,700,695		0	1,500	8,702,195
10. Matured endowments	0			0	0
11. Annuity benefits	3,235,868		5,465		3,241,333
12. Surrender values and withdrawals for life contracts	1,253,325			2,979	1,256,305
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	13,189,888	0	5,465	4,479	13,199,833
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	81	8,700,695			0	0	2	1,500	83	8,702,195
Settled during current year:										
18.1 By payment in full	81	8,700,695			0	0	2	1,500	83	8,702,195
18.2 By payment on compromised claims									0	0
18.3 Totals paid	81	8,700,695	0	0	0	0	2	1,500	83	8,702,195
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	81	8,700,695	0	0	0	0	2	1,500	83	8,702,195
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	30,393	5,048,501,686	0	0	0	40,000	2,932	2,662,907	33,325	5,051,204,593
21. Issued during year	3,282	478,738,460			0	0	0	0	3,282	478,738,460
22. Other changes to in force (Net)	(2,486)	(329,135,346)			0	0	(2,680)	(2,336,950)	(5,166)	(331,472,296)
23. In force December 31 of current year	31,189	5,198,104,800	0	0	0	40,000	252	325,957	31,441	5,198,470,757

(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)	2,736	2,735		65,721	147,292
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					0
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)	406	116		0	0
25.2 Guaranteed renewable (b)	384,996	396,977		156,378	88,086
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	111	29		0	0
25.5 All other (b)	797	154		4,716	1,365
25.6 Totals (sum of Lines 25.1 to 25.5)	386,310	397,276	0	161,094	89,451
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	389,114	400,078	0	226,815	236,743

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	9,127,367		0	0	9,127,367
2. Annuity considerations	10,499,286				10,499,286
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	19,626,653	0	0	0	19,626,653
<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	3,667,255		0	0	3,667,255
10. Matured endowments	0				0
11. Annuity benefits	14,855,598		0		14,855,598
12. Surrender values and withdrawals for life contracts	952,064				952,064
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	19,474,916	0	0	0	19,474,916
<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. Pols. & 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	21	3,667,255			0	0	0	0	21	3,667,255
Settled during current year:										
18.1 By payment in full	21	3,667,255			0	0	0	0	21	3,667,255
18.2 By payment on compromised claims									0	0
18.3 Totals paid	21	3,667,255	0	0	0	0	0	0	21	3,667,255
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	21	3,667,255	0	0	0	0	0	0	21	3,667,255
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	13,667	3,353,705,904	0	0	0	20,000	0	0	13,667	3,353,725,904
21. Issued during year	1,400	330,040,178			0	0	0	0	1,400	330,040,178
22. Other changes to in force (Net)	(583)	(121,436,538)			0	0	4	3,500	(579)	(121,433,038)
23. In force December 31 of current year	14,484	3,562,309,544	0	0	0	20,000	4	3,500	14,488	3,562,333,044

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	44	44		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	126,159	128,748		4,332	10,063
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	16,090	4,150		4,697	1,390
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	142,249	132,898	0	9,029	11,453
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	142,293	132,941	0	9,029	11,453

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,962,556		0	0	2,962,556
2. Annuity considerations	634,644				634,644
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,597,199	0	0	0	3,597,199
<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	1,270,614		0	0	1,270,614
10. Matured endowments	0				0
11. Annuity benefits	575,278		0		575,278
12. Surrender values and withdrawals for life contracts	129,447				129,447
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	1,975,339	0	0	0	1,975,339
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	8	1,270,614			0	0	0	0	8	1,270,614
Settled during current year:										
18.1 By payment in full	8	1,270,614			0	0	0	0	8	1,270,614
18.2 By payment on compromised claims									0	0
18.3 Totals paid	8	1,270,614	0	0	0	0	0	0	8	1,270,614
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	8	1,270,614	0	0	0	0	0	0	8	1,270,614
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	2,929	908,838,342	0	(a)	0	0	0	0	2,929	908,838,342
21. Issued during year	336	135,067,898			0	0	0	0	336	135,067,898
22. Other changes to in force (Net)	(130)	(57,902,403)			0	0	1	593	(129)	(57,901,811)
23. In force December 31 of current year	3,135	986,003,837	0	(a)	0	0	1	593	3,136	986,004,430

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	37,717	37,570		0	1,326
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	37,717	37,570	0	0	1,326
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	37,717	37,570	0	0	1,326

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	8,600,422		0	2,442	8,602,864
2. Annuity considerations	207,391				207,391
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	8,807,813	0	0	2,442	8,810,255
<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	3,971,302		0	5,500	3,976,802
10. Matured endowments	9			593	602
11. Annuity benefits	586,161		0		586,161
12. Surrender values and withdrawals for life contracts	894,725			7,353	902,078
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	5,452,197	0	0	13,446	5,465,642
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	86	3,971,311			0	0	7	6,093	93	3,977,403
Settled during current year:										
18.1 By payment in full	86	3,971,311			0	0	7	6,093	93	3,977,403
18.2 By payment on compromised claims									0	0
18.3 Totals paid	86	3,971,311	0	0	0	0	7	6,093	93	3,977,403
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	86	3,971,311	0	0	0	0	7	6,093	93	3,977,403
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	14,756	2,765,207,976	0	0	0	0	423	444,734	15,179	2,765,652,710
21. Issued during year	1,490	249,819,244			0	0	0	0	1,490	249,819,244
22. Other changes to in force (Net)	(1,368)	(163,657,031)			0	0	(126)	(92,098)	(1,494)	(163,749,129)
23. In force December 31 of current year	14,878	2,851,370,189	0	0	0	0	297	352,636	15,175	2,851,722,825

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	389	389		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	284,092	275,288		106,586	108,286
25.3 Non-renewable for stated reasons only (b)	0	0		17,750	33,788
25.4 Other accident only	478	123		0	0
25.5 All other (b)	2,983	577		500	145
25.6 Totals (sum of Lines 25.1 to 25.5)	287,553	275,988	0	124,836	142,218
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	287,942	276,377	0	124,836	142,218

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	511,559		0	127	511,686
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	511,559	0	0	127	511,686
<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	43,773		0	0	43,773
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	11,163			0	11,163
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	54,936	0	0	0	54,936
<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. Pols. & 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	2	43,773			0	0	0	0	2	43,773
Settled during current year:										
18.1 By payment in full	2	43,773			0	0	0	0	2	43,773
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	43,773	0	0	0	0	0	0	2	43,773
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	43,773	0	0	0	0	0	0	2	43,773
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	970	71,789,025	(a)	0	0	0	0	0	970	71,789,025
21. Issued during year	134	13,629,282			0	0	0	0	134	13,629,282
22. Other changes to in force (Net)	(292)	(7,045,595)			0	0	2	2,500	(290)	(7,043,095)
23. In force December 31 of current year	812	78,372,712	(a)	0	0	0	2	2,500	814	78,375,212

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	1,166	1,166		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	7	2		0	0
25.5 All other (b)	82	16		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	1,255	1,183	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,255	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividends and claims.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,352,501		0	835	2,353,336
2. Annuity considerations	58,826				58,826
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	2,411,327	0	0	835	2,412,162
<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	905,608		0	1,000	906,608
10. Matured endowments	0			0	0
11. Annuity benefits	110,496		0		110,496
12. Surrender values and withdrawals for life contracts	77,413			4,420	81,832
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	1,093,517	0	0	5,420	1,098,937
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	5	905,608			0	0	1	1,000	6	906,608
Settled during current year:										
18.1 By payment in full	5	905,608			0	0	1	1,000	6	906,608
18.2 By payment on compromised claims									0	0
18.3 Totals paid	5	905,608	0	0	0	0	1	1,000	6	906,608
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	5	905,608	0	0	0	0	1	1,000	6	906,608
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	2,576	912,065,466	0	(a)	0	0	231	245,621	2,807	912,311,087
21. Issued during year	326	147,766,043			0	0	0	0	326	147,766,043
22. Other changes to in force (Net)	(117)	(42,161,375)			0	0	(106)	(126,354)	(223)	(42,287,729)
23. In force December 31 of current year	2,785	1,017,670,134	0	(a)	0	0	125	119,267	2,910	1,017,789,401

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	43,925	45,527		0	845
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	195	38		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	44,119	45,565	0	0	845
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	44,119	45,565	0	0	845

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	481,753		0	214	481,968
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	481,753	0	0	214	481,968
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	3,672			0	3,672
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	3,672	0	0	0	3,672
<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. Pols. & 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	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
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>										
20. In force December 31, prior year	378	167,386,500	(a)	0	No. of Policies	0	0	0	378	167,386,500
21. Issued during year	61	22,417,003			0	0	0	0	61	22,417,003
22. Other changes to in force (Net)	(37)	(10,868,660)			0	0	13	12,470	(24)	(10,856,190)
23. In force December 31 of current year	402	178,934,843	(a)	0	0	0	13	12,470	415	178,947,313

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	5	1		0	0
25.2 Guaranteed renewable (b)	3,014	3,137		1,854	1,038
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	21	5		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	3,041	3,144	0	1,854	1,038
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,041	3,144	0	1,854	1,038

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	12,158,169		0	20,436	12,178,604
2. Annuity considerations	2,841,032				2,841,032
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	14,999,201	0	0	20,436	15,019,637
<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	4,958,159		0	43,000	5,001,159
10. Matured endowments	500			250	750
11. Annuity benefits	2,361,802		0		2,361,802
12. Surrender values and withdrawals for life contracts	417,716			37,643	455,359
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	7,738,176	0	0	80,893	7,819,069
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	84	4,958,659			0	0	45	43,250	129	5,001,909
Settled during current year:										
18.1 By payment in full	84	4,958,659			0	0	45	43,250	129	5,001,909
18.2 By payment on compromised claims									0	0
18.3 Totals paid	84	4,958,659	0	0	0	0	45	43,250	129	5,001,909
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	84	4,958,659	0	0	0	0	45	43,250	129	5,001,909
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	18,714	4,417,192,588	0	0	0	0	3,070	3,274,735	21,784	4,420,467,323
21. Issued during year	1,367	420,301,958			0	0	0	0	1,367	420,301,958
22. Other changes to in force (Net)	(1,083)	(206,332,790)			0	0	(546)	(307,953)	(1,629)	(206,640,743)
23. In force December 31 of current year	18,998	4,631,161,756	0	0	0	0	2,524	2,966,782	21,522	4,634,128,538

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	89	89		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	444,400	444,377		73,128	22,122
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	207	53		0	0
25.5 All other (b)	1,055	204		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	445,661	444,634	0	73,128	22,122
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	445,750	444,723	0	73,128	22,122

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	8,746,802		0	0	8,746,802
2. Annuity considerations	5,128,376				5,128,376
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	13,875,177	0	0	0	13,875,177
<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	2,595,057		0	0	2,595,057
10. Matured endowments	0				0
11. Annuity benefits	2,636,680		0		2,636,680
12. Surrender values and withdrawals for life contracts	64,250				64,250
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	5,295,986	0	0	0	5,295,986
<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. Pols. & 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	12	2,595,057			0	0	0	0	12	2,595,057
Settled during current year:										
18.1 By payment in full	12	2,595,057			0	0	0	0	12	2,595,057
18.2 By payment on compromised claims									0	0
18.3 Totals paid	12	2,595,057	0	0	0	0	0	0	12	2,595,057
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	12	2,595,057	0	0	0	0	0	0	12	2,595,057
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	10,766	3,842,823,835	0	(a)	0	0	0	0	10,766	3,842,823,835
21. Issued during year	1,031	389,863,687			0	0	0	0	1,031	389,863,687
22. Other changes to in force (Net)	(440)	(149,452,248)			0	0	8	6,000	(432)	(149,446,248)
23. In force December 31 of current year	11,357	4,083,235,274	0	(a)	0	0	8	6,000	11,365	4,083,241,274

(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)	13,531	13,528		4,378	9,811
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					0
24.3 Collectively renewable policies (b)	168	168			0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	81,312	83,718		11,379	(11,055)
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	11	2		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	81,323	83,720	0	11,379	(11,055)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	95,022	97,416	0	15,756	(1,243)

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	264,650		0	175	264,825
2. Annuity considerations	150,300				150,300
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	414,950	0	0	175	415,125
<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	5,000		0	0	5,000
10. Matured endowments	0			0	0
11. Annuity benefits	750		0		750
12. Surrender values and withdrawals for life contracts	24,487			0	24,487
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	30,237	0	0	0	30,237
<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. Pols. & 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	5,000			0	0	0	0	1	5,000
Settled during current year:										
18.1 By payment in full	1	5,000			0	0	0	0	1	5,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	5,000	0	0	0	0	0	0	1	5,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	5,000	0	0	0	0	0	0	1	5,000
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	434	33,176,760	0	0	0	0	0	0	434	33,176,760
21. Issued during year	82	9,974,369			0	0	0	0	82	9,974,369
22. Other changes to in force (Net)	(55)	(4,750,188)			0	0	5	5,093	(50)	(4,745,096)
23. In force December 31 of current year	461	38,400,941	0	0	0	0	5	5,093	466	38,406,034

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	1,907	1,910		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	22	6		0	0
25.5 All other (b)	224	43		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	2,154	1,959	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,154	1,959	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,399,187		0	0	7,399,187
2. Annuity considerations	607,708				607,708
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	8,006,895	0	0	0	8,006,895
<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	4,640,722		0	0	4,640,722
10. Matured endowments	0				0
11. Annuity benefits	1,449,407		0		1,449,407
12. Surrender values and withdrawals for life contracts	886,678				886,678
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	6,976,807	0	0	0	6,976,807
<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. Pols. & 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	26	4,640,722			0	0	0	0	26	4,640,722
Settled during current year:										
18.1 By payment in full	26	4,640,722			0	0	0	0	26	4,640,722
18.2 By payment on compromised claims									0	0
18.3 Totals paid	26	4,640,722	0	0	0	0	0	0	26	4,640,722
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	26	4,640,722	0	0	0	0	0	0	26	4,640,722
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	11,052	2,752,148,869	0	(a)	0	0	2	2,094	11,054	2,752,150,963
21. Issued during year	1,047	251,096,402			0	0	0	0	1,047	251,096,402
22. Other changes to in force (Net)	(707)	(155,988,954)			0	0	1	406	(706)	(155,988,548)
23. In force December 31 of current year	11,392	2,847,256,317	0	(a)	0	0	3	2,500	11,395	2,847,258,817

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	68	68		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	75,842	77,651		0	2,118
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	193	37		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	76,035	77,689	0	0	2,118
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	76,102	77,756	0	0	2,118

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,026,627		0	0	1,026,627
2. Annuity considerations	25,000				25,000
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,051,627	0	0	0	1,051,627
<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	150,000		0	0	150,000
10. Matured endowments	0				0
11. Annuity benefits	11,883		0		11,883
12. Surrender values and withdrawals for life contracts	11,506				11,506
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	173,389	0	0	0	173,389
<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. Pols. & 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	150,000			0	0	0	0	1	150,000
Settled during current year:										
18.1 By payment in full	1	150,000			0	0	0	0	1	150,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	150,000	0	0	0	0	0	0	1	150,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	150,000	0	0	0	0	0	0	1	150,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	860	314,590,112	0	(a)	0	0	0	0	860	314,590,112
21. Issued during year	103	39,810,899			0	0	0	0	103	39,810,899
22. Other changes to in force (Net)	(49)	(9,036,560)			0	0	0	0	(49)	(9,036,560)
23. In force December 31 of current year	914	345,364,451	0	(a)	0	0	0	0	914	345,364,451

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	6,531	6,528		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	34	7		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	6,565	6,534	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,565	6,534	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,693,275		0	0	1,693,275
2. Annuity considerations	178,175				178,175
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,871,450	0	0	0	1,871,450
<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	153,918		0	0	153,918
10. Matured endowments	0				0
11. Annuity benefits	693,014		0		693,014
12. Surrender values and withdrawals for life contracts	25,281				25,281
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	872,213	0	0	0	872,213
<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. Pols. & 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	153,918			0	0	0	0	3	153,918
Settled during current year:										
18.1 By payment in full	3	153,918			0	0	0	0	3	153,918
18.2 By payment on compromised claims									0	0
18.3 Totals paid	3	153,918	0	0	0	0	0	0	3	153,918
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	3	153,918	0	0	0	0	0	0	3	153,918
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	1,717	466,128,287	0	(a)	0	0	0	0	1,717	466,128,287
21. Issued during year	302	78,678,999			0	0	0	0	302	78,678,999
22. Other changes to in force (Net)	(134)	(29,474,470)			0	0	0	0	(134)	(29,474,470)
23. In force December 31 of current year	1,885	515,332,816	0	(a)	0	0	0	0	1,885	515,332,816

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	12,639	13,050		0	578
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	1,019	263		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	13,658	13,313	0	0	578
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	13,658	13,313	0	0	578

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	349,780		0	269	350,049
2. Annuity considerations	51,218				51,218
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	400,998	0	0	269	401,267
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	65,857		0		65,857
12. Surrender values and withdrawals for life contracts	427			0	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	66,284	0	0	0	66,284
<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. Pols. & 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	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
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	182	43,116,062	0	0	0	0	0	0	182	43,116,062
21. Issued during year	18	4,305,001			0	0	0	0	18	4,305,001
22. Other changes to in force (Net)	(19)	(4,208,263)			0	0	13	12,593	(6)	(4,195,670)
23. In force December 31 of current year	181	43,212,800	0	0	0	0	13	12,593	194	43,225,393

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	7,441	7,441		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	820	159		1,985	574
25.6 Totals (sum of Lines 25.1 to 25.5)	8,261	7,600	0	1,985	574
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	8,261	7,600	0	1,985	574

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	343,928		0	0	343,928
2. Annuity considerations	605				605
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	344,533	0	0	0	344,533
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	10,038		0		10,038
12. Surrender values and withdrawals for life contracts	12,448			0	12,448
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	22,486	0	0	0	22,486
<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. Pols. & 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	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
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>										
20. In force December 31, prior year	213	80,465,670	(a)	0	0	0	0	0	213	80,465,670
21. Issued during year	16	5,750,000			0	0	0	0	16	5,750,000
22. Other changes to in force (Net)	(20)	(5,096,389)			0	0	0	0	(20)	(5,096,389)
23. In force December 31 of current year	209	81,119,281	(a)	0	0	0	0	0	209	81,119,281

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	5,184	5,277		0	149
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	5,184	5,277	0	0	149
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,184	5,277	0	0	149

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	540,402		0	222	540,624
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	540,402	0	0	222	540,624
<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	16,721		0	0	16,721
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	98,611			0	98,611
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	115,333	0	0	0	115,333
<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. Pols. & 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	16,721			0	0	0	0	3	16,721
Settled during current year:										
18.1 By payment in full	3	16,721			0	0	0	0	3	16,721
18.2 By payment on compromised claims									0	0
18.3 Totals paid	3	16,721	0	0	0	0	0	0	3	16,721
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	3	16,721	0	0	0	0	0	0	3	16,721
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	281	41,169,692	0	0	0	0	0	0	281	41,169,692
21. Issued during year	26	11,760,000			0	0	0	0	26	11,760,000
22. Other changes to in force (Net)	(50)	(7,165,950)			0	0	15	21,593	(35)	(7,144,357)
23. In force December 31 of current year	257	45,763,742	0	0	0	0	15	21,593	272	45,785,335

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	150	150		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	1,433	1,330		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	16	4		0	0
25.5 All other (b)	169	33		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	1,618	1,367	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,768	1,517	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	408,525		0	19	408,544
2. Annuity considerations	17,115				17,115
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	425,640	0	0	19	425,659
<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	199,366		0	0	199,366
10. Matured endowments	0				0
11. Annuity benefits	42,124		0		42,124
12. Surrender values and withdrawals for life contracts	27,252				27,252
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	268,742	0	0	0	268,742
<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. Pols. & 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	4	199,366			0	0	0	0	4	199,366
Settled during current year:										
18.1 By payment in full	4	199,366			0	0	0	0	4	199,366
18.2 By payment on compromised claims									0	0
18.3 Totals paid	4	199,366	0	0	0	0	0	0	4	199,366
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	4	199,366	0	0	0	0	0	0	4	199,366
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	637	54,539,946	(a)	0	0	0	0	0	637	54,539,946
21. Issued during year	50	15,756,858			0	0	0	0	50	15,756,858
22. Other changes to in force (Net)	(167)	(8,440,102)			0	0	3	3,593	(164)	(8,436,510)
23. In force December 31 of current year	520	61,856,702	(a)	0	0	0	3	3,593	523	61,860,295

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	6,763	5,991		252	717
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	6,763	5,991	0	252	717
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,763	5,991	0	252	717

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	324,154		0	448	324,602
2. Annuity considerations	8,723				8,723
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	332,877	0	0	448	333,325
<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	100,563		0	0	100,563
10. Matured endowments	3,500			0	3,500
11. Annuity benefits	331,765		0		331,765
12. Surrender values and withdrawals for life contracts	16,718			0	16,718
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	452,546	0	0	0	452,546
<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. Pols. & 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	4	104,063			0	0	0	0	4	104,063
Settled during current year:										
18.1 By payment in full	4	104,063			0	0	0	0	4	104,063
18.2 By payment on compromised claims									0	0
18.3 Totals paid	4	104,063	0	0	0	0	0	0	4	104,063
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	4	104,063	0	0	0	0	0	0	4	104,063
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	80	4,736,617	(a)	0	0	0	0	0	80	4,736,617
21. Issued during year	0	0			0	0	0	0	0	0
22. Other changes to in force (Net)	(45)	(4,579,454)			0	0	47	38,350	2	(4,541,104)
23. In force December 31 of current year	35	157,163	(a)	0	0	0	47	38,350	82	195,513

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	4,978	5,063		47,178	382,756
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	29	6		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	5,007	5,069	0	47,178	382,756
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,007	5,069	0	47,178	382,756

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various sub-totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,302,191		0	0	1,302,191
2. Annuity considerations	121,627				121,627
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,423,818	0	0	0	1,423,818
<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	761,313		0	0	761,313
10. Matured endowments	0				0
11. Annuity benefits	207,674		0		207,674
12. Surrender values and withdrawals for life contracts	764				764
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	969,751	0	0	0	969,751
<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. Pols. & 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	4	761,313			0	0	0	0	4	761,313
Settled during current year:										
18.1 By payment in full	4	761,313			0	0	0	0	4	761,313
18.2 By payment on compromised claims									0	0
18.3 Totals paid	4	761,313	0	0	0	0	0	0	4	761,313
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	4	761,313	0	0	0	0	0	0	4	761,313
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	1,552	601,180,448	0	0	0	0	0	0	1,552	601,180,448
21. Issued during year	127	68,842,019			0	0	0	0	127	68,842,019
22. Other changes to in force (Net)	(66)	(38,672,136)			0	0	1	500	(65)	(38,671,636)
23. In force December 31 of current year	1,613	631,350,331	0	0	0	0	1	500	1,614	631,350,831

(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)	3,725	3,724		5,177	11,604
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					0
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	4,223	4,221		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	4,223	4,221	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,948	7,945	0	5,177	11,604

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	44,096,897		109,952	49,067	44,255,916
2. Annuity considerations	3,026,049				3,026,049
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	47,122,946	0	109,952	49,067	47,281,965
<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	24,082,638		210,459	115,412	24,408,509
10. Matured endowments	26,532			11,894	38,426
11. Annuity benefits	6,425,701		89,747		6,515,448
12. Surrender values and withdrawals for life contracts	7,844,952			87,691	7,932,642
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	38,379,822	0	300,206	214,996	38,895,024
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	393	24,109,169			2	210,459	118	127,306	513	24,446,934
Settled during current year:										
18.1 By payment in full	393	24,109,169			2	210,459	118	127,306	513	24,446,934
18.2 By payment on compromised claims									0	0
18.3 Totals paid	393	24,109,169	0	0	2	210,459	118	127,306	513	24,446,934
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	393	24,109,169	0	0	2	210,459	118	127,306	513	24,446,934
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	81,951	14,565,402,880	0	0	6	1,960,437,593	11,361	12,081,890	93,318	16,537,922,363
21. Issued during year	4,483	1,104,236,701			0	16,799,435	0	0	4,483	1,121,036,136
22. Other changes to in force (Net)	(4,134)	(579,647,320)			0	12,822,527	5,092	3,985,488	958	(562,839,305)
23. In force December 31 of current year	82,300	15,089,992,261	0	0	6	1,990,059,555	16,453	16,067,378	98,759	17,096,119,194

(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)	7,086	6,846		1,154,869	2,588,267
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	1,648	1,648		6,580	6,580
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	266	76		0	0
25.2 Guaranteed renewable (b)	1,444,172	1,456,106		925,769	1,067,030
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	2,483	640		0	0
25.5 All other (b)	12,810	2,476		9,954	2,881
25.6 Totals (sum of Lines 25.1 to 25.5)	1,459,732	1,459,299	0	935,724	1,069,910
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,468,466	1,467,793	0	2,097,173	3,664,757

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, Medicare Title XVIII, and Other Individual Policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies (b), Federal Employees Health Benefits Program premium (b), Credit (Group and Individual), Collectively renewable policies (b), Medicare Title XVIII exempt from state taxes or fees, and Other Individual Policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	178		0	0	178
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	178	0	0	0	178
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	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
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

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. Pols. & 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	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
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	0	0	(a)	0	0	0	0	0	0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	(a)	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	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)					
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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	61,711		0	0	61,711
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	61,711	0	0	0	61,711
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	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
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

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. Pols. & 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	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
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	44	12,750,580	0	0	1	65,000	0	0	45	12,815,580
21. Issued during year	9	6,520,002			0	0	0	0	9	6,520,002
22. Other changes to in force (Net)	0	173,903			0	(10,000)	1	1,000	1	164,903
23. In force December 31 of current year	53	19,444,485	0	0	1	55,000	1	1,000	55	19,500,485

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	0	0		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	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 \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_



**ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,117,070		0	36	3,117,107
2. Annuity considerations	126,781				126,781
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,243,851	0	0	36	3,243,887
<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	3,517,335		0	0	3,517,335
10. Matured endowments	0				0
11. Annuity benefits	69,356		0		69,356
12. Surrender values and withdrawals for life contracts	124,038				124,038
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	3,710,730	0	0	0	3,710,730
<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. Pols. & 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	33	3,517,335			0	0	0	0	33	3,517,335
Settled during current year:										
18.1 By payment in full	33	3,517,335			0	0	0	0	33	3,517,335
18.2 By payment on compromised claims									0	0
18.3 Totals paid	33	3,517,335	0	0	0	0	0	0	33	3,517,335
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	33	3,517,335	0	0	0	0	0	0	33	3,517,335
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	5,021	781,317,292	0	(a)	0	0	0	0	5,021	781,317,292
21. Issued during year	600	102,141,907			0	0	0	0	600	102,141,907
22. Other changes to in force (Net)	(545)	(63,989,369)			0	0	20	20,093	(525)	(63,969,276)
23. In force December 31 of current year	5,076	819,469,830	0	(a)	0	0	20	20,093	5,096	819,489,923

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	56	56		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	124,326	125,469		44,695	61,238
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	450	87		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	124,777	125,557	0	44,695	61,238
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	124,833	125,613	0	44,695	61,238

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies (b), Federal Employees Health Benefits Program premium (b), and Other Individual Policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,952,643		0	2,828	7,955,471
2. Annuity considerations	2,298,626				2,298,626
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	10,251,269	0	0	2,828	10,254,098
<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	2,652,125		0	7,250	2,659,375
10. Matured endowments	5,140			0	5,140
11. Annuity benefits	477,499		0		477,499
12. Surrender values and withdrawals for life contracts	670,902			4,537	675,440
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	3,805,666	0	0	11,787	3,817,454
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	41	2,657,265			0	0	4	7,250	45	2,664,515
Settled during current year:										
18.1 By payment in full	41	2,657,265			0	0	4	7,250	45	2,664,515
18.2 By payment on compromised claims									0	0
18.3 Totals paid	41	2,657,265	0	0	0	0	4	7,250	45	2,664,515
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	41	2,657,265	0	0	0	0	4	7,250	45	2,664,515
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	10,494	2,923,320,876	0	(a)	0	0	360	469,054	10,854	2,923,789,930
21. Issued during year	1,650	359,313,465			0	0	0	0	1,650	359,313,465
22. Other changes to in force (Net)	(957)	(148,406,528)			0	0	(193)	(209,268)	(1,150)	(148,615,796)
23. In force December 31 of current year	11,187	3,134,227,813	0	(a)	0	0	167	259,786	11,354	3,134,487,599

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	3,436	3,436		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	158,841	159,997		120,533	(10,215)
25.3 Non-renewable for stated reasons only (b)	(108)	0		12,534	23,858
25.4 Other accident only	264	68		0	0
25.5 All other (b)	2,172	420		1,282	371
25.6 Totals (sum of Lines 25.1 to 25.5)	161,169	160,485	0	134,350	14,015
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	164,605	163,922	0	134,350	14,015

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividends and claims.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various accident and health policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

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

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	0		0	0	0
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		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.					0
1302.					0
1303.					0
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. Pols. & 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										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	(a)	0	No. of Policies	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	(a)	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	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)					
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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	925,349		0	0	925,349
2. Annuity considerations	558,005				558,005
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,483,354	0	0	0	1,483,354
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	135,328		0		135,328
12. Surrender values and withdrawals for life contracts	26,691			0	26,691
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	162,019	0	0	0	162,019
<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. Pols. & 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	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
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	827	364,039,934	(a)	0	0	0	0	0	827	364,039,934
21. Issued during year	213	92,235,072			0	0	0	0	213	92,235,072
22. Other changes to in force (Net)	(63)	(12,594,127)			0	0	0	0	(63)	(12,594,127)
23. In force December 31 of current year	977	443,680,879	(a)	0	0	0	0	0	977	443,680,879

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	7,374	7,370		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	0	0		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	7,374	7,370	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,374	7,370	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividends and claims.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policies.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,232,507		0	6,501	4,239,008
2. Annuity considerations	672,168				672,168
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	4,904,675	0	0	6,501	4,911,176
<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	2,808,238		0	13,750	2,821,988
10. Matured endowments	0			0	0
11. Annuity benefits	581,785		830		582,616
12. Surrender values and withdrawals for life contracts	184,237			2,800	187,037
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	3,574,260	0	830	16,550	3,591,640
<b>DETAILS OF WRITE-INS</b>					
1301.					0
1302.					0
1303.					0
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. Pols. & 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	35	2,808,238			0	0	12	13,750	47	2,821,988
Settled during current year:										
18.1 By payment in full	35	2,808,238			0	0	12	13,750	47	2,821,988
18.2 By payment on compromised claims									0	0
18.3 Totals paid	35	2,808,238	0	0	0	0	12	13,750	47	2,821,988
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	35	2,808,238	0	0	0	0	12	13,750	47	2,821,988
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	7,018	1,305,758,325	0	0	0	0	207	342,932	7,225	1,306,101,257
21. Issued during year	533	86,422,553			0	0	0	0	533	86,422,553
22. Other changes to in force (Net)	(468)	(65,161,233)			0	0	(16)	(49,188)	(484)	(65,210,421)
23. In force December 31 of current year	7,083	1,327,019,645	0	0	0	0	191	293,744	7,274	1,327,313,389

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	197	197		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	109,579	114,228		6,780	9,571
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	62	16		0	0
25.5 All other (b)	404	78		0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	110,045	114,322	0	6,780	9,571
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	110,242	114,519	0	6,780	9,571

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,189,849		0	0	1,189,849
2. Annuity considerations	491,381				491,381
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,681,229	0	0	0	1,681,229
<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	651,482		0	0	651,482
10. Matured endowments	0				0
11. Annuity benefits	21,767		0		21,767
12. Surrender values and withdrawals for life contracts	23,604				23,604
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	696,853	0	0	0	696,853
<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. Pols. & 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	2	651,482			0	0	0	0	2	651,482
Settled during current year:										
18.1 By payment in full	2	651,482			0	0	0	0	2	651,482
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	651,482	0	0	0	0	0	0	2	651,482
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	651,482	0	0	0	0	0	0	2	651,482
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	849	325,097,061	(a)	0	No. of Policies	0	0	0	849	325,097,061
21. Issued during year	292	141,357,933			0	0	0	0	292	141,357,933
22. Other changes to in force (Net)	(62)	(15,002,975)			0	0	5	3,000	(57)	(14,999,975)
23. In force December 31 of current year	1,079	451,452,019	(a)	0	0	0	5	3,000	1,084	451,455,019

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	6,481	6,611		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	56	14		0	0
25.5 All other (b)	1,100	213		333	96
25.6 Totals (sum of Lines 25.1 to 25.5)	7,637	6,838	0	333	96
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,637	6,838	0	333	96

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT details.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	8,151,146		0	62	8,151,209
2. Annuity considerations	1,869,136				1,869,136
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	10,020,282	0	0	62	10,020,345
<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	1,701,730		0	0	1,701,730
10. Matured endowments	23,000			0	23,000
11. Annuity benefits	2,160,135		0		2,160,135
12. Surrender values and withdrawals for life contracts	294,217			0	294,217
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	4,179,082	0	0	0	4,179,082
<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. Pols. & 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	23	1,724,730			0	0	0	0	23	1,724,730
Settled during current year:										
18.1 By payment in full	23	1,724,730			0	0	0	0	23	1,724,730
18.2 By payment on compromised claims									0	0
18.3 Totals paid	23	1,724,730	0	0	0	0	0	0	23	1,724,730
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	23	1,724,730	0	0	0	0	0	0	23	1,724,730
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	12,120	3,176,453,113	0	(a)	0	0	0	0	12,120	3,176,453,113
21. Issued during year	1,327	325,882,486			0	0	0	0	1,327	325,882,486
22. Other changes to in force (Net)	(723)	(150,662,035)			0	0	3	3,750	(720)	(150,658,285)
23. In force December 31 of current year	12,724	3,351,673,564	0	(a)	0	0	3	3,750	12,727	3,351,677,314

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	254,888	256,584		49,965	294,201
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	1,183	305		0	0
25.5 All other (b)	345	67		257	74
25.6 Totals (sum of Lines 25.1 to 25.5)	256,416	256,956	0	50,223	294,276
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	256,416	256,956	0	50,223	294,276

(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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	135,969		0	0	135,969
2. Annuity considerations	0				0
3. Deposit-type contract funds	0	XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	135,969	0	0	0	135,969
<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		0	0	0
10. Matured endowments	0			0	0
11. Annuity benefits	0		0		0
12. Surrender values and withdrawals for life contracts	6,960			0	6,960
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	6,960	0	0	0	6,960
<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. Pols. & 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	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
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>										
20. In force December 31, prior year	108	44,871,808	(a)	0	No. of Policies	0	0	0	108	44,871,808
21. Issued during year	28	11,519,486			0	0	0	0	28	11,519,486
22. Other changes to in force (Net)	(13)	(2,472,018)			0	0	0	0	(13)	(2,472,018)
23. In force December 31 of current year	123	53,919,276	(a)	0	0	0	0	0	123	53,919,276

(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)	0	0		0	0
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)	0	0		0	0
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0		0	0
25.2 Guaranteed renewable (b)	0	0		0	0
25.3 Non-renewable for stated reasons only (b)	0	0		0	0
25.4 Other accident only	0	0		0	0
25.5 All other (b)	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 \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_



**ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Grand Aliens

DURING THE YEAR 2012

NAIC Group Code 00244

**LIFE INSURANCE**

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	197	0	0	0	197
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)	197	0	0	0	197
<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

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. Pols. & 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	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>						No. of Policies				
20. In force December 31, prior year	0	0	(a)	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	(a)	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	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)	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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2012

NAIC Group Code 00244

LIFE INSURANCE

NAIC Company Code 76236

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, Medicare Title XVIII, and other individual policies.

(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 .....	2,582,238
2. Current year's realized pre-tax capital gains/(losses) of \$ .....6,615,191 transferred into the reserve net of taxes of \$ 2,163,151 .....	4,452,039
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) .....	7,034,278
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	2,101,830
6. Reserve as of December 31, current year (Line 4 minus Line 5)	4,932,447

*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. 2012 .....	202,275	1,899,556	0	2,101,830
2. 2013 .....	428,216	840,168	0	1,268,384
3. 2014 .....	544,965	201,695	0	746,660
4. 2015 .....	570,835	175,950	0	746,784
5. 2016 .....	528,710	148,756	0	677,466
6. 2017 .....	515,272	119,920	0	635,193
7. 2018 .....	440,603	99,735	0	540,337
8. 2019 .....	334,164	86,948	0	421,112
9. 2020 .....	227,252	73,161	0	300,413
10. 2021 .....	165,055	59,284	0	224,339
11. 2022 .....	143,121	45,395	0	188,516
12. 2023 .....	127,774	38,060	0	165,834
13. 2024 .....	99,426	39,415	0	138,841
14. 2025 .....	68,847	41,473	0	110,320
15. 2026 .....	(9,049)	43,343	0	34,293
16. 2027 .....	(89,531)	44,353	0	(45,179)
17. 2028 .....	(118,344)	47,122	0	(71,222)
18. 2029 .....	(141,796)	48,813	0	(92,983)
19. 2030 .....	(162,801)	51,780	0	(111,021)
20. 2031 .....	(178,981)	54,173	0	(124,808)
21. 2032 .....	(180,466)	57,140	0	(123,327)
22. 2033 .....	(192,943)	54,904	0	(138,038)
23. 2034 .....	(205,393)	47,051	0	(158,342)
24. 2035 .....	(189,274)	38,496	0	(150,778)
25. 2036 .....	(150,614)	30,514	0	(120,100)
26. 2037 .....	(108,445)	21,257	0	(87,188)
27. 2038 .....	(64,879)	15,195	0	(49,684)
28. 2039 .....	(21,875)	12,041	0	(9,834)
29. 2040 .....	116	8,888	0	9,003
30. 2041 .....	0	5,734	0	5,734
31. 2042 and Later	0	1,720	0	1,720
32. Total (Lines 1 to 31)	2,582,238	4,452,039	0	7,034,278

**ANNUAL STATEMENT FOR THE YEAR 2012 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 .....	6,908,768	0	6,908,768	307,103	77,464	384,567	7,293,335
2. Realized capital gains/(losses) net of taxes-General Account .....	4,595,950		4,595,950	(540,656)		(540,656)	4,055,295
3. Realized capital gains/(losses) net of taxes-Separate Accounts .....	(1,776,826)		(1,776,826)			0	(1,776,826)
4. Unrealized capital gains/(losses) net of deferred taxes-General Account .....	(4,989)		(4,989)	506,116		506,116	501,127
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 .....	4,068,410	0	4,068,410	0	18,534	18,534	4,086,944
8. Accumulated balances (Lines 1 through 5 - 6 + 7).....	13,791,313	0	13,791,313	272,564	95,998	368,562	14,159,875
9. Maximum reserve .....	20,396,409	0	20,396,409	384,968	139,008	523,976	20,920,385
10. Reserve objective.....	13,983,821	0	13,983,821	384,968	106,573	491,540	14,475,361
11. 20% of (Line 10 - Line 8) .....	38,501	0	38,501	22,481	2,115	24,596	63,097
12. Balance before transfers (Lines 8 + 11) .....	13,829,815	0	13,829,815	295,044	98,113	393,158	14,222,973
13. Transfers .....			0			0	XXX
14. Voluntary contribution .....			0			0	0
15. Adjustment down to maximum/up to zero .....			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	13,829,815	0	13,829,815	295,044	98,113	393,158	14,222,973

ANNUAL STATEMENT FOR THE YEAR 2012 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		Exempt Obligations	3,532,855	XXX	XXX	3,532,855	0.0000	0	0.0000	0	0.0000	0
2	1	Highest Quality	1,336,434,019	XXX	XXX	1,336,434,019	0.0004	534,574	0.0023	3,073,798	0.0030	4,009,302
3	2	High Quality	1,167,340,063	XXX	XXX	1,167,340,063	0.0019	2,217,946	0.0058	6,770,572	0.0090	10,506,061
4	3	Medium Quality	62,280,017	XXX	XXX	62,280,017	0.0093	579,204	0.0230	1,432,440	0.0340	2,117,521
5	4	Low Quality	10,052,562	XXX	XXX	10,052,562	0.0213	214,120	0.0530	532,786	0.0750	753,942
6	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or Near Default	416,877	XXX	XXX	416,877	0.0000	0	0.2000	83,375	0.2000	83,375
8		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX	0	XXX		XXX		XXX	
9		Total Bonds (Sum of Lines 1 through 8)	2,580,056,393	XXX	XXX	2,580,056,393	XXX	3,545,843	XXX	11,892,972	XXX	17,470,201
PREFERRED STOCK												
10	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High Quality	7,072,800	XXX	XXX	7,072,800	0.0019	13,438	0.0058	41,022	0.0090	63,655
12	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	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)	7,072,800	XXX	XXX	7,072,800	XXX	13,438	XXX	41,022	XXX	63,655
SHORT-TERM BONDS												
18		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium Quality	5,043,163	XXX	XXX	5,043,163	0.0093	46,901	0.0230	115,993	0.0340	171,468
22	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	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)	5,043,163	XXX	XXX	5,043,163	XXX	46,901	XXX	115,993	XXX	171,468

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

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5 Factor	6 Amount (Cols. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
<b>DERIVATIVE INSTRUMENTS</b>												
26		Exchange Traded		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total Derivative Instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		Total (Lines 9 + 17 + 25 + 33)	2,592,172,356	XXX	XXX	2,592,172,356	XXX	3,606,183	XXX	12,049,987	XXX	17,705,323
<b>MORTGAGE LOANS</b>												
In Good Standing:												
35		Farm Mortgages			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
36		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
37		Residential Mortgages - All Other			XXX	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial Mortgages - All Other			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
40		In Good Standing With Restructured Terms			XXX	0	0.2800 (b)	0	0.6200 (b)	0	1.0000 (b)	0
Overdue, Not in Process:												
41		Farm Mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0
42		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
43		Residential Mortgages - All Other			XXX	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial Mortgages - All Other			XXX	0	0.0420	0	0.0760	0	0.1200	0
In Process of Foreclosure:												
46		Farm Mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0
47		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
48		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial Mortgages - All Other			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B Mortgages (Sum of Lines 35 through 50)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
52		Schedule DA Mortgages			XXX	0	(c)	0	(c)	0	(c)	0
53		Total Mortgage Loans on Real Estate (Lines 51 + 52)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

(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.

**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)
<b>COMMON STOCK</b>												
1		Unaffiliated Public .....	3,849,675	XXX	XXX	3,849,675	0.0000	.0	0.1000 <sup>(d)</sup>	384,968	0.1000 <sup>(d)</sup>	384,968
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
Affiliated Investment Subsidiary:												
5		Fixed Income Exempt Obligations .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
6		Fixed Income Highest Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
7		Fixed Income High Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
8		Fixed Income Medium Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
9		Fixed Income Low Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
10		Fixed Income Lower Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
11		Fixed Income In or Near Default .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
12		Unaffiliated Common Stock Public .....				.0	0.0000	.0	0.1300 <sup>(d)</sup>	.0	0.1300 <sup>(d)</sup>	.0
13		Unaffiliated Common Stock Private .....				.0	0.0000	.0	0.1600	.0	0.1600	.0
14		Mortgage Loans .....				.0	<sup>(c)</sup>	.0	<sup>(c)</sup>	.0	<sup>(c)</sup>	.0
15		Real Estate .....				.0	<sup>(e)</sup>	.0	<sup>(e)</sup>	.0	<sup>(e)</sup>	.0
16		Affiliated-Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX	.0	0.0000	.0	0.1300	.0	0.1300	.0
17		Affiliated - All Other .....		XXX	XXX	.0	0.0000	.0	0.1600	.0	0.1600	.0
18		Total Common Stock (Sum of Lines 1 through 17)	3,849,675	0	0	3,849,675	XXX	0	XXX	384,968	XXX	384,968
<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		Exempt Obligations .....		XXX	XXX	.0	0.0000	.0	0.0000	.0	0.0000	.0
24	1	Highest Quality .....		XXX	XXX	.0	0.0004	.0	0.0023	.0	0.0030	.0
25	2	High Quality .....		XXX	XXX	.0	0.0019	.0	0.0058	.0	0.0090	.0
26	3	Medium Quality .....		XXX	XXX	.0	0.0093	.0	0.0230	.0	0.0340	.0
27	4	Low Quality .....		XXX	XXX	.0	0.0213	.0	0.0530	.0	0.0750	.0
28	5	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

**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)
<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS</b>												
31	1	Highest Quality .....	46,336,066	XXX	XXX	46,336,066	0.0004	18,534	0.0023	106,573	0.0030	139,008
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)	46,336,066	XXX	XXX	46,336,066	XXX	18,534	XXX	106,573	XXX	139,008
<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS</b>												
In Good Standing:												
39		Farm Mortgages .....			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
40		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential Mortgages - All Other .....		XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial Mortgages - All Other .....			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
44		In Good Standing With Restructured Terms .....			XXX	0	0.2800 (b)	0	0.6200 (b)	0	1.0000 (b)	0
Overdue, Not in Process:												
45		Farm Mortgages .....			XXX	0	0.0420	0	0.0760	0	0.1200	0
46		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0005	0	0.0012	0	0.0020	0
47		Residential Mortgages - All Other .....			XXX	0	0.0025	0	0.0058	0	0.0090	0
48		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0005	0	0.0012	0	0.0020	0
49		Commercial Mortgages - All Other .....			XXX	0	0.0420	0	0.0760	0	0.1200	0
In Process of Foreclosure:												
50		Farm Mortgages .....			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Residential Mortgages - Insured or Guaranteed .....			XXX	0	0.0000	0	0.0040	0	0.0040	0
52		Residential Mortgages - All Other .....			XXX	0	0.0000	0	0.0130	0	0.0130	0
53		Commercial Mortgages - Insured or Guaranteed .....			XXX	0	0.0000	0	0.0040	0	0.0040	0
54		Commercial Mortgages - All Other .....			XXX	0	0.0000	0	0.1700	0	0.1700	0
55		Total with Mortgage Loan Characteristics (Sum of Lines 39 through 54)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

**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)
<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>	0
57		Unaffiliated Private .....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
58		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
59		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
60		Affiliated Other - All Other .....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
61		Total with Common Stock Characteristics (Sum of Lines 56 through 60)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
<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	0
63		Investment Properties .....				0	0.0000	0	0.0750	0	0.0750	0
64		Properties Acquired in Satisfaction of Debt .....				0	0.0000	0	0.1100	0	0.1100	0
65		Total with Real Estate Characteristics (Lines 62 through 64)	0	0	0	0	XXX	0	XXX	0	XXX	0
<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	0
67		Non-guaranteed Federal Low Income Housing Tax Credit .....	0			0	0.0063	0	0.0120	0	0.0190	0
68		State Low Income Housing Tax Credit .....	0			0	0.0273	0	0.0600	0	0.0975	0
69		All Other Low Income Housing Tax Credit .....	0			0	0.0273	0	0.0600	0	0.0975	0
70		Total LIHTC	0	0	0	0	XXX	0	XXX	0	XXX	0
<b>ALL OTHER INVESTMENTS</b>												
71		Other Invested Assets - Schedule BA .....		XXX		0	0.0000	0	0.1300	0	0.1300	0
72		Other Short-term Invested Assets - Schedule DA .....		XXX		0	0.0000	0	0.1300	0	0.1300	0
73		Total All Other (Sum of Lines 71 + 72) .....	0	XXX	0	0	XXX	0	XXX	0	XXX	0
74		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)	46,336,066	0	0	46,336,066	XXX	18,534	XXX	106,573	XXX	139,008

(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.

**Asset Valuation Reserve (Continued)**  
**Basic Contribution, Reserve Objective and Maximum Reserve Calculations Replications (Synthetic) Assets**

1	2	3	4	5	6	7	8	9
RSAT Number	Type	CUSIP	Description of Asset(s)	NAIC Designation or Other Description of Asset	Value of Asset	AVR Basic Contribution	AVR Reserve Objective	AVR Maximum Reserve
				<b>NONE</b>				
0599999 Total					0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2012 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	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted
<b>Disposed Death Claims - Ordinary</b>							
5020355L		NC	2010	200,000	3,129		JUDGEMENT IN COMPANY'S FAVOR
6120944L		MO	2009	75,000	39,796		JUDGEMENT IN COMPANY'S FAVOR
6115396P		PA	2010	34,345	2,486		JUDGEMENT IN COMPANY'S FAVOR
6185559L		PA	2010	224,000	4,195		JUDGEMENT IN COMPANY'S FAVOR
6214082L		OH	2011	150,000	95,650		SETTLEMENT REACHED
5003404L		NC	2011	500,000	160,924		SETTLEMENT REACHED
6080317P		GA	2012	77,251	50,296		SETTLEMENT REACHED
<b>0199999 - Disposed Death Claims - Ordinary</b>				1,260,596	356,476	0	XXX
<b>0599999 - Subtotals - Disposed - Death Claims</b>				1,260,596	356,476	0	XXX
<b>2699999 - Subtotals - Claims Disposed of During Current Year</b>				1,260,596	356,476	0	XXX
<b>Resisted Death Claims - Ordinary</b>							
6166721L		GA	2009	750,000		750,000	MATERIAL MISREPRESENTATION
2676348L		TX	2011	300,000		300,000	MATERIAL MISREPRESENTATION
6181669L		AZ	2011	100,000		100,000	MATERIAL MISREPRESENTATION
<b>2799999 - Resisted Death Claims - Ordinary</b>				1,150,000	0	1,150,000	XXX
<b>3199999 - Subtotals - Resisted - Death Claims</b>				1,150,000	0	1,150,000	XXX
<b>5299999 - Subtotals - Claims Resisted During Current Year</b>				1,150,000	0	1,150,000	XXX
<b>5399999 Totals</b>				2,410,596	356,476	1,150,000	XXX

**ANNUAL STATEMENT FOR THE YEAR 2012 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	2,549,558	XXX	589,195	XXX		XXX		XXX	647	XXX	1,930,875	XXX		XXX	14,314	XXX	14,527	XXX
2. Premiums earned	2,566,497	XXX	589,250	XXX		XXX		XXX	648	XXX	1,947,495	XXX		XXX	14,387	XXX	14,717	XXX
3. Incurred claims	1,942,796	75.7	1,378,061	233.9		0.0		0.0		0.0	552,709	28.4		0.0	1,949	13.5	10,077	68.5
4. Cost containment expenses	6,088	0.2	6,088	1.0		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)	1,948,884	75.9	1,384,149	234.9		0.0		0.0	0	0.0	552,709	28.4		0	1,949	13.5	10,077	68.5
6. Increase in contract reserves	106,746	4.2	0	0.0		0.0		0.0	0	0.0	106,746	5.5		0	0	0.0	0	0.0
7. Commissions (a)	(89,153)	(3.5)	(27,100)	(4.6)		0.0		0.0	12	1.9	(62,603)	(3.2)		0	267	1.9	271	1.8
8. Other general insurance expenses	1,991,202	77.6	305,110	51.8		0.0	8,089	0.0	255	39.4	1,540,606	79.1		0	29,253	203.3	107,889	733.1
9. Taxes, licenses and fees	199,820	7.8	29,862	5.1		0.0	174	0.0	5	0.8	165,632	8.5		0	854	5.9	3,293	22.4
10. Total other expenses incurred	2,101,869	81.9	307,872	52.2		0.0	8,263	0.0	272	42.0	1,643,635	84.4		0	30,374	211.1	111,453	757.3
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
12. Gain from underwriting before dividends or refunds	(1,591,002)	(62.0)	(1,102,771)	(187.1)		0.0	(8,263)	0.0	376	58.0	(355,595)	(18.3)		0	(17,936)	(124.7)	(106,813)	(725.8)
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
14. Gain from underwriting after dividends or refunds	(1,591,002)	(62.0)	(1,102,771)	(187.1)		0	(8,263)	0.0	376	58.0	(355,595)	(18.3)		0	(17,936)	(124.7)	(106,813)	(725.8)
<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
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

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

**ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

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

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit A&H (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
<b>PART 2 - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums	455,446	899			57	451,949		1,261	1,280
2. Advance premiums	36,519				6	36,243		134	136
3. Reserve for rate credits	0								
4. Total premium reserves, current year	491,965	899	0	0	63	488,192	0	1,395	1,416
5. Total premium reserves, prior year	508,903	953	0	0	64	504,811	0	1,469	1,606
6. Increase in total premium reserves	(16,938)	(54)	0	0	(1)	(16,619)	0	(74)	(190)
B. Contract Reserves:									
1. Additional reserves (a)	6,194,113					6,194,113			
2. Reserve for future contingent benefits	0								
3. Total contract reserves, current year	6,194,113	0	0	0	0	6,194,113	0	0	0
4. Total contract reserves, prior year	6,087,367	0	0	0	0	6,087,367	0	0	0
5. Increase in contract reserves	106,746	0	0	0	0	106,746	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	10,108,610	6,568,589				3,532,367		1,256	6,398
2. Total prior year	9,906,774	6,076,744	0		0	3,820,477	0	1,022	8,531
3. Increase	201,836	491,845	0	0	0	(288,110)	0	234	(2,133)

<b>PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES</b>									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year	1,168,550	782,940				375,630		1,067	8,913
1.2 On claims incurred during current year	572,409	103,276				465,189		647	3,297
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	8,194,919	5,360,484				2,833,607		136	692
2.2 On claims incurred during current year	1,913,692	1,208,105				698,760		1,121	5,706
3. Test:									
3.1 Lines 1.1 and 2.1	9,363,469	6,143,424	0	0	0	3,209,237	0	1,203	9,605
3.2 Claim reserves and liabilities, December 31 prior year	9,906,776	6,076,744	0		0	3,820,477	0	1,023	8,532
3.3 Line 3.1 minus Line 3.2	(543,307)	66,680	0	0	0	(611,240)	0	180	1,073

<b>PART 4 - REINSURANCE</b>									
A. Reinsurance Assumed:									
1. Premiums written	0								
2. Premiums earned	0								
3. Incurred claims	0								
4. Commissions	0								
B. Reinsurance Ceded:									
1. Premiums written	4,316,284	537,408		699	22	3,776,881		541	733
2. Premiums earned	4,329,628	537,408		699	22	3,790,225		541	733
3. Incurred claims	3,957,782	1,409,854				2,542,387		909	4,632
4. Commissions	799,066	27,100				771,966			

(a) Includes \$ .....0 premium deficiency reserve.

**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Medical	2 Dental	3 Other	4 Total
<b>A. Direct:</b>				
1. Incurred Claims.....	5,015,490		885,086	5,900,576
2. Beginning Claim Reserves and Liabilities.....	15,738,682	0	2,777,414	18,516,096
3. Ending Claim Reserves and Liabilities.....	17,670,648		3,118,350	20,788,998
4. Claims Paid.....	3,083,524	0	544,151	3,627,675
<b>B. Assumed Reinsurance:</b>				
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
<b>C. Ceded Reinsurance:</b>				
9. Incurred Claims.....	3,364,115		593,667	3,957,782
10. Beginning Claim Reserves and Liabilities.....	7,479,604	0	1,319,930	8,799,534
11. Ending Claim Reserves and Liabilities.....	9,210,368		1,625,359	10,835,727
12. Claims Paid.....	1,633,351	0	288,238	1,921,590
<b>D. Net:</b>				
13. Incurred Claims.....	1,651,375	0	291,419	1,942,794
14. Beginning Claim Reserves and Liabilities.....	8,259,077	0	1,457,484	9,716,562
15. Ending Claim Reserves and Liabilities.....	8,460,280	0	1,492,991	9,953,270
16. Claims Paid.....	1,450,173	0	255,913	1,706,085
<b>E. Net Incurred Claims and Cost Containment Expenses:</b>				
17. Incurred Claims and Cost Containment Expenses.....	1,657,463		291,419	1,948,882
18. Beginning Reserves and Liabilities.....	8,259,077	0	1,457,484	9,716,562
19. Ending Reserves and Liabilities.....	8,460,280		1,492,991	9,953,270
20. Paid Claims and Cost Containment Expenses	1,456,261	0	255,913	1,712,174



**ANNUAL STATEMENT FOR THE YEAR 2012 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

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than For Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
<b>NONE</b>											
0999999 Total (Sum of 0399999 and 0699999)						0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2012 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
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
68276	.48-1024691	.01/01/1990	EMPLOYERS REASSUR CORP	KS	31,750	67,831
88340	.59-2859797	.04/01/2002	HANNOVER LIFE REASSUR CO OF AMER	FL	38,000	135,902
65676	.35-0472300	.09/15/1997	LINCOLN NATL LIFE INS CO	IN	60,000	633,831
66346	.58-0828824	.02/01/1988	MUNICH AMER REASSUR CO	GA	100,000	452,000
93572	.43-1235868	.09/01/1995	RGA REINS CO	MO	150,000	1,304,500
67466	.95-1079000	.04/01/2002	PACIFIC LIFE INS CO	NE	78,000	331,902
68713	.84-0499703	.09/15/1997	SECURITY LIFE OF DENVER INS CO	CO	263,750	1,018,842
71706	.57-0290111	.07/01/1970	STANDARD LIFE & CAS INS CO	UT		20,768
82627	.06-0839705	.08/01/1970	SWISS RE LIFE & HLTH AMER INC	CT	324,000	2,278,106
86231	.39-0989781	.04/01/2008	TRANSAMERICA LIFE INS CO	IA		240,000
0499999 - Life and Annuity - Non-Affiliates - U.S. Non-Affiliates					1,045,500	6,483,682
0699999 - Life and Annuity - Non-Affiliates - Total Non-Affiliates					1,045,500	6,483,682
0799999 - Life and Annuity - Total Life and Annuity					1,045,500	6,483,682
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
68276	.48-1024691	.01/01/1990	EMPLOYERS REASSUR CORP	KS	3,900	
66346	.58-0828824	.02/01/1988	MUNICH AMER REASSUR CO	GA	30,324	10,767
93572	.43-1235868	.09/01/1995	RGA REINS CO	MO	110,746	9,645
82627	.06-0839705	.08/01/1970	SWISS RE LIFE & HLTH AMER INC	CT	10,370	1,318
67105	.41-0451140	.02/01/2004	RELIASTAR LIFE INS CO	MN		204,800
1199999 - Accident and Health - Non-Affiliates - U.S. Non-Affiliates					155,340	226,529
1399999 - Accident and Health - Non-Affiliates - Total Non-Affiliates					155,340	226,529
1499999 - Accident and Health - Total Accident and Health					155,340	226,529
1599999 - Total U.S. (Sum of 0199999, 0499999, 0899999 and 1199999)					1,200,840	6,710,211
1799999 Total (Sum of 0799999 and 1499999)					1,200,840	6,710,211

**ANNUAL STATEMENT FOR THE YEAR 2012 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		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
71706	57-0290111	07/01/1970	STANDARD LIFE & CAS INS CO	UT	CO/I	1,708,733	940,831	965,544	21,052				
97071	13-3126819	03/01/1981	GENERAL USA LIFE REASSUR CO	MO	CO/I	7,381,562	93,506	88,740	107,276				
97071	13-3126819	08/13/1969	GENERAL USA LIFE REASSUR CO	MO	YRT/I	452,204	6,280	5,766	7,797				
97071	13-3126819	07/30/1986	GENERAL USA LIFE REASSUR CO	MO	ACO/I	0	217,034	211,521	0				
97071	13-3126819	08/13/1969	GENERAL USA LIFE REASSUR CO	MO	DIS/I	0	315,384	294,648	0				
97071	13-3126819	08/13/1969	GENERAL USA LIFE REASSUR CO	MO	OTH/G	250,389	22,330	20,242	366,541				
86258	13-2572994	08/01/2001	GENERAL RE LIFE CORP	CT	CO/I	62,343,986	2,384,863	2,240,229	102,080				
86258	13-2572994	01/01/1967	GENERAL RE LIFE CORP	CT	YRT/I	762,532	10,007	8,892	14,504				
86258	13-2572994	01/01/1967	GENERAL RE LIFE CORP	CT	DIS/I	0	17,773	17,435	975				
68276	48-1024691	01/01/1990	EMPLOYERS REASSUR CORP	KS	CO/I	182,647,705	19,670,396	19,551,517	571,867				
68276	48-1024691	01/01/1990	EMPLOYERS REASSUR CORP	KS	YRT/I	37,664,347	139,289	143,257	189,458				
68276	48-1024691	01/01/1990	EMPLOYERS REASSUR CORP	KS	DIS/I	0	46,628	47,416	9,852				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSUR CO OF AMER	FL	CO/I	597,261,069	14,089,330	13,503,080	1,073,423				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	469,588,024	270,256	31,694	182,479				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSUR CO OF AMER	FL	DIS/I	0	57,111	53,906	7,271				
65676	35-0472300	09/15/1997	LINCOLN NATL LIFE INS CO	IN	CO/I	4,204,194,760	27,672,117	27,234,495	5,962,961				
65676	35-0472300	09/15/1997	LINCOLN NATL LIFE INS CO	IN	YRT/I	196,118,608	658,569	602,546	801,443				
65676	35-0472300	09/15/1997	LINCOLN NATL LIFE INS CO	IN	DIS/I	0	1,240,460	1,203,260	94,498				
66346	58-0828824	02/01/1988	MUNICH AMER REASSUR CO	GA	CO/I	66,933,989	2,406,759	2,265,767	119,194				
66346	58-0828824	10/01/1994	MUNICH AMER REASSUR CO	GA	YRT/I	2,206,157,013	3,028,929	2,797,583	3,047,502				
66346	58-0828824	02/01/1988	MUNICH AMER REASSUR CO	GA	DIS/I	0	28,951	28,529	11,713				
66346	58-0828824	02/01/1988	MUNICH AMER REASSUR CO	GA	ADB/I	0	0	0	163,375				
93572	43-1235868	09/01/1995	RGA REINS CO	MO	YRT/I	7,037,761,493	8,588,769	7,380,496	8,224,427				
93572	43-1235868	09/01/1995	RGA REINS CO	MO	DIS/I	0	29,429	25,767	28,629				
93572	43-1235868	02/01/2004	RGA REINS CO	MO	OTH/G	161,803,500	0	0	380,829				
65056	38-1659835	12/31/2012	JACKSON NATL LIFE INS CO	MI	CO/I	11,204,729	7,181,141	7,951,631	146,422				
67466	95-1079000	04/01/2002	PACIFIC LIFE INS CO	NE	CO/I	2,104,163,269	44,504,943	42,064,063	3,424,399				
67466	95-1079000	04/01/2002	PACIFIC LIFE INS CO	NE	YRT/I	10,668,203	29,095	23,124	43,289				
67466	95-1079000	04/01/2002	PACIFIC LIFE INS CO	NE	DIS/I	0	170,714	158,354	21,893				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER INS CO	CO	CO/I	3,879,593,703	88,410,890	83,744,536	6,421,270				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER INS CO	CO	YRT/I	293,298,795	1,713,406	1,861,046	1,185,262				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER INS CO	CO	DIS/I	0	414,365	391,895	57,498				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER INS CO	CO	OTH/G	7,148,048	8,043	7,453	16,848				
82627	06-0839705	05/01/1981	SWISS RE LIFE & HLTH AMER INC	CT	CO/I	8,805,754,691	149,414,382	144,860,135	13,757,861				
82627	06-0839705	08/01/1978	SWISS RE LIFE & HLTH AMER INC	CT	YRT/I	3,283,886,649	3,531,294	2,688,977	3,268,071				
82627	06-0839705	08/01/1978	SWISS RE LIFE & HLTH AMER INC	CT	DIS/I	0	1,522,810	1,459,798	145,435				
82627	06-0839705	06/01/1974	SWISS RE LIFE & HLTH AMER INC	CT	OTH/G	309,417,541	8,156	7,582	855,732				
86231	39-0989781	04/01/2008	TRANSAMERICA LIFE INS CO	IA	YRT/I	2,399,219,988	2,264,397	1,856,586	1,789,693				
86231	39-0989781	04/01/2008	TRANSAMERICA LIFE INS CO	IA	DIS/I	0	6,878	6,409	10,049				
0499999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						36,337,385,530	381,115,516	365,803,917	52,632,870	0	0	0	0
General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates													
00000	AA-1440076	10/01/2000	SIRIUS INTL INS CORP	SWE	YRT/I	3,073,545	15,477	15,571	11,215				
0599999 - General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates						3,073,545	15,477	15,571	11,215	0	0	0	0
0699999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates						36,340,459,075	381,130,993	365,819,488	52,644,084	0	0	0	0
0799999 - General Account - Authorized - Total General Account Authorized						36,340,459,075	381,130,993	365,819,488	52,644,084	0	0	0	0
2299999 - General Account - Total General Account Authorized, Unauthorized and Certified						36,340,459,075	381,130,993	365,819,488	52,644,084	0	0	0	0
4599999 - Total U.S. (Sum of 0199999, 0499999, 0899999, 1199999, 1599999, 1899999, 2399999, 2699999, 3099999, 3399999, 3799999 and 4099999)						36,337,385,530	381,115,516	365,803,917	52,632,870	0	0	0	0
4699999 - Total Non-U.S. (Sum of 0299999, 0599999, 0999999, 1299999, 1699999, 1999999, 2499999, 2799999, 3199999, 3499999, 3899999 and 4199999)						3,073,545	15,477	15,571	11,215	0	0	0	0
<b>4799999 Total (Sum of 2299999 and 4499999)</b>						<b>36,340,459,075</b>	<b>381,130,993</b>	<b>365,819,488</b>	<b>52,644,084</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



**ANNUAL STATEMENT FOR THE YEAR 2012 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 INTL INS CORP	15,477			15,477	15,477	021000089	1	CITIBANK, N.A.					15,477
0599999 - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates				15,477	0	0	15,477	15,477	XXX	XXX	XXX	0	0	0	0	15,477
0699999 - General Account - Life and Annuity - Non-Affiliates - Total Non-Affiliates				15,477	0	0	15,477	15,477	XXX	XXX	XXX	0	0	0	0	15,477
0799999 - General Account - Life and Annuity - Total Life and Annuity				15,477	0	0	15,477	15,477	XXX	XXX	XXX	0	0	0	0	15,477
1599999 - General Account - Total General Account				15,477	0	0	15,477	15,477	XXX	XXX	XXX	0	0	0	0	15,477
2499999 - Total Non-U.S. (Sum of 0299999, 0599999, 0999999, 1299999, 1799999 and 2099999)				15,477	0	0	15,477	15,477	XXX	XXX	XXX	0	0	0	0	15,477
2599999 Total (Sum of 1599999 and 2299999)				15,477	0	0	15,477	15,477	XXX	XXX	XXX	0	0	0	0	15,477

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE S - PART 5 (Continued)**

Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

Line Number	25 Percent of Collateral Provided for Net Amount Recoverable from Reinsurer (Col. 24 / Col. 14)	26 Percent Credit Allowed on Net Amount Recoverable from Reinsurer (Col. 25 / Col. 8, not to exceed 100%)	27 Amount of Credit Allowed for Net Amount Recoverable from Reinsurer (Col. 14 x Col. 26)	28 Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 27)
<b>NONE</b>				
2599999	Total (Sum of 1599999 and 2299999)		0	0

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(a)

Code	American Bankers Association (ABA) Routing Number	Bank Name

**SCHEDULE S - PART 6**

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

	1 2012	2 2011	3 2010	4 2009	5 2008
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts .....	56,960	54,859	53,504	53,123	54,359
2. Commissions and reinsurance expense allowances .....	6,567	6,732	7,152	7,380	8,045
3. Contract claims .....	37,623	29,923	47,597	27,110	38,140
4. Surrender benefits and withdrawals for life contracts .....	411	578	3,276	1,695	621
5. Dividends to policyholders .....	0	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 .....	18,909	21,342	20,700	16,266	14,823
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	15,476	15,365	15,243	15,398	14,836
9. Aggregate reserves for life and accident and health contracts .....	411,127	392,219	370,876	350,177	333,910
10. Liability for deposit-type contracts .....	0	0	0	0	0
11. Contract claims unpaid .....	6,710	3,843	9,385	1,639	5,491
12. Amounts recoverable on reinsurance .....	1,514	2,287	3,692	1,137	1,789
13. Experience rating refunds due or unpaid .....	0	0	0	0	0
14. Policyholders' dividends (not included in Line 10) .....	0	0	0	0	0
15. Commissions and reinsurance expense allowances due .....	1,828	1,871	2,030	2,178	2,189
16. Unauthorized reinsurance offset .....	0	0	0	0	179
17. Offset for reinsurance with Certified Reinsurers .....	0	XXX	XXX	XXX	XXX
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
18. Funds deposited by and withheld from (F) .....	0	0	0	0	0
19. Letters of credit (L) .....	15	16	20	184	6,171
20. Trust agreements (T) .....	0	0	0	0	0
21. Other (O) .....	0	0	0	0	0
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
22. Multiple Beneficiary Trust .....	0	XXX	XXX	XXX	XXX
23. Funds deposited by and withheld from (F) .....	0	XXX	XXX	XXX	XXX
24. Letters of credit (L) .....	0	XXX	XXX	XXX	XXX
25. Trust agreements (T) .....	0	XXX	XXX	XXX	XXX
26. Other (O) .....	0	XXX	XXX	XXX	XXX

**SCHEDULE S - PART 7**

**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) .....	2,723,569,235		2,723,569,235
2. Reinsurance (Line 16) .....	3,341,436	(3,341,436)	0
3. Premiums and considerations (Line 15) .....	99,392,857	15,475,578	114,868,435
4. Net credit for ceded reinsurance .....	XXX	405,703,548	405,703,548
5. All other admitted assets (balance) .....	75,644,355		75,644,355
6. Total assets excluding Separate Accounts (Line 26) .....	2,901,947,882	417,837,690	3,319,785,573
7. Separate Account assets (Line 27) .....	667,987,726		667,987,726
8. Total assets (Line 28)	3,569,935,608	417,837,690	3,987,773,299
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	2,330,518,469	411,127,479	2,741,645,948
10. Liability for deposit-type contracts (Line 3) .....	195,373,069		195,373,069
11. Claim reserves (Line 4) .....	14,099,295	6,710,211	20,809,506
12. Policyholder dividends/reserves (Lines 5 through 7) .....	110		110
13. Premium & annuity considerations received in advance (Line 8) .....	1,074,295		1,074,295
14. Other contract liabilities (Line 9) .....	20,408,026		20,408,026
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....	0	0	0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....	0		0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....	0		0
19. All other liabilities (balance) .....	64,665,556		64,665,556
20. Total liabilities excluding Separate Accounts (Line 26) .....	2,626,138,820	417,837,690	3,043,976,510
21. Separate Account liabilities (Line 27) .....	667,987,726		667,987,726
22. Total liabilities (Line 28) .....	3,294,126,546	417,837,690	3,711,964,236
23. Capital & surplus (Line 38) .....	275,809,062	XXX	275,809,062
24. Total liabilities, capital & surplus (Line 39)	3,569,935,608	417,837,690	3,987,773,299
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	411,127,479		
26. Claim reserves .....	6,710,211		
27. Policyholder dividends/reserves .....	0		
28. Premium & annuity considerations received in advance .....	0		
29. Liability for deposit-type contracts .....	0		
30. Other contract liabilities .....	0		
31. Reinsurance ceded assets .....	3,341,436		
32. Other ceded reinsurance recoverables .....	0		
33. Total ceded reinsurance recoverables .....	421,179,126		
34. Premiums and considerations .....	15,475,578		
35. Reinsurance in unauthorized companies .....	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers .....	0		
37. Reinsurance with Certified Reinsurers .....	0		
38. Funds held under reinsurance treaties with Certified Reinsurers .....	0		
39. Other ceded reinsurance payables/offsets .....	0		
40. Total ceded reinsurance payable/offsets .....	15,475,578		
41. Total net credit for ceded reinsurance	405,703,548		

ANNUAL STATEMENT FOR THE YEAR 2012 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					Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL	4,366,825	630,151	37,171	41,001	0	5,075,148
2. Alaska	AK	37,067	0	0	0	0	37,067
3. Arizona	AZ	1,633,132	108,755	6,009	20,969	0	1,768,866
4. Arkansas	AR	2,722,907	371,361	5,805	0	0	3,100,073
5. California	CA	5,298,977	1,160,917	6,710	0	0	6,466,603
6. Colorado	CO	1,016,951	336,991	25,883	0	0	1,379,825
7. Connecticut	CT	339,499	37,009	3,030	0	0	379,538
8. Delaware	DE	221,238	740,970	2,091	2,824	0	967,124
9. District of Columbia	DC	97,254	0	628	1,648	0	99,530
10. Florida	FL	5,741,240	1,214,293	19,325	144,382	0	7,119,241
11. Georgia	GA	12,054,189	868,004	68,346	279,542	0	13,270,081
12. Hawaii	HI	40,671	0	590	0	0	41,260
13. Idaho	ID	586,240	196,947	2,076	0	0	785,263
14. Illinois	IL	16,472,925	4,484,596	200,507	201,998	0	21,360,026
15. Indiana	IN	16,748,026	3,108,334	260,493	53,453	0	20,170,306
16. Iowa	IA	9,127,367	10,499,286	58,214	55,323	0	19,740,190
17. Kansas	KS	2,962,556	634,644	13,573	15,523	0	3,626,295
18. Kentucky	KY	8,602,864	207,391	83,180	177,337	0	9,070,773
19. Louisiana	LA	511,686	0	1,166	0	0	512,853
20. Maine	ME	60,958	100,000	0	0	0	160,958
21. Maryland	MD	2,353,336	58,826	26,943	8,525	0	2,447,630
22. Massachusetts	MA	481,968	0	1,930	0	0	483,898
23. Michigan	MI	12,178,604	2,841,032	254,519	151,673	0	15,425,829
24. Minnesota	MN	8,746,802	5,128,376	43,373	33,594	0	13,952,144
25. Mississippi	MS	264,825	150,300	1,871	0	0	416,996
26. Missouri	MO	7,399,187	607,708	38,045	31,479	0	8,076,419
27. Montana	MT	1,026,627	25,000	6,531	0	0	1,058,158
28. Nebraska	NE	1,693,275	178,175	2,754	6,279	0	1,880,482
29. Nevada	NV	350,049	51,218	7,405	0	0	408,673
30. New Hampshire	NH	343,928	605	2,736	1,618	0	348,887
31. New Jersey	NJ	540,624	0	1,019	0	0	541,643
32. New Mexico	NM	408,544	17,115	1,207	5,223	0	432,089
33. New York	NY	324,602	8,723	0	4,305	0	337,630
34. North Carolina	NC	11,437,549	130,508	105,998	129,806	0	11,803,860
35. North Dakota	ND	1,302,191	121,627	4,223	0	0	1,428,041
36. Ohio	OH	44,255,916	3,026,049	441,452	783,361	0	48,506,779
37. Oklahoma	OK	347,248	159	2,021	0	0	349,428
38. Oregon	OR	424,515	0	3,493	0	0	428,008
39. Pennsylvania	PA	18,033,431	5,340,865	254,582	102,183	0	23,731,060
40. Rhode Island	RI	61,711	0	0	0	0	61,711
41. South Carolina	SC	3,117,107	126,781	19,492	93,063	0	3,356,443
42. South Dakota	SD	902,884	519,342	1,215	0	0	1,423,441
43. Tennessee	TN	7,955,471	2,298,626	95,554	53,678	0	10,403,330
44. Texas	TX	6,116,054	285,999	10,153	16,497	0	6,428,703
45. Utah	UT	925,349	558,005	7,374	0	0	1,490,728
46. Vermont	VT	358,852	0	4,717	0	0	363,569
47. Virginia	VA	4,239,008	672,168	44,122	34,077	0	4,989,375
48. Washington	WA	1,189,849	491,381	5,316	0	0	1,686,545
49. West Virginia	WV	2,623,113	264,419	34,351	8,549	0	2,930,432
50. Wisconsin	WI	8,151,209	1,869,136	102,158	118,078	0	10,240,580
51. Wyoming	WY	135,969	0	0	0	0	135,969
52. American Samoa	AS	0	0	0	0	0	0
53. Guam	GU	0	0	0	0	0	0
54. Puerto Rico	PR	178	0	0	0	0	178
55. US Virgin Islands	VI	0	0	0	0	0	0
56. Northern Mariana Islands	MP	0	0	0	0	0	0
57. Canada	CAN	0	0	0	0	0	0
58. Aggregate Other Alien	OT	197	0	0	0	0	197
59. Totals		236,332,742	49,471,791	2,319,354	2,575,987	0	290,699,874



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
10677	31-0542366	THE CINCINNATI INSURANCE COMPANY	(300,000,000)					255,537,562			(44,462,438)	(491,467,000)
23280	31-1241230	THE CINCINNATI INDEMNITY COMPANY						(157,782,382)			(157,782,382)	104,330,000
28665	31-0826946	THE CINCINNATI CASUALTY COMPANY						(97,755,180)			(97,755,180)	384,991,000
76236	31-1213778	THE CINCINNATI LIFE INSURANCE COMPANY									.0	
00000	31-0746871	CINCINNATI FINANCIAL CORPORATION	300,000,000								300,000,000	
00000	31-0790388	CFC INVESTMENT COMPANY									.0	
13034	65-1316588	CINCINNATI SPECIALTY UNDERWRITERS INS CO									.0	2,146,000
00000	11-3823180	CSU PRODUCER RESOURCES INC									.0	
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

# 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.

	<u>Responses</u>
<b>MARCH FILING</b>	
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.....
<b>APRIL FILING</b>	
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.....
<b>JUNE FILING</b>	
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.....
<b>AUGUST FILING</b>	
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.

<b>MARCH FILING</b>	
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.....

**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:**

- 12.
- 14.
- 18.
- 19.
- 20.
- 21.
- 22.
- 23.
- 24.

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 26.
- 27.
- 28.
- 29.
- 30.
- 31.
- 32.
- 33.
- 34.
- 36.
- 37.
- 38.
- 39.
- 42.

**Bar code:**

12.	 7 6 2 3 6 2 0 1 2 4 2 0 0 0 0 0 0
14.	 7 6 2 3 6 2 0 1 2 4 9 0 0 0 0 0 0
18.	 7 6 2 3 6 2 0 1 2 4 4 3 0 0 0 0 0
19.	 7 6 2 3 6 2 0 1 2 4 4 4 0 0 0 0 0
20.	 7 6 2 3 6 2 0 1 2 4 4 5 0 0 0 0 0
21.	 7 6 2 3 6 2 0 1 2 4 4 6 0 0 0 0 0
22.	 7 6 2 3 6 2 0 1 2 4 4 7 0 0 0 0 0
23.	 7 6 2 3 6 2 0 1 2 4 4 8 0 0 0 0 0
24.	 7 6 2 3 6 2 0 1 2 4 4 9 0 0 0 0 0
26.	 7 6 2 3 6 2 0 1 2 4 5 1 0 0 0 0 0

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

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

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

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

**OVERFLOW PAGE FOR WRITE-INS**

L002 Additional Aggregate Lines for Page 02 Line 25.

\*ASSETS - Assets

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
2504. RETURNED CHECKS.....	670	670	0	0
2505. AGENTS' BALANCES.....	28,960	28,960	0	0
2506. TUITION REIMBURSEMENT RECEIVABLE.....	152,384	22,646	129,738	142,526
2597. Summary of remaining write-ins for Line 25 from Page 02	182,013	52,275	129,738	142,526

L003 Additional Aggregate Lines for Page 03 Line 25.

\*LIAB - Liabilities

	1	2
	Current Year	Prior Year
2504. ACCOUNTS PAYABLE - LONG TERM CARE.....	79,697	127,855
2505. RETIRED LIVES RESERVE.....	22,029	20,877
2597. Summary of remaining write-ins for Line 25 from Page 3	101,726	148,732

L018 Additional Aggregate Lines for Page 18 Line 25.

\*EXNONADMIT - Exhibit of Nonadmitted Assets

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2504. AGENTS' BALANCES.....	28,960	46,138	17,178
2505. TUITION REIMBURSEMENT RECEIVABLE.....	22,646	22,646	0
2597. Summary of remaining write-ins for Line 25 from page 18	51,606	68,784	17,178



**SUPPLEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2012  
(To Be Filed by March 1)

FOR THE STATE OF Florida

NAIC Group Code 00244 ..... NAIC Company Code 76236  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141 .....  
 Person Completing This Exhibit ..... Telephone Number .....  
 Title .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2009				Policies Issued in 2010, 2011, 2012					
										11	12		13	14	15	16		17	18
											Premiums Earned	Amount				Percent of Premiums Earned	Number of Covered Lives		
Yes	1588/1590	P	Yes	0034000				01/01/1989	MEDICARE SUPPLEMENT POLICY	1,374	3,792	276.0	2			0.0			
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										1,374	3,792	276.0	2	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"

360.FL



SUPPLEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For the Year Ended December 31, 2012 (To Be Filed by March 1)

FOR THE STATE OF Illinois

NAIC Group Code 00244 NAIC Company Code 76236
Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141
Person Completing This Exhibit
Title Telephone Number

Table with columns for 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, Policies Issued Through 2009 (Premiums Earned, Incurred Claims Amount, Percent of Premiums Earned, Number of Covered Lives), and Policies Issued in 2010, 2011, 2012 (Premiums Earned, Incurred Claims Amount, Percent of Premiums Earned, Number of Covered Lives). Includes rows for individual and group policies.

360 JL

GENERAL INTERROGATORIES

- 1. If response in Column 1 is no, give full and complete details
2. 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
2.1 Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
2.2 Contact Person and Phone Number: ANN BINZER 513-870-2282
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h) (3) (B).
3.1 Address: P.O. BOX 145496 CINCINNATI, OH 45250-5496
3.2 Contact Person and Phone Number: ANN BINZER 513-870-2282
4. Explain any policies identified above as policy type "O"



**SUPPLEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2012  
(To Be Filed by March 1)

FOR THE STATE OF Indiana

NAIC Group Code 00244 ..... NAIC Company Code 76236  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141 .....  
 Person Completing This Exhibit ..... Telephone Number .....  
 Title .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2009				Policies Issued in 2010, 2011, 2012					
										11	12		13	14	15	16		17	18
											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	521	4,716	905.2	1			0.0			
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										521	4,716	905.2	1	0	0	0.0	0		
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0		

360.IN

**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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2012  
(To Be Filed by March 1)

FOR THE STATE OF Nevada

NAIC Group Code 00244 ..... NAIC Company Code 76236  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141 .....  
 Person Completing This Exhibit ..... Telephone Number .....  
 Title .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2009				Policies Issued in 2010, 2011, 2012					
										11	12		13	14	15	16		17	18
											Premiums Earned	Amount				Percent of Premiums Earned	Number of Covered Lives		
Yes	1588/1590	P	Yes	0034000				01/01/1989	MEDICARE SUPPLEMENT POLICY	820	2,095	255.5	1			0.0			
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										820	2,095	255.5	1	0	0	0.0	0		
<b>0299999 TOTAL EXPERIENCE ON GROUP POLICIES</b>										0	0	0.0	0	0	0	0.0	0		

360.NV

**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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2012  
(To Be Filed by March 1)

FOR THE STATE OF Ohio

NAIC Group Code 00244 ..... NAIC Company Code 76236  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141 .....  
 Person Completing This Exhibit ..... Telephone Number .....  
 Title .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2009				Policies Issued in 2010, 2011, 2012					
										11	12		13	14	15	16		17	18
											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.....	5,493.....	7,807.....	142.1.....	6.....			0.0.....			
Yes.....	6655.....	P.....	Yes.....	0034000.....	02/27/1987.....			01/01/1989.....	MEDICARE SUPPLEMENT POLICY.....	2,097.....	1,886.....	89.9.....	2.....			0.0.....			
0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES										7,590	9,693	127.7	8	0	0	0.0	0		
0299999 TOTAL EXPERIENCE ON GROUP POLICIES										0	0	0.0	0	0	0	0.0	0		

360.OH

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 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For the Year Ended December 31, 2012  
(To Be Filed by March 1)

FOR THE STATE OF Washington

NAIC Group Code 00244 ..... NAIC Company Code 76236  
 Address (City, State and Zip Code) FAIRFIELD, OH 45014-5141 .....  
 Person Completing This Exhibit ..... Telephone Number .....  
 Title .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2009				Policies Issued in 2010, 2011, 2012					
										11	12		13	14	15	16		17	18
											Premiums Earned	Amount				Percent of Premiums Earned	Number of Covered Lives		
Yes	6655	P	Yes	0034000	02/27/1987			01/01/1989	MEDICARE SUPPLEMENT POLICY	1,068	333	31.2	1			0.0			
<b>0199999 TOTAL EXPERIENCE ON INDIVIDUAL POLICIES</b>										1,068	333	31.2	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"

360.WA



**SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2012 OF THE CINCINNATI LIFE INSURANCE COMPANY**

**SCHEDULE O SUPPLEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2012

(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 2008	2 2009	3 2010	4 2011	5 2012(a)
1. Prior .....					182
2. 2008.....	89	166	84	106	.87
3. 2009.....	.XXX	189	224	92	123
4. 2010.....	.XXX	.XXX	235	245	107
5. 2011.....	.XXX	.XXX	.XXX	132	285
6. 2012.....	.XXX	.XXX	.XXX	.XXX	103

**Section B—Other Accident and Health**

1. Prior .....					100
2. 2008.....	578	162	62	55	.19
3. 2009.....	.XXX	650	290	26	.76
4. 2010.....	.XXX	.XXX	599	113	.36
5. 2011.....	.XXX	.XXX	.XXX	297	155
6. 2012.....	.XXX	.XXX	.XXX	.XXX	469

**Section C—Credit Accident and Health**

1. Prior .....					
2. 2008.....	0	0	0	0	
3. 2009.....	.XXX	0	0	0	
4. 2010.....	.XXX	.XXX	0	0	
5. 2011.....	.XXX	.XXX	.XXX	0	
6. 2012.....	.XXX	.XXX	.XXX	.XXX	

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

**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 2008	2 2009	3 2010	4 2011	5 2012
1. Prior.....		.0	.0	.0	.0
2. 2008.....	.0	.0	.0	.0	.0
3. 2009.....	XXX	.0	.0	.0	.0
4. 2010.....	XXX	XXX	.0	.0	.0
5. 2011.....	XXX	XXX	XXX	.0	.0
6. 2012.....	XXX	XXX	XXX	XXX	

**Section B - Other Accident and Health**

1. Prior.....		.0	.0	.0	.0
2. 2008.....	.0	.0	.0	.0	.0
3. 2009.....	XXX	.0	.0	.0	.0
4. 2010.....	XXX	XXX	.0	.0	.0
5. 2011.....	XXX	XXX	XXX	.0	.0
6. 2012.....	XXX	XXX	XXX	XXX	

**Section C - Credit Accident and Health**

1. Prior.....		.0	.0	.0	.0
2. 2008.....	.0	.0	.0	.0	.0
3. 2009.....	XXX	.0	.0	.0	.0
4. 2010.....	XXX	XXX	.0	.0	.0
5. 2011.....	XXX	XXX	XXX	.0	.0
6. 2012.....	XXX	XXX	XXX	XXX	

## 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 2008	2 2009	3 2010	4 2011	5 2012
1. 2008	341	857	1,490	XXX	XXX
2. 2009	XXX	1,081	1,245	1,364	XXX
3. 2010	XXX	XXX	498	540	1,179
4. 2011	XXX	XXX	XXX	1,770	1,381
5. 2012	XXX	XXX	XXX	XXX	1,311

**Section B - Other Accident and Health**

1. 2008	1,455	1,389	1,269	XXX	XXX
2. 2009	XXX	1,468	1,495	1,369	XXX
3. 2010	XXX	XXX	1,455	1,226	1,260
4. 2011	XXX	XXX	XXX	1,254	1,264
5. 2012	XXX	XXX	XXX	XXX	1,175

**Section C - Credit Accident and Health**

1. 2008	0	0	0	XXX	XXX
2. 2009	XXX	0	0	0	XXX
3. 2010	XXX	XXX	0	0	0
4. 2011	XXX	XXX	XXX	0	0
5. 2012	XXX	XXX	XXX	XXX	0

**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 2008	2 2009	3 2010	4 2011	5 2012
1. 2008.....	0	0	0	0	0
2. 2009.....	XXX	0	0	0	0
3. 2010.....	XXX	XXX	0	0	0
4. 2011.....	XXX	XXX	XXX	0	0
5. 2012.....	XXX	XXX	XXX	XXX	0

**Section B – Other Accident and Health**

1. 2008.....	0	0	0	0	0
2. 2009.....	XXX	0	0	0	0
3. 2010.....	XXX	XXX	0	0	0
4. 2011.....	XXX	XXX	XXX	0	0
5. 2012.....	XXX	XXX	XXX	XXX	0

**Section C - Credit Accident and Health**

1. 2008.....	0	0	0	0	0
2. 2009.....	XXX	0	0	0	0
3. 2010.....	XXX	XXX	0	0	0
4. 2011.....	XXX	XXX	XXX	0	0
5. 2012.....	XXX	XXX	XXX	XXX	0

**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.....	149
2. Ordinary life .....	OTHER.....	12,923
3. Individual annuity .....		
4. Supplementary contracts .....		
5. Credit life .....		
6. Group life .....		85
7. Group annuities .....	DEVELOPMENT.....	
8. Group accident and health .....	DEVELOPMENT.....	6,569
9. Credit accident and health .....		
10. Other accident and health .....	DEVELOPMENT.....	3,540
11. Total .....		23,266

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