



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2013
OF THE CONDITION AND AFFAIRS OF THE

Cincinnati Equitable Life Insurance Company

| | | | | | |
|---------------------------------------|---|-------------------|---|----------------------|------------|
| NAIC Group Code | 0838 | NAIC Company Code | 88064 | Employer's ID Number | 35-1452221 |
| | (Current) | (Prior) | | | |
| Organized under the Laws of | Ohio | | State of Domicile or Port of Entry | Ohio | |
| Country of Domicile | United States of America | | | | |
| Incorporated/Organized | 10/19/1977 | | Commenced Business | 07/11/1978 | |
| Statutory Home Office | 525 Vine Street, Suite 1925 | | Cincinnati , OH, US 45202 | | |
| | (Street and Number) | | (City or Town, State, Country and Zip Code) | | |
| Main Administrative Office | 525 Vine Street, Suite 1925 | | | | |
| | (Street and Number) | | | | |
| | Cincinnati , OH, US 45202 | | 513-621-1826 | | |
| | (City or Town, State, Country and Zip Code) | | (Area Code) (Telephone Number) | | |
| Mail Address | P.O. BOX 3428 | | Cincinnati , OH, US 45202-3428 | | |
| | (Street and Number or P.O. Box) | | (City or Town, State, Country and Zip Code) | | |
| Primary Location of Books and Records | 525 Vine Street, Suite 1925 | | | | |
| | (Street and Number) | | | | |
| | Cincinnati , OH, US 45202 | | 513-621-1826 | | |
| | (City or Town, State, Country and Zip Code) | | (Area Code) (Telephone Number) | | |
| Internet Website Address | cineqlife.com | | | | |
| Statutory Statement Contact | Gregory Allen Baker | | 513-621-1826 | | |
| | (Name) | | (Area Code) (Telephone Number) | | |
| | gbaker@1826.com | | 513-621-4531 | | |
| | (E-mail Address) | | (FAX Number) | | |

OFFICERS

| | | | |
|-----------------------|-----------------|-----------------------------|------------------|
| Chairman of the Board | Peter A Alpaugh | President/CEO/CFO/Treasurer | Gregory A Baker |
| Secretary | Linda S Bales | V.P. Sales & Marketing | Tonya G Crawford |

OTHER

| | | |
|-----------------------|-----------------|-----------------|
| DIRECTORS OR TRUSTEES | | |
| Peter A Alpaugh | Andrea A Kessel | Gregory A Baker |
| James W Ketring | Drew F Knowles | |

State of Ohio
County of Hamilton
SS:

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

| | | |
|---|-----------------------------|-------------------------------|
| Peter A. Alpaugh Chairman of the Board | Linda S. Bales Secretary | Gregory A. Baker Treasurer |
|---|-----------------------------|-------------------------------|

Subscribed and sworn to before me this
10th day of February

Richard Hansman, Jr.

11/8/2014

a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed02/21/2014
3. Number of pages attached.....



| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------------|--|------------|-----------------|------------|
| 1. Life insurance | 7,586,024 | | | | 7,586,024 |
| 2. Annuity considerations | 480,258 | | | | 480,258 |
| 3. Deposit-type contract funds | | XXX | | XXX | 0 |
| 4. Other considerations | | | | | 0 |
| 5. Totals (Sum of Lines 1 to 4) | 8,066,282 | 0 | 0 | 0 | 8,066,282 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | |
| 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 plus 7.4) | 0 | 0 | 0 | 0 | 0 |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits | 1,718,157 | | | | 1,718,157 |
| 10. Matured endowments | | | | | 0 |
| 11. Annuity benefits | 111,220 | | | | 111,220 |
| 12. Surrender values and withdrawals for life contracts | 1,292 | | | | 1,292 |
| 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 | 1,830,669 | 0 | 0 | 0 | 1,830,669 |
| DETAILS OF WRITE-INS | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 1399. Totals (Lines 1301 thru 1303 plus 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 | 9 | 71,222 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | 71,222 |
| 17. Incurred during current year Settled during current year: | 299 | 1,718,158 | | | | | | | 299 | 1,718,158 |
| 18.1 By payment in full | 288 | 1,726,071 | | | | | | | 288 | 1,726,071 |
| 18.2 By payment on compromised claims | 17 | 33,246 | | | | | | | 17 | 33,246 |
| 18.3 Totals paid | 305 | 1,759,317 | 0 | 0 | 0 | 0 | 0 | 0 | 305 | 1,759,317 |
| 18.4 Reduction by compromise | | | | | | | | | 0 | 0 |
| 18.5 Amount rejected | | | | | | | | | 0 | 0 |
| 18.6 Total settlements | 305 | 1,759,317 | 0 | 0 | 0 | 0 | 0 | 0 | 305 | 1,759,317 |
| 19. Unpaid Dec. 31, current year (16+17-18.6) | 3 | 30,063 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 30,063 |
| POLICY EXHIBIT | | | | | No. of Policies | | | | | |
| 20. In force December 31, prior year | 1,824 | 10,708,361 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 1,824 | 10,708,361 |
| 21. Issued during year | 1,513 | 9,209,507 | | | | | | | 1,513 | 9,209,507 |
| 22. Other changes to in force (Net) | (354) | (2,193,223) | | | | | | | (354) | (2,193,223) |
| 23. In force December 31 of current year | 2,983 | 17,724,645 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 2,983 | 17,724,645 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|--------------------------------|--|-------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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) | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | | | | |

NONE

(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 2013 OF THE Cincinnati Equitable Life Insurance Company

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2013

NAIC Group Code 0838

LIFE INSURANCE

NAIC Company Code 88064

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | 1 | 2 | 3 | 4 | 5 |
|---|-----------|---------------------------------------|-------|------------|-----------|
| | Ordinary | Credit Life (Group and Individual) | Group | Industrial | Total |
| 1. Life insurance | 8,481,942 | | | | 8,481,942 |
| 2. Annuity considerations | 12,627 | | | | 12,627 |
| 3. Deposit-type contract funds | | XXX | | XXX | 0 |
| 4. Other considerations | | | | | 0 |
| 5. Totals (Sum of Lines 1 to 4) | 8,494,569 | 0 | 0 | 0 | 8,494,569 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | 0 |
| 6.2 Applied to pay renewal premiums | 92 | | | | 92 |
| 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) | 92 | 0 | 0 | 0 | 92 |
| 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 plus 7.4) | 92 | 0 | 0 | 0 | 92 |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits | 3,171,032 | | | | 3,171,032 |
| 10. Matured endowments | | | | | 0 |
| 11. Annuity benefits | 505 | | | | 505 |
| 12. Surrender values and withdrawals for life contracts | 92 | | | | 92 |
| 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 | 3,171,629 | 0 | 0 | 0 | 3,171,629 |
| DETAILS OF WRITE-INS | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 1399. Totals (Lines 1301 thru 1303 plus 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 | 9 | 58,731 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | 58,731 |
| 17. Incurred during current year Settled during current year: | 527 | 3,171,032 | | | | | | | 527 | 3,171,032 |
| 18.1 By payment in full | 498 | 3,071,166 | | | | | | | 498 | 3,071,166 |
| 18.2 By payment on compromised claims | 20 | 43,657 | | | | | | | 20 | 43,657 |
| 18.3 Totals paid | 518 | 3,114,823 | 0 | 0 | 0 | 0 | 0 | 0 | 518 | 3,114,823 |
| 18.4 Reduction by compromise | | | | | | | | | 0 | 0 |
| 18.5 Amount rejected | | | | | | | | | 0 | 0 |
| 18.6 Total settlements | 518 | 3,114,823 | 0 | 0 | 0 | 0 | 0 | 0 | 518 | 3,114,823 |
| 19. Unpaid Dec. 31, current year (16+17-18.6) | 18 | 114,940 | 0 | 0 | 0 | 0 | 0 | 0 | 18 | 114,940 |
| POLICY EXHIBIT | | | | | No. of Policies | | | | | |
| 20. In force December 31, prior year | 3,932 | 24,969,599 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 3,932 | 24,969,599 |
| 21. Issued during year | 1,572 | 10,090,477 | | | | | | | 1,572 | 10,090,477 |
| 22. Other changes to in force (Net) | (605) | (3,747,720) | | | | | | | (605) | (3,747,720) |
| 23. In force December 31 of current year | 4,899 | 31,312,356 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 4,899 | 31,312,356 |

(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 Plan 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) | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | | | | |

NONE

(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 2013 OF THE Cincinnati Equitable Life Insurance Company

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2013

NAIC Group Code 0838

LIFE INSURANCE

NAIC Company Code 88064

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------------|--|------------|-----------------|------------|
| 1. Life insurance | 4,821,548 | | | | 4,821,548 |
| 2. Annuity considerations | 12,756 | | | | 12,756 |
| 3. Deposit-type contract funds | | XXX | | XXX | 0 |
| 4. Other considerations | | | | | 0 |
| 5. Totals (Sum of Lines 1 to 4) | 4,834,304 | 0 | 0 | 0 | 4,834,304 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | |
| 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 plus 7.4) | 0 | 0 | 0 | 0 | 0 |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits | 2,036,737 | | | | 2,036,737 |
| 10. Matured endowments | | | | | 0 |
| 11. Annuity benefits | 107 | | | | 107 |
| 12. Surrender values and withdrawals for life contracts | 1,619 | | | | 1,619 |
| 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 | 2,038,463 | 0 | 0 | 0 | 2,038,463 |
| DETAILS OF WRITE-INS | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 1399. Totals (Lines 1301 thru 1303 plus 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 | 5 | 27,770 | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 27,770 |
| 17. Incurred during current year Settled during current year: | 346 | 2,036,737 | | | | | | | 346 | 2,036,737 |
| 18.1 By payment in full | 328 | 1,967,016 | | | | | | | 328 | 1,967,016 |
| 18.2 By payment on compromised claims | 14 | 45,712 | | | | | | | 14 | 45,712 |
| 18.3 Totals paid | 342 | 2,012,728 | 0 | 0 | 0 | 0 | 0 | 0 | 342 | 2,012,728 |
| 18.4 Reduction by compromise | | | | | | | | | 0 | 0 |
| 18.5 Amount rejected | | | | | | | | | 0 | 0 |
| 18.6 Total settlements | 342 | 2,012,728 | 0 | 0 | 0 | 0 | 0 | 0 | 342 | 2,012,728 |
| 19. Unpaid Dec. 31, current year (16+17-18.6) | 9 | 51,779 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | 51,779 |
| POLICY EXHIBIT | | | | | No. of Policies | | | | | |
| 20. In force December 31, prior year | 3,200 | 18,103,626 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 3,200 | 18,103,626 |
| 21. Issued during year | 924 | 5,682,524 | | | | | | | 924 | 5,682,524 |
| 22. Other changes to in force (Net) | (410) | (2,495,479) | | | | | | | (410) | (2,495,479) |
| 23. In force December 31 of current year | 3,714 | 21,290,671 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 3,714 | 21,290,671 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|--------------------------------|--|-------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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) | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | | | | |

NONE

(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 2013 OF THE Cincinnati Equitable Life Insurance Company

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2013

NAIC Group Code 0838

LIFE INSURANCE

NAIC Company Code 88064

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | 1 | 2 | 3 | 4 | 5 |
|---|-----------|---------------------------------------|-------|------------|-----------|
| | Ordinary | Credit Life (Group and Individual) | Group | Industrial | Total |
| 1. Life insurance | 6,141,562 | | | | 6,141,562 |
| 2. Annuity considerations | 50 | | | | 50 |
| 3. Deposit-type contract funds | | XXX | | XXX | 0 |
| 4. Other considerations | | | | | 0 |
| 5. Totals (Sum of Lines 1 to 4) | 6,141,612 | 0 | 0 | 0 | 6,141,612 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | 2,947 | | | | 2,947 |
| 6.2 Applied to pay renewal premiums | 1,041 | | | | 1,041 |
| 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) | 3,988 | 0 | 0 | 0 | 3,988 |
| 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 plus 7.4) | 3,988 | 0 | 0 | 0 | 3,988 |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits | 2,644,471 | | | | 2,644,471 |
| 10. Matured endowments | | | | | 0 |
| 11. Annuity benefits | | | | | 0 |
| 12. Surrender values and withdrawals for life contracts | 13,455 | | | | 13,455 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | 0 | 0 | 0 | 0 | 0 |
| 14. All other benefits, except accident and health | 385 | | | | 385 |
| 15. Totals | 2,658,311 | 0 | 0 | 0 | 2,658,311 |
| DETAILS OF WRITE-INS | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 1399. Totals (Lines 1301 thru 1303 plus 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 | 12 | 73,407 | 0 | 0 | 0 | 0 | 0 | 0 | 12 | 73,407 |
| 17. Incurred during current year Settled during current year: | 503 | 2,644,472 | | | | | | | 503 | 2,644,472 |
| 18.1 By payment in full | 492 | 2,642,852 | | | | | | | 492 | 2,642,852 |
| 18.2 By payment on compromised claims | 14 | 15,796 | | | | | | | 14 | 15,796 |
| 18.3 Totals paid | 506 | 2,658,648 | 0 | 0 | 0 | 0 | 0 | 0 | 506 | 2,658,648 |
| 18.4 Reduction by compromise | | | | | | | | | 0 | 0 |
| 18.5 Amount rejected | | | | | | | | | 0 | 0 |
| 18.6 Total settlements | 506 | 2,658,648 | 0 | 0 | 0 | 0 | 0 | 0 | 506 | 2,658,648 |
| 19. Unpaid Dec. 31, current year (16+17-18.6) | 9 | 59,231 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | 59,231 |
| POLICY EXHIBIT | | | | | No. of Policies | | | | | |
| 20. In force December 31, prior year | 3,746 | 19,285,630 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 3,746 | 19,285,630 |
| 21. Issued during year | 1,457 | 7,180,721 | | | | | | | 1,457 | 7,180,721 |
| 22. Other changes to in force (Net) | (616) | (3,406,764) | | | | | | | (616) | (3,406,764) |
| 23. In force December 31 of current year | 4,587 | 23,059,587 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 4,587 | 23,059,587 |

(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 Plan 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) | 82,250 | 85,911 | | 63,176 | 61,906 |
| 25.6 Totals (sum of Lines 25.1 to 25.5) | 82,250 | 85,911 | 0 | 63,176 | 61,906 |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | 82,250 | 85,911 | 0 | 63,176 | 61,906 |

(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 2013 OF THE Cincinnati Equitable Life Insurance Company

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2013

NAIC Group Code 0838

LIFE INSURANCE

NAIC Company Code 88064

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------------|--|------------|-----------------|------------|
| 1. Life insurance | 83,134 | | | | 83,134 |
| 2. Annuity considerations | | | | | 0 |
| 3. Deposit-type contract funds | | XXX | | XXX | 0 |
| 4. Other considerations | | | | | 0 |
| 5. Totals (Sum of Lines 1 to 4) | 83,134 | 0 | 0 | 0 | 83,134 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | |
| 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 plus 7.4) | 0 | 0 | 0 | 0 | 0 |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 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 |
| DETAILS OF WRITE-INS | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 1399. Totals (Lines 1301 thru 1303 plus 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 |
| 17. Incurred during current year Settled during current year: | | | | | | | | | 0 | 0 |
| 18.1 By payment in full | | | | | | | | | 0 | 0 |
| 18.2 By payment on compromised claims | | | | | | | | | 0 | 0 |
| 18.3 Totals paid | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18.4 Reduction by compromise | | | | | | | | | 0 | 0 |
| 18.5 Amount rejected | | | | | | | | | 0 | 0 |
| 18.6 Total settlements | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 19. Unpaid Dec. 31, current year (16+17-18.6) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| POLICY EXHIBIT | | | | | No. of Policies | | | | | |
| 20. In force December 31, prior year | | | (a) | | | | | | 0 | 0 |
| 21. Issued during year | 28 | 208,956 | | | | | | | 28 | 208,956 |
| 22. Other changes to in force (Net) | (2) | (15,273) | | | | | | | (2) | (15,273) |
| 23. In force December 31 of current year | 26 | 193,683 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 26 | 193,683 |

(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 Plan 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) | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | | | | |

NONE

(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 2013 OF THE Cincinnati Equitable Life Insurance Company

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2013

NAIC Group Code 0838

LIFE INSURANCE

NAIC Company Code 88064

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------------|--|------------|-----------------|------------|
| 1. Life insurance | 27,114,210 | 0 | 0 | 0 | 27,114,210 |
| 2. Annuity considerations | 505,691 | 0 | 0 | 0 | 505,691 |
| 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) | 27,619,901 | 0 | 0 | 0 | 27,619,901 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | |
| Life insurance: | | | | | |
| 6.1 Paid in cash or left on deposit | 2,947 | 0 | 0 | 0 | 2,947 |
| 6.2 Applied to pay renewal premiums | 1,133 | 0 | 0 | 0 | 1,133 |
| 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) | 4,080 | 0 | 0 | 0 | 4,080 |
| 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 plus 7.4) | 4,080 | 0 | 0 | 0 | 4,080 |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | |
| 9. Death benefits | 9,570,397 | 0 | 0 | 0 | 9,570,397 |
| 10. Matured endowments | 0 | 0 | 0 | 0 | 0 |
| 11. Annuity benefits | 111,832 | 0 | 0 | 0 | 111,832 |
| 12. Surrender values and withdrawals for life contracts | 16,458 | 0 | 0 | 0 | 16,458 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | 0 | 0 | 0 | 0 | 0 |
| 14. All other benefits, except accident and health | 385 | 0 | 0 | 0 | 385 |
| 15. Totals | 9,699,072 | 0 | 0 | 0 | 9,699,072 |
| DETAILS OF WRITE-INS | | | | | |
| 1301. | | | | | |
| 1302. | | | | | |
| 1303. | | | | | |
| 1398. Summary of Line 13 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 1399. Totals (Lines 1301 thru 1303 plus 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 | 35 | 231,130 | 0 | 0 | 0 | 0 | 0 | 0 | 35 | 231,130 |
| 17. Incurred during current year | 1,675 | 9,570,399 | 0 | 0 | 0 | 0 | 0 | 0 | 1,675 | 9,570,399 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 1,606 | 9,407,105 | 0 | 0 | 0 | 0 | 0 | 0 | 1,606 | 9,407,105 |
| 18.2 By payment on compromised claims | 65 | 138,411 | 0 | 0 | 0 | 0 | 0 | 0 | 65 | 138,411 |
| 18.3 Totals paid | 1,671 | 9,545,516 | 0 | 0 | 0 | 0 | 0 | 0 | 1,671 | 9,545,516 |
| 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 | 1,671 | 9,545,516 | 0 | 0 | 0 | 0 | 0 | 0 | 1,671 | 9,545,516 |
| 19. Unpaid Dec. 31, current year (16+17-18.6) | 39 | 256,013 | 0 | 0 | 0 | 0 | 0 | 0 | 39 | 256,013 |
| POLICY EXHIBIT | | | | | No. of Policies | | | | | |
| 20. In force December 31, prior year | 12,702 | 73,067,216 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 12,702 | 73,067,216 |
| 21. Issued during year | 5,494 | 32,372,185 | 0 | 0 | 0 | 0 | 0 | 0 | 5,494 | 32,372,185 |
| 22. Other changes to in force (Net) | (1,987) | (11,858,459) | 0 | 0 | 0 | 0 | 0 | 0 | (1,987) | (11,858,459) |
| 23. In force December 31 of current year | 16,209 | 93,580,942 | 0 (a) | 0 | 0 | 0 | 0 | 0 | 16,209 | 93,580,942 |

(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 Plan 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 Other Individual Policies: | 0 | 0 | 0 | 0 | 0 |
| 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) | 82,250 | 85,911 | 0 | 63,176 | 61,906 |
| 25.6 Totals (sum of Lines 25.1 to 25.5) | 82,250 | 85,911 | 0 | 63,176 | 61,906 |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | 82,250 | 85,911 | 0 | 63,176 | 61,906 |

(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 2013 OF THE Cincinnati Equitable Life Insurance Company

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

| INTEREST MAINTENANCE RESERVE | | 1 Amount |
|--|--|-------------|
| 1. Reserve as of December 31, Prior Year | | 302,237 |
| 2. Current year's realized pre-tax capital gains/(losses) of \$275,126 transferred into the reserve net of taxes of \$93,543 | | 181,583 |
| 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) | | 483,820 |
| 5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) | | 88,214 |
| 6. Reserve as of December 31, current year (Line 4 minus Line 5) | | 395,606 |

| 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. 2013 | 62,525 | 25,689 | 0 | 88,214 |
| 2. 2014 | 49,036 | 53,824 | 0 | 102,860 |
| 3. 2015 | 40,771 | 49,569 | 0 | 90,340 |
| 4. 2016 | 31,825 | 37,018 | 0 | 68,843 |
| 5. 2017 | 24,732 | 24,093 | 0 | 48,824 |
| 6. 2018 | 19,207 | 10,625 | 0 | 29,832 |
| 7. 2019 | 13,356 | 3,171 | 0 | 16,526 |
| 8. 2020 | 9,770 | 2,335 | 0 | 12,106 |
| 9. 2021 | 8,166 | 1,509 | 0 | 9,676 |
| 10. 2022 | 6,739 | 616 | 0 | 7,355 |
| 11. 2023 | 5,924 | (303) | 0 | 5,621 |
| 12. 2024 | 5,546 | (849) | 0 | 4,697 |
| 13. 2025 | 4,965 | (917) | 0 | 4,049 |
| 14. 2026 | 4,215 | (984) | 0 | 3,231 |
| 15. 2027 | 3,421 | (1,128) | 0 | 2,293 |
| 16. 2028 | 2,662 | (1,166) | 0 | 1,495 |
| 17. 2029 | 2,118 | (1,290) | 0 | 828 |
| 18. 2030 | 1,829 | (1,324) | 0 | 505 |
| 19. 2031 | 1,680 | (1,429) | 0 | 251 |
| 20. 2032 | 1,434 | (1,463) | 0 | (29) |
| 21. 2033 | 1,108 | (1,567) | 0 | (459) |
| 22. 2034 | 775 | (1,639) | 0 | (864) |
| 23. 2035 | 441 | (1,713) | 0 | (1,272) |
| 24. 2036 | 135 | (1,788) | 0 | (1,653) |
| 25. 2037 | (10) | (1,934) | 0 | (1,944) |
| 26. 2038 | (27) | (2,009) | 0 | (2,036) |
| 27. 2039 | (33) | (1,870) | 0 | (1,904) |
| 28. 2040 | (34) | (1,482) | 0 | (1,516) |
| 29. 2041 | (29) | (1,094) | 0 | (1,123) |
| 30. 2042 | (10) | (706) | 0 | (716) |
| 31. 2043 and Later | | (212) | 0 | (212) |
| 32. Total (Lines 1 to 31) | 302,237 | 181,583 | 0 | 483,820 |

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable 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 | 271,611 | 0 | 271,611 | 279,906 | 48,347 | 328,252 | 599,863 |
| 2. Realized capital gains/(losses) net of taxes - General Account | (61,176) | | (61,176) | 88,291 | 5,561 | 93,852 | 32,676 |
| 3. Realized capital gains/(losses) net of taxes - Separate Accounts | | | 0 | | | 0 | 0 |
| 4. Unrealized capital gains/(losses) net of deferred taxes - General Account | | | 0 | (194,198) | (7,207) | (201,405) | (201,405) |
| 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 | 66,379 | 0 | 66,379 | 0 | 14,576 | 14,576 | 80,955 |
| 8. Accumulated balances (Lines 1 through 5 - 6 + 7) | 276,815 | 0 | 276,815 | 173,999 | 61,276 | 235,275 | 512,090 |
| 9. Maximum reserve | 338,095 | 0 | 338,095 | 941,963 | 51,323 | 993,286 | 1,331,381 |
| 10. Reserve objective | 232,475 | 0 | 232,475 | 941,963 | 36,268 | 978,231 | 1,210,706 |
| 11. 20% of (Line 10 - Line 8) | (8,868) | 0 | (8,868) | 153,593 | (5,002) | 148,591 | 139,723 |
| 12. Balance before transfers (Lines 8 + 11) | 267,947 | 0 | 267,947 | 327,592 | 56,275 | 383,866 | 651,813 |
| 13. Transfers | | | 0 | | | 0 | XXX |
| 14. Voluntary contribution | | | 0 | | | 0 | 0 |
| 15. Adjustment down to maximum/up to zero | | | 0 | | (4,952) | (4,952) | (4,952) |
| 16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15) | 267,947 | 0 | 267,947 | 327,592 | 51,323 | 378,914 | 646,861 |

ASSET VALUATION RESERVE
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 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | Factor | Amount (Cols.4 x 5) | Factor | Amount (Cols. 4 x 7) | Factor | Amount (Cols. 4 x 9) |
| LONG-TERM BONDS | | | | | | | | | | | | |
| 1. | | Exempt Obligations | 1,221,443 | XXX | XXX | 1,221,443 | 0.0000 | 0 | 0.0000 | 0 | 0.0000 | 0 |
| 2. | 1 | Highest Quality | 34,805,756 | XXX | XXX | 34,805,756 | 0.0004 | 13,922 | 0.0023 | 80,053 | 0.0030 | 104,417 |
| 3. | 2 | High Quality | 17,419,002 | XXX | XXX | 17,419,002 | 0.0019 | 33,096 | 0.0058 | 101,030 | 0.0090 | 156,771 |
| 4. | 3 | Medium Quality | 473,218 | XXX | XXX | 473,218 | 0.0093 | 4,401 | 0.0230 | 10,884 | 0.0340 | 16,089 |
| 5. | 4 | Low Quality | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 |
| 6. | 5 | Lower Quality | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 |
| 7. | 6 | In or Near Default | | XXX | XXX | 0 | 0.0000 | 0 | 0.2000 | 0 | 0.2000 | 0 |
| 8. | | Total Unrated Multi-class Securities Acquired by Conversion | | XXX | XXX | 0 | | | | | | |
| 9. | | Total Bonds (Sum of Lines 1 through 8) | 53,919,419 | XXX | XXX | 53,919,419 | XXX | 0 | XXX | 0 | XXX | 0 |
| PREFERRED STOCK | | | | | | | | | | | | |
| 10. | 1 | Highest Quality | 464,100 | XXX | XXX | 464,100 | 0.0004 | 186 | 0.0023 | 1,067 | 0.0030 | 1,392 |
| 11. | 2 | High Quality | 2,634,389 | XXX | XXX | 2,634,389 | 0.0019 | 5,005 | 0.0058 | 15,279 | 0.0090 | 23,710 |
| 12. | 3 | Medium Quality | 1,050,450 | XXX | XXX | 1,050,450 | 0.0093 | 9,769 | 0.0230 | 24,160 | 0.0340 | 35,715 |
| 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) | 4,148,939 | XXX | XXX | 4,148,939 | XXX | 14,960 | XXX | 40,507 | XXX | 60,817 |
| SHORT - TERM BONDS | | | | | | | | | | | | |
| 18. | | Exempt Obligations | 1,201,917 | XXX | XXX | 1,201,917 | 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 | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 |
| 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) | 1,201,917 | XXX | XXX | 1,201,917 | XXX | 0 | XXX | 0 | XXX | 0 |

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

| Line Num- ber | 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.4 x 5) | 7 Factor | 8 Amount (Cols. 4 x 7) | 9 Factor | 10 Amount (Cols. 4 x 9) | |
| DERIVATIVE INSTRUMENTS | | | | | | | | | | | | | |
| 26. | 1 2 3 4 5 6 | Exchange Traded | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 | |
| 27. | | Highest Quality | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 | |
| 28. | | High Quality | | XXX | XXX | 0 | 0.0019 | 0 | 0.0058 | 0 | 0.0090 | 0 | |
| 29. | | Medium Quality | | XXX | XXX | 0 | 0.0093 | 0 | 0.0230 | 0 | 0.0340 | 0 | |
| 30. | | Low Quality | | XXX | XXX | 0 | 0.0213 | 0 | 0.0530 | 0 | 0.0750 | 0 | |
| 31. | | Lower Quality | | XXX | XXX | 0 | 0.0432 | 0 | 0.1100 | 0 | 0.1700 | 0 | |
| 32. | | 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) | 59,270,275 | XXX | XXX | 59,270,275 | XXX | 66,379 | XXX | 232,475 | XXX | 338,095 | |
| MORTGAGE LOANS | | | | | | | | | | | | | |
| In Good Standing: | | | | | | | | | | | | | |
| 35. | | Farm Mortgages | | | XXX | 0 | 0.0035 | 0 | 0.0100 | 0 | 0.0130 | 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 | 0.0035 | 0 | 0.0100 | 0 | 0.0130 | 0 | |
| 40. | | In Good Standing With Restructured Terms | | | XXX | 0 | 0.0035 | 0 | 0.0100 | 0 | 0.0130 | 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 | 0.0030 | 0 | 0.0100 | 0 | 0.0130 | 0 | |
| 53. | | Total Mortgage Loans on Real Estate (Lines 51 + 52) | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 | |

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

| Line Num- ber | 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 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | Factor | Amount (Cols.4 x 5) | Factor | Amount (Cols. 4 x 7) | Factor | Amount (Cols. 4 x 9) |
| COMMON STOCK | | | | | | | | | | | | |
| 1. | | Unaffiliated - Public | 3,051,380 | XXX | XXX | 3,051,380 | 0.0000 | .0 | 0.1300 (a) | 396,679 | 0.1300 (a) | 396,679 |
| 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 | XXX | | XXX | | XXX | |
| 6. | | Fixed Income - Highest Quality | | | | 0 | XXX | | XXX | | XXX | |
| 7. | | Fixed Income - High Quality | | | | 0 | XXX | | XXX | | XXX | |
| 8. | | Fixed Income - Medium Quality | | | | 0 | XXX | | XXX | | XXX | |
| 9. | | Fixed Income - Low Quality | | | | 0 | XXX | | XXX | | XXX | |
| 10. | | Fixed Income - Lower Quality | | | | 0 | XXX | | XXX | | XXX | |
| 11. | | Fixed Income - In/Near Default | | | | 0 | XXX | | XXX | | XXX | |
| 12. | | Unaffiliated Common Stock - Public | | | | 0 | 0.0000 | .0 | 0.1300 (a) | 0 | 0.1300 (a) | 0 |
| 13. | | Unaffiliated Common Stock - Private | | | | 0 | 0.0000 | .0 | 0.1600 | 0 | 0.1600 | 0 |
| 14. | | Mortgage Loans | | | | 0 | 0.0030 | .0 | 0.0100 | 0 | 0.0130 | 0 |
| 15. | | Real Estate | | | | 0 | (b) | .0 | (b) | 0 | (b) | 0 |
| 16. | | Affiliated - Certain Other (See SVO Purposes and Procedures Manual) | 4,194,492 | XXX | XXX | 4,194,492 | 0.0000 | .0 | 0.1300 | 545,284 | 0.1300 | 545,284 |
| 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) | 7,245,872 | 0 | 0 | 7,245,872 | XXX | 0 | XXX | 941,963 | XXX | 941,963 |
| REAL ESTATE | | | | | | | | | | | | |
| 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 |
| OTHER INVESTED ASSETS | | | | | | | | | | | | |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS | | | | | | | | | | | | |
| 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 | 684,302 | XXX | XXX | 684,302 | 0.0213 | 14,576 | 0.0530 | 36,268 | 0.0750 | 51,323 |
| 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) | 684,302 | XXX | XXX | 684,302 | XXX | 14,576 | XXX | 36,268 | XXX | 51,323 |

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

| Line Num- ber | 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 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | Factor | Amount (Cols.4 x 5) | Factor | Amount (Cols. 4 x 7) | Factor | Amount (Cols. 4 x 9) |
| | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS | | | | | | | | | | |
| 31. | 1 | Highest Quality | | XXX | XXX | 0 | 0.0004 | 0 | 0.0023 | 0 | 0.0030 | 0 |
| 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) | 0 | XXX | XXX | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS | | | | | | | | | | |
| | | In Good Standing: | | | | | | | | | | |
| 39. | | Farm Mortgages | | | XXX | 0 | 0.0030 | 0 | 0.0100 | 0 | 0.0130 | 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 | 0.0030 | 0 | 0.0100 | 0 | 0.0130 | 0 |
| 44. | | In Good Standing With Restructured Terms | | | XXX | 0 | 0.0030 | 0 | 0.0100 | 0 | 0.0130 | 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 Num- ber | 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 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | Factor | Amount (Cols.4 x 5) | Factor | Amount (Cols. 4 x 7) | Factor | Amount (Cols. 4 x 9) |
| | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK | | | | | | | | | | |
| 56. | | Unaffiliated Public | | XXX | XXX | 0 | 0.0000 | 0 | 0.1300 (a) | 0 | 0.1300 (a) | 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 |
| | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE | | | | | | | | | | |
| 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 |
| | | LOW INCOME HOUSING TAX CREDIT INVESTMENTS | | | | | | | | | | |
| 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. | | Guaranteed State Low Income Housing Tax Credit | 0 | | | 0 | 0.0003 | 0 | 0.0006 | 0 | 0.0010 | 0 |
| 69. | | Non-guaranteed State Low Income Housing Tax Credit | 0 | | | 0 | 0.0063 | 0 | 0.0120 | 0 | 0.0190 | 0 |
| 70. | | All Other Low Income Housing Tax Credit | 0 | | | 0 | 0.0273 | 0 | 0.0600 | 0 | 0.0975 | 0 |
| 71. | | Total LIHTC | 0 | 0 | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| | | ALL OTHER INVESTMENTS | | | | | | | | | | |
| 72. | | NAIC 1 Working Capital Finance Investments | | XXX | | 0 | 0.0000 | 0 | 0.0037 | 0 | 0.0037 | 0 |
| 73. | | NAIC 2 Working Capital Finance Investments | | XXX | | 0 | 0.0000 | 0 | 0.0120 | 0 | 0.0120 | 0 |
| 74. | | Other Invested Assets - Schedule BA | | XXX | | 0 | 0.0000 | 0 | 0.1300 | 0 | 0.1300 | 0 |
| 75. | | Other Short-Term Invested Assets - Schedule DA | | XXX | | 0 | 0.0000 | 0 | 0.1300 | 0 | 0.1300 | 0 |
| 76. | | Total All Other (Sum of Lines 72 + 73, 74 and 75) | 0 | XXX | 0 | 0 | XXX | 0 | XXX | 0 | XXX | 0 |
| 77. | | Total Other Invested Assets - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 71 and 76) | 684,302 | 0 | 0 | 684,302 | XXX | 14,576 | XXX | 36,268 | XXX | 51,323 |

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).
(b) Determined using the same factors and breakdowns used for directly owned real estate.

Asset Valuation Reserve Replications (Synthetic) Assets
N O N E

Schedule F - Claims
N O N E

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable 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 % |
| PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS | | | | | | | | | | | | | | | | | | |
| 1. Premiums written | 82,250 | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | 82,250 | XXX |
| 2. Premiums earned | 85,911 | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | 85,911 | XXX |
| 3. Incurred claims | 61,906 | 72.1 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 61,906 | 72.1 |
| 4. Cost containment expenses | 0 | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | 0 | 0.0 |
| 5. Incurred claims and cost containment expenses (Lines 3 and 4) | 61,906 | 72.1 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 61,906 | 72.1 |
| 6. Increase in contract reserves | (2,233) | (2.6) | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | (2,233) | (2.6) |
| 7. Commissions (a) | 12,369 | 14.4 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | 12,369 | 14.4 |
| 8. Other general insurance expenses | 4,846 | 5.6 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | 4,846 | 5.6 |
| 9. Taxes, licenses and fees | 351 | 0.4 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | | 0.0 | 351 | 0.4 |
| 10. Total other expenses incurred | 17,566 | 20.4 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 17,566 | 20.4 |
| 11. Aggregate write-ins for deductions | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |
| 12. Gain from underwriting before dividends or refunds | 8,672 | 10.1 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 8,672 | 10.1 |
| 13. Dividends or refunds | 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 | 8,672 | 10.1 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 8,672 | 10.1 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | | | | |
| 1101. | | | | | | | | | | | | | | | | | | |
| 1102. | | | | | | | | | | | | | | | | | | |
| 1103. | | | | | | | | | | | | | | | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |

(a) Includes \$ 0 reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable 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 Accident and Health (Group and Individual) | Collectively Renewable | Non-Cancelable | Guaranteed Renewable | Non-Renewable for Stated Reasons Only | Other Accident Only | All Other |
| PART 2. - RESERVES AND LIABILITIES | | | | | | | | | |
| A. Premium Reserves: | | | | | | | | | |
| 1. Unearned premiums | 0 | | | | | | | | |
| 2. Advance premiums | 1,382 | | | | | | | | 1,382 |
| 3. Reserve for rate credits | 0 | | | | | | | | |
| 4. Total premium reserves, current year | 1,382 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1,382 |
| 5. Total premium reserves, prior year | 5,043 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 5,043 |
| 6. Increase in total premium reserves | (3,661) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | (3,661) |
| B. Contract Reserves: | | | | | | | | | |
| 1. Additional reserves (a) | 13,064 | | | | | | | | 13,064 |
| 2. Reserve for future contingent benefits | 0 | | | | | | | | |
| 3. Total contract reserves, current year | 13,064 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 13,064 |
| 4. Total contract reserves, prior year | 15,297 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 15,297 |
| 5. Increase in contract reserves | (2,233) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | (2,233) |
| C. Claim Reserves and Liabilities: | | | | | | | | | |
| 1. Total current year | 16,066 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 16,066 |
| 2. Total prior year | 17,336 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 17,336 |
| 3. Increase | (1,270) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | (1,270) |

| | | | | | | | | | |
|--|---------|---|---|---|---|---|---|---|---------|
| PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES | | | | | | | | | |
| 1. Claims paid during the year: | | | | | | | | | |
| 1.1 On claims incurred prior to current year | 14,861 | | | | | | | | 14,861 |
| 1.2 On claims incurred during current year | 48,315 | | | | | | | | 48,315 |
| 2. Claim reserves and liabilities, December 31, current year: | | | | | | | | | |
| 2.1 On claims incurred prior to current year | 0 | | | | | | | | 0 |
| 2.2 On claims incurred during current year | 16,066 | | | | | | | | 16,066 |
| 3. Test: | | | | | | | | | |
| 3.1 Lines 1.1 and 2.1 | 14,861 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14,861 |
| 3.2 Claim reserves and liabilities, December 31, prior year | 17,336 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 17,336 |
| 3.3 Line 3.1 minus Line 3.2 | (2,475) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | (2,475) |

| | | | | | | | | | |
|------------------------------|--|--|--|--|--|--|--|--|--|
| PART 4. - REINSURANCE | | | | | | | | | |
| A. Reinsurance Assumed: | | | | | | | | | |
| 1. Premiums written | | | | | | | | | |
| 2. Premiums earned | | | | | | | | | |
| 3. Incurred claims | | | | | | | | | |
| 4. Commissions | | | | | | | | | |
| B. Reinsurance Ceded: | | | | | | | | | |
| 1. Premiums written | | | | | | | | | |
| 2. Premiums earned | | | | | | | | | |
| 3. Incurred claims | | | | | | | | | |
| 4. Commissions | | | | | | | | | |

(a) Includes \$ premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

| | 1 Medical | 2 Dental | 3 Other | 4 Total |
|---|--------------|-------------|------------|------------|
| A. Direct: | | | | |
| 1. Incurred Claims | | | 61,906 | 61,906 |
| 2. Beginning Claim Reserves and Liabilities | | | 17,336 | 17,336 |
| 3. Ending Claim Reserves and Liabilities | | | 16,066 | 16,066 |
| 4. Claims Paid | 0 | 0 | 63,176 | 63,176 |
| B. Assumed Reinsurance: | | | | |
| 5. Incurred Claims..... | | | | 0 |
| 6. Beginning Claim Reserves and Liabilities | | | | 0 |
| 7. Ending Claim Reserves and Liabilities | | | | 0 |
| 8. Claims Paid | 0 | 0 | 0 | 0 |
| C. Ceded Reinsurance: | | | | |
| 9. Incurred Claims..... | | | | 0 |
| 10. Beginning Claim Reserves and Liabilities | | | | 0 |
| 11. Ending Claim Reserves and Liabilities | | | | 0 |
| 12. Claims Paid | 0 | 0 | 0 | 0 |
| D. Net: | | | | |
| 13. Incurred Claims..... | 0 | 0 | 61,906 | 61,906 |
| 14. Beginning Claim Reserves and Liabilities | 0 | 0 | 17,336 | 17,336 |
| 15. Ending Claim Reserves and Liabilities | 0 | 0 | 16,066 | 16,066 |
| 16. Claims Paid | 0 | 0 | 63,176 | 63,176 |
| E. Net Incurred Claims and Cost Containment Expenses: | | | | |
| 17. Incurred Claims and Cost Containment Expenses | | | 61,906 | 61,906 |
| 18. Beginning Reserves and Liabilities | | | 17,336 | 17,336 |
| 19. Ending Reserves and Liabilities | | | 16,066 | 16,066 |
| 20. Paid Claims and Cost Containment Expenses | 0 | 0 | 63,176 | 63,176 |

Schedule S - Part 1 - Section 1
N O N E

Schedule S - Part 1 - Section 2
N O N E

Schedule S - Part 2
N O N E

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable 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 ID Number | 3 Effective Date | 4 Name of Company | 5 Domiciliary Jurisdiction | 6 Type of Reinsurance 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 | 9 | | 11 | 12 | | |
| | | | | | | | Current Year | Prior Year | | Current Year | Prior Year | | |
| 0399999. Total General Account - Authorized U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0699999. Total General Account - Authorized Non-U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0799999. Total General Account - Authorized Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 76236 | 31-1213778 | 07/01/0119 | Cincinnati Life Insurance Company | OH | YRT/I | 143,762 | 2,348 | 2,228 | 3,665 | 0 | 0 | 0 | 0 |
| 82627 | 06-0839705 | 03/01/1981 | Swiss Re Life | NY | YRT/I | 14,916 | 685 | 648 | 1,626 | | | | |
| 82627 | | 03/01/1981 | Swiss Re Life | NY | ADB/I | 0 | 25 | 28 | 18 | | | | |
| 0899999. General Account - Authorized U.S. Non-Affiliates | | | | | | 158,678 | 3,058 | 2,904 | 5,309 | 0 | 0 | 0 | 0 |
| 1099999. Total General Account - Authorized Non-Affiliates | | | | | | 158,678 | 3,058 | 2,904 | 5,309 | 0 | 0 | 0 | 0 |
| 1199999. Total General Account Authorized | | | | | | 158,678 | 3,058 | 2,904 | 5,309 | 0 | 0 | 0 | 0 |
| 1499999. Total General Account - Unauthorized U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1799999. Total General Account - Unauthorized Non-U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1899999. Total General Account - Unauthorized Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2199999. Total General Account - Unauthorized Non-Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2299999. Total General Account Unauthorized | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2599999. Total General Account - Certified U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2899999. Total General Account - Certified Non-U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2999999. Total General Account - Certified Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3299999. Total General Account - Certified Non-Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3399999. Total General Account Certified | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3499999. Total General Account Authorized, Unauthorized and Certified | | | | | | 158,678 | 3,058 | 2,904 | 5,309 | 0 | 0 | 0 | 0 |
| 3799999. Total Separate Accounts - Authorized U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4199999. Total Separate Accounts - Authorized Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4499999. Total Separate Accounts - Authorized Non-Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4599999. Total Separate Accounts Authorized | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4899999. Total Separate Accounts - Unauthorized U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5299999. Total Separate Accounts - Unauthorized Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5599999. Total Separate Accounts - Unauthorized Non-Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5699999. Total Separate Accounts Unauthorized | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5999999. Total Separate Accounts - Certified U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6299999. Total Separate Accounts - Certified Non-U.S. Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6399999. Total Separate Accounts - Certified Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6699999. Total Separate Accounts - Certified Non-Affiliates | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6799999. Total Separate Accounts Certified | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6899999. Total Separate Accounts Authorized, Unauthorized and Certified | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999) | | | | | | 158,678 | 3,058 | 2,904 | 5,309 | 0 | 0 | 0 | 0 |
| 7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999) | | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9999999 - Totals | | | | | | 158,678 | 3,058 | 2,904 | 5,309 | 0 | 0 | 0 | 0 |

Schedule S - Part 3 - Section 2
N O N E

Schedule S - Part 4
N O N E

Schedule S - Part 4 - Bank Footnote
N O N E

Schedule S - Part 5
N O N E

Schedule S - Part 5 - Bank Footnote
N O N E

SCHEDULE S - PART 6
Five Year Exhibit of Reinsurance Ceded Business
(000 OMITTED)

| | 1 2013 | 2 2012 | 3 2011 | 4 2010 | 5 2009 |
|--|-----------|-----------|-----------|-----------|-----------|
| A. OPERATIONS ITEMS | | | | | |
| 1. Premiums and annuity considerations for life and accident and health contracts | 5 | 5 | 5 | 5 | 4 |
| 2. Commissions and reinsurance expense allowances | 0 | 0 | 0 | 0 | 0 |
| 3. Contract claims | 0 | 0 | 0 | 0 | 0 |
| 4. Surrender benefits and withdrawals for life contracts | | | | 0 | 0 |
| 5. Dividends to policyholders | | | | 0 | 0 |
| 6. Reserve adjustments on reinsurance ceded | 0 | 0 | 0 | 0 | 0 |
| 7. Increase in aggregate reserve for life and accident and health contracts | | | | 0 | 0 |
| B. BALANCE SHEET ITEMS | | | | | |
| 8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected | 0 | 0 | 0 | 0 | 0 |
| 9. Aggregate reserves for life and accident and health contracts | 3 | 3 | 3 | 3 | 3 |
| 10. Liability for deposit-type contracts | | | | 0 | 0 |
| 11. Contract claims unpaid | 0 | 0 | 0 | 0 | 0 |
| 12. Amounts recoverable on reinsurance | 0 | 0 | 0 | 0 | 0 |
| 13. Experience rating refunds due or unpaid | | 0 | 0 | 0 | 0 |
| 14. Policyholders' dividends (not included in Line 10) | | | | 0 | 0 |
| 15. Commissions and reinsurance expense allowances due | | | | 0 | 0 |
| 16. Unauthorized reinsurance offset | 0 | 0 | 0 | 0 | 0 |
| 17. Offset for reinsurance with Certified Reinsurers | | 0 | XXX | XXX | XXX |
| C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM) | | | | | |
| 18. Funds deposited by and withheld from (F) | 0 | 0 | 0 | 0 | 0 |
| 19. Letters of credit (L) | 0 | 0 | 0 | 0 | 0 |
| 20. Trust agreements (T) | 0 | 0 | 0 | 0 | 0 |
| 21. Other (O) | 0 | 0 | 0 | 0 | 0 |
| D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM) | | | | | |
| 22. Multiple Beneficiary Trust | | 0 | XXX | XXX | XXX |
| 23. Funds deposited by and withheld from (F) | | 0 | XXX | XXX | XXX |
| 24. Letters of credit (L) | | 0 | XXX | XXX | XXX |
| 25. Trust agreements (T) | | 0 | XXX | XXX | XXX |
| 26. Other (O) | | 0 | 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) |
|--|------------------------------------|---------------------------------|-----------------------------------|
| ASSETS (Page 2, Col. 3) | | | |
| 1. Cash and invested assets (Line 12) | 68,148,580 | | 68,148,580 |
| 2. Reinsurance (Line 16) | 0 | 0 | 0 |
| 3. Premiums and considerations (Line 15) | 753,535 | 0 | 753,535 |
| 4. Net credit for ceded reinsurance | XXX | 3,058 | 3,058 |
| 5. All other admitted assets (balance) | 1,923,204 | | 1,923,204 |
| 6. Total assets excluding Separate Accounts (Line 26) | 70,825,319 | 3,058 | 70,828,377 |
| 7. Separate Account assets (Line 27) | 0 | | 0 |
| 8. Total assets (Line 28) | 70,825,319 | 3,058 | 70,828,377 |
| LIABILITIES, CAPITAL AND SURPLUS (Page 3) | | | |
| 9. Contract reserves (Lines 1 and 2) | 59,271,124 | 3,058 | 59,274,182 |
| 10. Liability for deposit-type contracts (Line 3) | 283,423 | | 283,423 |
| 11. Claim reserves (Line 4) | 272,405 | 0 | 272,405 |
| 12. Policyholder dividends/reserves (Lines 5 through 7) | 4,550 | | 4,550 |
| 13. Premium & annuity considerations received in advance (Line 8) | 353,166 | | 353,166 |
| 14. Other contract liabilities (Line 9) | 395,606 | | 395,606 |
| 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 |
| 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 |
| 19. All other liabilities (balance) | 1,215,900 | | 1,215,900 |
| 20. Total liabilities excluding Separate Accounts (Line 26) | 61,796,174 | 3,058 | 61,799,232 |
| 21. Separate Account liabilities (Line 27) | | | 0 |
| 22. Total liabilities (Line 28) | 61,796,174 | 3,058 | 61,799,232 |
| 23. Capital & surplus (Line 38) | 9,029,145 | XXX | 9,029,145 |
| 24. Total liabilities, capital & surplus (Line 39) | 70,825,319 | 3,058 | 70,828,377 |
| NET CREDIT FOR CEDED REINSURANCE | | | |
| 25. Contract reserves | 3,058 | | |
| 26. Claim reserves | 0 | | |
| 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 | 0 | | |
| 32. Other ceded reinsurance recoverables | 0 | | |
| 33. Total ceded reinsurance recoverables | 3,058 | | |
| 34. Premiums and considerations | 0 | | |
| 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 | 0 | | |
| 41. Total net credit for ceded reinsurance | 3,058 | | |

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

Allocated by States and Territories

| | | | Direct Business Only | | | | | |
|--------------|--------------------------------|-----|--------------------------------|-------------------------------------|--|---|---------------------------|------------|
| | | | 1 | 2 | 3 | 4 | 5 | 6 |
| States, Etc. | | | Life (Group and Individual) | Annuities (Group and Individual) | Disability Income (Group and Individual) | Long-Term Care (Group and Individual) | Deposit-Type Contracts | Totals |
| 1. | Alabama | AL | .0 | .0 | | | 0 | .0 |
| 2. | Alaska | AK | .0 | .0 | | | 0 | .0 |
| 3. | Arizona | AZ | .0 | .0 | | | 0 | .0 |
| 4. | Arkansas | AR | .0 | .0 | | | 0 | .0 |
| 5. | California | CA | .0 | .0 | | | 0 | .0 |
| 6. | Colorado | CO | .0 | .0 | | | 0 | .0 |
| 7. | Connecticut | CT | .0 | .0 | | | 0 | .0 |
| 8. | Delaware | DE | .0 | .0 | | | 0 | .0 |
| 9. | District of Columbia | DC | .0 | .0 | | | 0 | .0 |
| 10. | Florida | FL | .0 | .0 | | | 0 | .0 |
| 11. | Georgia | GA | 7,586,024 | 480,258 | | | 0 | 8,066,282 |
| 12. | Hawaii | HI | .0 | .0 | | | 0 | .0 |
| 13. | Idaho | ID | .0 | .0 | | | 0 | .0 |
| 14. | Illinois | IL | .0 | .0 | | | 0 | .0 |
| 15. | Indiana | IN | 8,481,942 | 12,627 | | | 0 | 8,494,569 |
| 16. | Iowa | IA | .0 | .0 | | | 0 | .0 |
| 17. | Kansas | KS | .0 | .0 | | | 0 | .0 |
| 18. | Kentucky | KY | 4,821,548 | 12,756 | | | 0 | 4,834,304 |
| 19. | Louisiana | LA | .0 | .0 | | | 0 | .0 |
| 20. | Maine | ME | .0 | .0 | | | 0 | .0 |
| 21. | Maryland | MD | .0 | .0 | | | 0 | .0 |
| 22. | Massachusetts | MA | .0 | .0 | | | 0 | .0 |
| 23. | Michigan | MI | .0 | .0 | | | 0 | .0 |
| 24. | Minnesota | MN | .0 | .0 | | | 0 | .0 |
| 25. | Mississippi | MS | .0 | .0 | | | 0 | .0 |
| 26. | Missouri | MO | .0 | .0 | | | 0 | .0 |
| 27. | Montana | MT | .0 | .0 | | | 0 | .0 |
| 28. | Nebraska | NE | .0 | .0 | | | 0 | .0 |
| 29. | Nevada | NV | .0 | .0 | | | 0 | .0 |
| 30. | New Hampshire | NH | .0 | .0 | | | 0 | .0 |
| 31. | New Jersey | NJ | .0 | .0 | | | 0 | .0 |
| 32. | New Mexico | NM | .0 | .0 | | | 0 | .0 |
| 33. | New York | NY | .0 | .0 | | | 0 | .0 |
| 34. | North Carolina | NC | .0 | .0 | | | 0 | .0 |
| 35. | North Dakota | ND | .0 | .0 | | | 0 | .0 |
| 36. | Ohio | OH | 6,141,562 | .50 | | | 0 | 6,141,612 |
| 37. | Oklahoma | OK | .0 | .0 | | | 0 | .0 |
| 38. | Oregon | OR | .0 | .0 | | | 0 | .0 |
| 39. | Pennsylvania | PA | .0 | .0 | | | 0 | .0 |
| 40. | Rhode Island | RI | .0 | .0 | | | 0 | .0 |
| 41. | South Carolina | SC | .0 | .0 | | | 0 | .0 |
| 42. | South Dakota | SD | .0 | .0 | | | 0 | .0 |
| 43. | Tennessee | TN | 83,134 | .0 | | | 0 | 83,134 |
| 44. | Texas | TX | .0 | .0 | | | 0 | .0 |
| 45. | Utah | UT | .0 | .0 | | | 0 | .0 |
| 46. | Vermont | VT | .0 | .0 | | | 0 | .0 |
| 47. | Virginia | VA | .0 | .0 | | | 0 | .0 |
| 48. | Washington | WA | .0 | .0 | | | 0 | .0 |
| 49. | West Virginia | WV | .0 | .0 | | | 0 | .0 |
| 50. | Wisconsin | WI | .0 | .0 | | | 0 | .0 |
| 51. | Wyoming | WY | .0 | .0 | | | 0 | .0 |
| 52. | American Samoa | AS | .0 | .0 | | | 0 | .0 |
| 53. | Guam | GU | .0 | .0 | | | 0 | .0 |
| 54. | Puerto Rico | PR | .0 | .0 | | | 0 | .0 |
| 55. | U.S. Virgin Islands | VI | .0 | .0 | | | 0 | .0 |
| 56. | Northern Mariana Islands | MP | .0 | .0 | | | 0 | .0 |
| 57. | Canada | CAN | .0 | .0 | | | 0 | .0 |
| 58. | Aggregate Other Alien | OT | .0 | .0 | | | 0 | .0 |
| 59. | Total | | 27,114,210 | 505,691 | 0 | 0 | 0 | 27,619,901 |

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

NONE

| Asterisk | Explanation |
|----------|-------------|
| | |

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable Life Insurance Company

SCHEDULE Y

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

[illegible]

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

| | Responses |
|---|-----------|
| MARCH FILING | |
| 1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | YES |
| 2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | YES |
| 3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? | YES |
| 4. Will an actuarial opinion be filed by March 1? | YES |
| APRIL FILING | |
| 5. Will Management's Discussion and Analysis be filed by April 1? | YES |
| 6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? | YES |
| 7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1? | YES |
| 8. Will the Supplemental Investment Risks Interrogatories be filed by April 1? | YES |
| JUNE FILING | |
| 9. Will an audited financial report be filed by June 1? | YES |
| 10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | YES |
| AUGUST FILING | |
| 11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? | YES |

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

| | |
|--|-----|
| MARCH FILING | |
| 12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | NO |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | YES |
| 14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | NO |
| 15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | YES |
| 16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | YES |
| 17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 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? | YES |
| 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? | YES |
| 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? | NO |
| 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 |

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable Life Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

| | | |
|-----|---|-----|
| 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 |
| 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? | YES |
| 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 Worker's 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 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? | NO |
| 47. | Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? | NO |

AUGUST FILING

| | | |
|-----|--|----|
| 48. | Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | NO |
|-----|--|----|

Explanations:

12. N/A
14. N/A
17. N/A
18. N/A
19. N/A
22. N/A
23. N/A
24. N/A
25. N/A
26. N/A
27. N/A
28. N/A
29. N/A
30. N/A
31. N/A
33. N/A
34. N/A
36. N/A
37. N/A
38. N/A
39. N/A
42. N/A
46. N/A
47. N/A
48. N/A

Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420]



14. Trusteed Surplus Statement [Document Identifier 490]



17. Actuarial Opinion on X-Factors [Document Identifier 442]



18. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]



19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]



22. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]



23. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]



24. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]



25. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]



26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]

















27. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable Life Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

| | | |
|-----|---|--|
| 28. | Modified Guaranteed Annuity Model Regulation [Document Identifier 453] |  <div>880642013453000000</div> |
| 29. | Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII [Document Identifier 436] |  <div>880642013436000000</div> |
| 30. | Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII [Document Identifier 437] |  <div>880642013437000000</div> |
| 31. | Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII [Document Identifier 438] |  <div>880642013438000000</div> |
| 33. | 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 [Document Identifier 454] |  <div>880642013454000000</div> |
| 34. | Workers' Compensation Carve-Out Supplement [Document Identifier 495] |  <div>880642013495000000</div> |
| 36. | Medicare Part D Coverage Supplement [Document Identifier 365] |  <div>880642013365000000</div> |
| 37. | Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224] |  <div>880642013224000000</div> |
| 38. | Relief from the one-year cooling off period for independent CPA [Document Identifier 225] |  <div>880642013225000000</div> |
| 39. | Relief from the Requirements for Audit Committees [Document Identifier 226] |  <div>880642013226000000</div> |
| 42. | Credit Insurance Experience Exhibit [Document Identifier 230] |  <div>880642013230000000</div> |
| 46. | Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] |  <div>880642013216000000</div> |
| 47. | Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217] |  <div>880642013217000000</div> |
| 48. | Management's Report of Internal Control Over Financial Reporting [Document Identifier 223] |  <div>880642013223000000</div> |

OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable Life Insurance Company

MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

For The Year Ended December 31, 2013
(To Be Filed by March 1)

FOR THE STATE OF Ohio.....
NAIC Group Code 0838..... NAIC Company Code 88064.....
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202.....
Person Completing This Exhibit Gregory Baker.....
Title CFO..... Telephone Number 513-621-1826.....

| 1 Compliance with OBRA | 2 Policy Form Number | 3 Standardized Medicare Supplement Benefit Plan | 4 Medicare Select | 5 Plan Characteristics | 6 Date Approved | 7 Date Approval Withdrawn | 8 Date Last Amended | 9 Date Closed | 10 Policy Marketing Trade Name | Policies Issued Through 2010 | | | | Policies Issued in 2011; 2012; 2013 | | | |
|--|-----------------------------|--|--------------------------|-------------------------------|------------------------|----------------------------------|----------------------------|----------------------|---------------------------------------|------------------------------|------------------|----------------------------------|-----------------------------------|-------------------------------------|------------------|----------------------------------|-----------------------------------|
| | | | | | | | | | | 11 Premiums Earned | Incurred Claims | | 14 Number of Covered Lives | 15 Premiums Earned | Incurred Claims | | 18 Number of Covered Lives |
| | | | | | | | | | | | 12 Amount | 13 Percent of Premiums Earned | | | 16 Amount | 17 Percent of Premiums Earned | |
| | | | | | | | | | | | | | | | | | |
| YES | AP355BAUC | B | NO | 0030000 | 10/01/1996 | 12/31/2004 | 12/31/2004 | 12/31/2004 | Medicare Supplement | 85,453 | 61,906 | 72.4 | 32 | | | 0.0 | |
| 0199999. Total Experience on Individual Policies | | | | | | | | | | 85,453 | 61,906 | 72.4 | 32 | 0 | 0 | 0.0 | 0 |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

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: 525 Vine Street, Suite 1925 Cincinnati , OH 45202

2.2 Contact Person and Phone Number: Baker A Gregory 513-621-1826
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address: 525 Vine Street, Suite 1925 Cincinnati , OH 45202

3.2 Contact Person and Phone Number: Baker A Gregory 513-621-1826
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable Life Insurance Company

SCHEDULE O SUPPLEMENT

For The Year Ended December 31, 2013
(To Be Filed by March 1)

Of The Cincinnati Equitable Life Insurance Company
ADDRESS (City, State and Zip Code) Cincinnati , OH 45202
NAIC Group Code 0838 NAIC Company Code 88064 Employer's Identification Number (FEIN) 35-1452221

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

| Years in Which Losses Were Incurred | Net Amount Paid Policyholders | | | | |
|--|-------------------------------|-----------|-----------|-----------|--------------|
| | 1 2009 | 2 2010 | 3 2011 | 4 2012 | 5 2013(a) |
| 1. Prior | 0 | 84 | 82 | 82 | 82 |
| 2. 2009 | 0 | 0 | | 0 | |
| 3. 2010 | XXX | 0 | | 0 | |
| 4. 2011 | XXX | XXX | | 0 | |
| 5. 2012 | XXX | XXX | XXX | 0 | |
| 6. 2013 | XXX | XXX | XXX | XXX | |

Section B - Other Accident and Health

| | | | | | |
|----------|-----|-----|-----|-----|-----|
| 1. Prior | 13 | 13 | 13 | 13 | 13 |
| 2. 2009 | 113 | 106 | 106 | 106 | 106 |
| 3. 2010 | XXX | 109 | 103 | 103 | 103 |
| 4. 2011 | XXX | XXX | 109 | 107 | 107 |
| 5. 2012 | XXX | XXX | XXX | 60 | 58 |
| 6. 2013 | XXX | XXX | XXX | XXX | 60 |

Section C - Credit Accident and Health

| | | | | | |
|----------|-----|-----|-----|-----|--|
| 1. Prior | | | | | |
| 2. 2009 | | | | | |
| 3. 2010 | XXX | | | | |
| 4. 2011 | XXX | XXX | | | |
| 5. 2012 | XXX | XXX | XXX | | |
| 6. 2013 | XXX | XXX | XXX | XXX | |

Section D -

| | | | | | |
|----------|-----|-----|-----|-----|--|
| 1. Prior | | | | | |
| 2. 2009 | | | | | |
| 3. 2010 | XXX | | | | |
| 4. 2011 | XXX | XXX | | | |
| 5. 2012 | XXX | XXX | XXX | | |
| 6. 2013 | XXX | XXX | XXX | XXX | |

Section E -

| | | | | | |
|----------|-----|-----|-----|-----|--|
| 1. Prior | | | | | |
| 2. 2009 | | | | | |
| 3. 2010 | XXX | | | | |
| 4. 2011 | XXX | XXX | | | |
| 5. 2012 | XXX | XXX | XXX | | |
| 6. 2013 | XXX | XXX | XXX | XXX | |

Section F -

| | | | | | |
|----------|-----|-----|-----|-----|--|
| 1. Prior | | | | | |
| 2. 2009 | | | | | |
| 3. 2010 | XXX | | | | |
| 4. 2011 | XXX | XXX | | | |
| 5. 2012 | XXX | XXX | XXX | | |
| 6. 2013 | XXX | XXX | XXX | XXX | |

Section G -

| | | | | | |
|----------|-----|-----|-----|-----|--|
| 1. Prior | | | | | |
| 2. 2009 | | | | | |
| 3. 2010 | XXX | | | | |
| 4. 2011 | XXX | XXX | | | |
| 5. 2012 | XXX | XXX | XXX | | |
| 6. 2013 | XXX | XXX | XXX | XXX | |

(a) See paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement of ins

Supplement Schedule O - Part 2 Section A
N O N E

Supplement Schedule O - Part 2 Section B
N O N E

Supplement Schedule O - Part 2 Section C
N O N E

Supplement Schedule O - Part 2 Section D
N O N E

Supplement Schedule O - Part 2 Section E
N O N E

Supplement Schedule O - Part 2 Section F
N O N E

Supplement Schedule O - Part 2 Section G
N O N E

SUPPLEMENT FOR THE YEAR 2013 OF THE Cincinnati Equitable Life Insurance Company

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

| Years in Which Losses Were Incurred | | Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year | | | | |
|--|------|--|-----------|-----------|-----------|-----------|
| | | 1 2009 | 2 2010 | 3 2011 | 4 2012 | 5 2013 |
| 1. | 2009 | | | | XXX | XXX |
| 2. | 2010 | XXX | | | | XXX |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section B - Other Accident and Health

| | | | | | | |
|----|------|-----|-----|-----|-----|-----|
| 1. | 2009 | 113 | .96 | .96 | XXX | XXX |
| 2. | 2010 | XXX | 109 | 103 | 103 | XXX |
| 3. | 2011 | XXX | XXX | 109 | 107 | 107 |
| 4. | 2012 | XXX | XXX | XXX | .60 | .58 |
| 5. | 2013 | XXX | XXX | XXX | XXX | 60 |

Section C - Credit Accident and Health

| | | | | | | |
|----|------|-----|-----|-----|-----|-----|
| 1. | 2009 | | | | XXX | XXX |
| 2. | 2010 | XXX | | | | XXX |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section D -

| | | | | | | |
|----|------|-----|-----|-----|-----|-----|
| 1. | 2009 | | | | XXX | XXX |
| 2. | 2010 | XXX | | | | XXX |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section E -

| | | | | | | |
|----|------|-----|-----|-----|-----|-----|
| 1. | 2009 | | | | XXX | XXX |
| 2. | 2010 | XXX | | | | XXX |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section F -

| | | | | | | |
|----|------|-----|-----|-----|-----|-----|
| 1. | 2009 | | | | XXX | XXX |
| 2. | 2010 | XXX | | | | XXX |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section G -

| | | | | | | |
|----|------|-----|-----|-----|-----|-----|
| 1. | 2009 | | | | XXX | XXX |
| 2. | 2010 | XXX | | | | XXX |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

| Years 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 End of Year | | | | |
|--|------------|---|-----------|-----------|-----------|-----------|
| | | 1 2009 | 2 2010 | 3 2011 | 4 2012 | 5 2013 |
| 1. | 2009 | NONE | | | | |
| 2. | 2010 | | XXX | | | |
| 3. | 2011 | | XXX | XXX | | |
| 4. | 2012 | | XXX | XXX | XXX | |
| 5. | 2013 | | XXX | XXX | XXX | XXX |

Section B - Other Accident and Health

| | | | | | | |
|----|------------|-----|-----|-----|-----|-----|
| 1. | 2009 | 113 | 96 | 96 | 96 | 96 |
| 2. | 2010 | XXX | 109 | 103 | 103 | 103 |
| 3. | 2011 | XXX | XXX | 109 | 107 | 107 |
| 4. | 2012 | XXX | XXX | XXX | .60 | .58 |
| 5. | 2013 | XXX | XXX | XXX | XXX | 60 |

Section C - Credit Accident and Health

| | | | | | | |
|----|------------|-----|-----|-----|-----|--|
| 1. | 2009 | | | | | |
| 2. | 2010 | XXX | | | | |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section D -

| | | | | | | |
|----|------------|-----|-----|-----|-----|--|
| 1. | 2009 | | | | | |
| 2. | 2010 | XXX | | | | |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section E -

| | | | | | | |
|----|------------|-----|-----|-----|-----|--|
| 1. | 2009 | | | | | |
| 2. | 2010 | XXX | | | | |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section F -

| | | | | | | |
|----|------------|-----|-----|-----|-----|--|
| 1. | 2009 | | | | | |
| 2. | 2010 | XXX | | | | |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

Section G -

| | | | | | | |
|----|------------|-----|-----|-----|-----|--|
| 1. | 2009 | | | | | |
| 2. | 2010 | XXX | | | | |
| 3. | 2011 | XXX | XXX | | | |
| 4. | 2012 | XXX | XXX | XXX | | |
| 5. | 2013 | XXX | XXX | XXX | XXX | |

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

| Line of Business | | 1 Methodology | 2 Amount |
|------------------|----------------------------------|------------------|-------------|
| 1. | Industrial Life | | |
| 2. | Ordinary Life | IBNR | 256 |
| 3. | Individual Annuity | | |
| 4. | Supplementary Contracts | | |
| 5. | Credit Life | | |
| 6. | Group Life | | |
| 7. | Group Annuities | | |
| 8. | Group Accident and Health | | |
| 9. | Credit Accident and Health | | |
| 10. | Other Accident and Health | Developed | 16 |
| 11. | Total | | 272 |

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

| | |
|---|------|
| Analysis of Increase in Reserves During The Year | 7 |
| Analysis of Operations By Lines of Business | 6 |
| Asset Valuation Reserve Default Component | 30 |
| Asset Valuation Reserve Equity | 32 |
| Asset Valuation Reserve Replications (Synthetic) Assets | 35 |
| Asset Valuation Reserve | 29 |
| Assets | 2 |
| Cash Flow | 5 |
| Exhibit 1 - Part 1 - Premiums and Annuity Considerations for Life and Accident and Health Contracts | 9 |
| Exhibit 1 - Part 2 - Dividends and Coupons Applied, Reinsurance Commissions and Expense | 10 |
| Exhibit 2 - General Expenses | 11 |
| Exhibit 3 - Taxes, Licenses and Fees (Excluding Federal Income Taxes) | 11 |
| Exhibit 4 - Dividends or Refunds | 11 |
| Exhibit 5 - Aggregate Reserve for Life Contracts | 12 |
| Exhibit 5 - Interrogatories | 13 |
| Exhibit 5A - Changes in Bases of Valuation During The Year | 13 |
| Exhibit 6 - Aggregate Reserves for Accident and Health Contracts | 14 |
| Exhibit 7 - Deposit-Type Contracts | 15 |
| Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 1 | 16 |
| Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 2 | 17 |
| Exhibit of Capital Gains (Losses) | 8 |
| Exhibit of Life Insurance | 25 |
| Exhibit of Net Investment Income | 8 |
| Exhibit of Nonadmitted Assets | 18 |
| Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values | 27 |
| Five-Year Historical Data | 22 |
| Form for Calculating the Interest Maintenance Reserve (IMR) | 28 |
| General Interrogatories | 20 |
| Jurat Page | 1 |
| Liabilities, Surplus and Other Funds | 3 |
| Life Insurance (State Page) | 24 |
| Notes To Financial Statements | 19 |
| Overflow Page For Write-ins | 55 |
| Schedule A - Part 1 | E01 |
| Schedule A - Part 2 | E02 |
| Schedule A - Part 3 | E03 |
| Schedule A - Verification Between Years | SI02 |
| Schedule B - Part 1 | E04 |
| Schedule B - Part 2 | E05 |
| Schedule B - Part 3 | E06 |
| Schedule B - Verification Between Years | SI02 |
| Schedule BA - Part 1 | E07 |
| Schedule BA - Part 2 | E08 |
| Schedule BA - Part 3 | E09 |
| Schedule BA - Verification Between Years | SI03 |
| Schedule D - Part 1 | E10 |
| Schedule D - Part 1A - Section 1 | SI05 |
| Schedule D - Part 1A - Section 2 | SI08 |
| Schedule D - Part 2 - Section 1 | E11 |
| Schedule D - Part 2 - Section 2 | E12 |
| Schedule D - Part 3 | E13 |
| Schedule D - Part 4 | E14 |
| Schedule D - Part 5 | E15 |
| Schedule D - Part 6 - Section 1 | E16 |
| Schedule D - Part 6 - Section 2 | E16 |
| Schedule D - Summary By Country | SI04 |
| Schedule D - Verification Between Years | SI03 |
| Schedule DA - Part 1 | E17 |
| Schedule DA - Verification Between Years | SI10 |

ANNUAL STATEMENT BLANK (Continued)

| | |
|--|------|
| Schedule DB - Part A - Section 1 | E18 |
| Schedule DB - Part A - Section 2 | E19 |
| Schedule DB - Part A - Verification Between Years | SI11 |
| Schedule DB - Part B - Section 1 | E20 |
| Schedule DB - Part B - Section 2 | E21 |
| Schedule DB - Part B - Verification Between Years | SI11 |
| Schedule DB - Part C - Section 1 | SI12 |
| Schedule DB - Part C - Section 2 | SI13 |
| Schedule DB - Part D - Section 1 | E22 |
| Schedule DB - Part D - Section 2 | E23 |
| Schedule DB - Verification | SI14 |
| Schedule DL - Part 1 | E24 |
| Schedule DL - Part 2 | E25 |
| Schedule E - Part 1 - Cash | E26 |
| Schedule E - Part 2 - Cash Equivalents | E27 |
| Schedule E - Part 3 - Special Deposits | E28 |
| Schedule E - Verification Between Years | SI15 |
| Schedule F | 36 |
| Schedule H - Accident and Health Exhibit - Part 1 | 37 |
| Schedule H - Part 2, Part 3 and Part 4 | 38 |
| Schedule H - Part 5 - Health Claims | 39 |
| Schedule S - Part 1 - Section 1 | 40 |
| Schedule S - Part 1 - Section 2 | 41 |
| Schedule S - Part 2 | 42 |
| Schedule S - Part 3 - Section 1 | 43 |
| Schedule S - Part 3 - Section 2 | 44 |
| Schedule S - Part 4 | 45 |
| Schedule S - Part 5 | 46 |
| Schedule S - Part 6 | 47 |
| Schedule S - Part 7 | 48 |
| Schedule T - Part 2 Interstate Compact | 50 |
| Schedule T - Premiums and Annuity Considerations | 49 |
| Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group | 51 |
| Schedule Y - Part 1A - Detail of Insurance Holding Company System | 52 |
| Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates | 53 |
| Summary Investment Schedule | SI01 |
| Summary of Operations | 4 |
| Supplemental Exhibits and Schedules Interrogatories | 54 |