



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2014
OF THE CONDITION AND AFFAIRS OF THE

Cincinnati Equitable Insurance Company

NAIC Group Code08380838NAIC Company Code16721Employer's ID Number31-0239840
(Current)(Prior)

Organized under the Laws ofOhio, State of Domicile or Port of EntryOhio
Country of DomicileUnited States of America

Incorporated/Organized01/24/1827Commenced Business04/17/1826

Statutory Home Office525 Vine Street, Suite 1925Cincinnati, OH, US 45202
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office525 Vine Street, Suite 1925
(Street and Number)
Cincinnati, OH, US 45202513-621-1826
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail Address525 Vine Street, Suite 1925Cincinnati, OH, US 45202
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records525 Vine Street, Suite 1925
(Street and Number)
Cincinnati, OH, US 45202513-621-1826
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.cineqlife.com

Statutory Statement ContactGregory A Baker513-621-1826
(Name)(Area Code) (Telephone Number)
gbaker@cineqlife.com513-621-4531
(E-mail Address)(FAX Number)

OFFICERS

Chairman of the BoardPeter A AlpaughPresident/CFO/TreasurerGregory A Baker
SecretaryLinda S Bales

OTHER

DIRECTORS OR TRUSTEES

Peter A AlpaughAndrea A KesselGregory A Baker
James W KetringDrew F Knowles

State ofOhioSS:
County ofHamilton

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. AlpaughLinda S. BalesGregory A. Baker
Chairman of the BoardSecretaryTreasurer

Subscribed and sworn to before me thisa. Is this an original filing? Yes [X] No []
13th day of February 2015b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

Richard H. Hansman, Jr.



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0838 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2014 NAIC Company Code 16721

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 2014 OF THE Cincinnati Equitable Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0838 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2014 NAIC Company Code 16721

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 2014 OF THE Cincinnati Equitable Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0838 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2014 NAIC Company Code 16721

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
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34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 2014 OF THE Cincinnati Equitable Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0838 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2014 NAIC Company Code 16721

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
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3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 2014 OF THE Cincinnati Equitable Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0838 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2014 NAIC Company Code 16721

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
3. Farmowners multiple peril												
4. Homeowners multiple peril						20,000	20,000		4,000	4,000		
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability							10,000			1,171		
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	0	0	0	0	0	20,000	30,000	0	4,000	5,171	0	0
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 2014 OF THE Cincinnati Equitable Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0838 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2014 NAIC Company Code 16721

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.1 Allied lines .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.2 Multiple peril crop .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.3 Federal flood .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.4. Private crop .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Farmowners multiple peril .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril .....	.0	.0	.0	.0	.0	20,000	20,000	.0	4,000	4,000	.0	.0
5.1 Commercial multiple peril (non-liability portion) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Mortgage guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Ocean marine .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. Inland marine .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Earthquake .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13. Group accident and health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.4 Non-renewable for stated reasons only (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.5 Other accident only .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.6 Medicare Title XVIII exempt from state taxes or fees .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.7 All other accident and health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.8 Federal employees health benefits plan premium (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Workers' compensation .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.2 Other Liability - claims made .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.3 Excess workers' compensation .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.1 Private passenger auto no-fault (personal injury protection) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability .....	.0	.0	.0	.0	.0	.0	10,000	.0	.0	1,171	.0	.0
19.3 Commercial auto no-fault (personal injury protection) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.1 Private passenger auto physical damage .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Aircraft (all perils) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. Fidelity .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Surety .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Burglary and theft .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Boiler and machinery .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Credit .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
30. Warranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
34. Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a)	0	0	0	0	0	20,000	30,000	0	4,000	5,171	0	0
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

Schedule F - Part 1

NONE

Schedule F - Part 2

NONE

Schedule F - Part 3

NONE

Schedule F - Part 4

NONE

Schedule F - Part 5

NONE

Schedule F - Part 5 - Bank Footnote

NONE

Schedule F - Part 6 - Section 1 - Provision for Reinsurance Ceded to Certified Reinsurers

NONE

Schedule F - Part 6 - Section 1 - Bank Footnote

NONE

Schedule F - Part 6 - Section 2 - Provision for Overdue Reinsurance Ceded to Certified Reinsurers

NONE

Schedule F - Part 7 - Provision for Overdue Authorized Reinsurance

NONE

Schedule F - Part 8 - Provision for Overdue Reinsurance

NONE

Schedule F - Part 9 - Restatement of Balance Sheet to Identify Net Credit for Reinsurance

NONE

Schedule H - Part 1

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

Schedule H - Part 3 - Prior Year's Claim Reserves and Liabilities

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	(2)	0	5	0	0	3	XXX
2. 2005.....	3,996	351	3,645	1,291	0	50	0	314	0	0	1,655	0
3. 2006.....	3,784	346	3,438	2,127	218	90	0	413	4	73	2,408	0
4. 2007.....	2,029	923	1,106	1,193	277	2	0	227	41	1	1,104	0
5. 2008.....	61	61	0	2	2	0	0	5	4	0	1	0
6. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	4,613	497	140	0	964	49	74	5,171	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	20	0	0	0	4	0	0	0	0	0	0	24	0
2. 2005.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2006.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	20	0	0	0	4	0	0	0	0	0	0	24	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	20	4
2. 2005.....	1,655	0	1,655	41.4	0.0	45.4	0	0	0.0	0	0
3. 2006.....	2,630	222	2,408	69.5	64.2	70.0	0	0	0.0	0	0
4. 2007.....	1,422	318	1,104	70.1	34.5	99.8	0	0	0.0	0	0
5. 2008.....	7	6	1	11.5	9.8	0.0	0	0	0.0	0	0
6. 2009.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2010.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2011.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	20	4

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SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2005.....	5,107	25	5,082	2,465	0	79	0	594	0	60	3,138	0
3. 2006.....	3,897	41	3,856	2,316	0	32	0	466	0	39	2,814	1
4. 2007.....	1,486	102	1,384	971	133	39	0	163	5	19	1,035	0
5. 2008.....	149	56	93	180	0	0	0	29	0	0	209	0
6. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	5,932	133	150	0	1,252	5	118	7,196	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	10	0	0	0	3	0	0	0	0	0	0	13	0
3. 2006.....	0	0	0	0	1	0	0	0	0	0	0	1	0
4. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	10	0	0	0	4	0	0	0	0	0	0	14	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2005.....	3,151	0	3,151	61.7	0.0	62.0	0	0	0.0	10	3
3. 2006.....	2,815	0	2,815	72.2	0.0	73.0	0	0	0.0	0	1
4. 2007.....	1,173	138	1,035	78.9	135.3	74.8	0	0	0.0	0	0
5. 2008.....	209	0	209	140.3	0.0	224.7	0	0	0.0	0	0
6. 2009.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2010.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2011.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	10	4

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical
N O N E

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)
N O N E

Schedule P - Part 1E - Commercial Multiple Peril
N O N E

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence
N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made
N O N E

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)
N O N E

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence
N O N E

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made
N O N E

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SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2013	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX
4. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX
2. 2013.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 1T - Warranty

NONE

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SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	11 One Year	12 Two Year
1. Prior.....	375	298	227	213	211	211	210	210	210	232	22	22
2. 2005.....	1,618	1,320	1,319	1,331	1,344	1,345	1,341	1,341	1,341	1,341	0	0
3. 2006.....	XXX	2,186	2,147	2,044	2,001	1,999	1,999	1,999	1,999	1,999	0	0
4. 2007.....	XXX	XXX	1,002	929	918	918	918	918	918	918	0	0
5. 2008.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											22	22

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	2,603	2,497	2,075	2,142	2,151	2,152	2,151	2,151	2,151	2,151	0	0
2. 2005.....	3,196	2,856	2,536	2,587	2,578	2,560	2,560	2,560	2,560	2,557	(3)	(3)
3. 2006.....	XXX	2,489	2,464	2,368	2,363	2,360	2,361	2,348	2,348	2,349	1	1
4. 2007.....	XXX	XXX	1,006	943	958	882	881	881	877	877	0	(4)
5. 2008.....	XXX	XXX	XXX	215	190	180	180	180	180	180	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											(2)	(6)

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	11 One Year	12 Two Year
1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2005.....	50	0	0	0	0	0	0	0	0	0	0	0
3. 2006.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2007.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2008.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals												

NONE

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals												

NONE

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....												
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property
N O N E

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability
N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines
N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence
N O N E

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made
N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty
N O N E

Schedule P - Part 2T - Warranty
N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014		
1. Prior.....	.000	.188	.212	.211	.211	.211	.210	.210	.210	.208	(1,007)	
2. 2005.....	.855	1,275	1,285	1,322	1,344	1,345	1,341	1,341	1,341	1,341	.0	.0
3. 2006.....	XXX	1,790	2,036	2,012	2,000	1,999	1,999	1,999	1,999	1,999	.0	.0
4. 2007.....	XXX	XXX	902	918	918	918	918	918	918	918	.0	.0
5. 2008.....	XXX	XXX	XXX	0	0	0	0	0	0	0	.0	.0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	.0	.0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	.0	.0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	.0	.0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	.0	.0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	.0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	.000	(4,813)	1,757	2,094	2,151	2,152	2,151	2,151	2,151	2,151	(4,639)	
2. 2005.....	1,405	2,153	2,344	2,497	2,549	2,549	2,549	2,549	2,549	2,544	.0	.0
3. 2006.....	XXX	1,120	1,866	2,176	2,339	2,339	2,339	2,348	2,348	2,348	.1	.0
4. 2007.....	XXX	XXX	477	628	660	882	881	881	877	877	.0	.0
5. 2008.....	XXX	XXX	XXX	150	180	180	180	180	180	180	.0	.0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	.0	.0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	.0	.0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	.0	.0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	.0	.0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	.0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	.000											
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	.000											
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.000											
2. 2005.....												
3. 2006.....	XXX											
4. 2007.....	XXX	XXX										
5. 2008.....	XXX	XXX	XXX									
6. 2009.....	XXX	XXX	XXX	XXX								
7. 2010.....	XXX	XXX	XXX	XXX	XXX							
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 3G - Special Liability

N O N E

Schedule P - Part 3H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made

N O N E

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SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	.0	XXX	XXX
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	XXX	XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	.0		
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
2. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	.000										XXX	XXX
2. 2005.....											XXX	XXX
3. 2006.....	XXX										XXX	XXX
4. 2007.....	XXX	XXX									XXX	XXX
5. 2008.....	XXX	XXX	XXX								XXX	XXX
6. 2009.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2010.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property
N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability
N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines
N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence
N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made
N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty
N O N E

Schedule P - Part 3T - Warranty
N O N E

Schedule P - Part 4A - Homeowners/Farmowners
N O N E

Schedule P - Part 4B - Private Passenger Auto Liability/Medical
N O N E

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical
N O N E

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)
N O N E

Schedule P - Part 4E - Commercial Multiple Peril
N O N E

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence
N O N E

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made
N O N E

Schedule P - Part 4G - Special Liability

NONE

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

NONE

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 4T - Warranty

N O N E

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SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	112	1,341	2	0	0	(2,350)	0	0	0	0
2. 2005.....	179	240	240	241	241	0	0	0	0	0
3. 2006.....	XXX	292	342	344	347	0	0	0	0	0
4. 2007.....	XXX	XXX	140	148	149	0	0	0	0	0
5. 2008.....	XXX	XXX	XXX	2	2	0	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	11	4	1	0	0	0	0	0	0	
2. 2005.....	49	2	2	0	0	0				
3. 2006.....	XXX	29	4	3	0	0				
4. 2007.....	XXX	XXX	5	0	0	0				
5. 2008.....	XXX	XXX	XXX	0	0	0				
6. 2009.....	XXX	XXX	XXX	XXX	0	0				
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0				
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	37	1,716	0	0	0	0	(2,102)	0	0	0
2. 2005.....	293	319	320	320	320	320	0	0	0	0
3. 2006.....	XXX	397	432	433	433	433	0	0	0	0
4. 2007.....	XXX	XXX	194	201	202	202	0	0	0	0
5. 2008.....	XXX	XXX	XXX	5	5	5	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	268	1,702	17	8	5	(6,371)	0	0	0	
2. 2005.....	354	589	612	615	616	0	0	0	0	0
3. 2006.....	XXX	298	373	387	391	0	0	1	1	1
4. 2007.....	XXX	XXX	135	158	160	0	0	0	0	0
5. 2008.....	XXX	XXX	XXX	18	20	0	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	86	31	14	8	1	0	0	0	0	
2. 2005.....	118	29	9	5	2	1	1	1	1	
3. 2006.....	XXX	88	20	7	3	1	1			
4. 2007.....	XXX	XXX	27	4	4	0				
5. 2008.....	XXX	XXX	XXX	3	0	0				
6. 2009.....	XXX	XXX	XXX	XXX	0	0				
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0				
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	41	2,046	14	1	0	0	(5,291)	0	0	0
2. 2005.....	556	741	754	754	754	754	1	1	1	0
3. 2006.....	XXX	460	482	485	485	485	1	1	1	1
4. 2007.....	XXX	XXX	188	190	192	192	0	0	0	0
5. 2008.....	XXX	XXX	XXX	22	23	23	0	0	0	0
6. 2009.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

NONE

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

NONE

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

NONE

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

NONE

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

NONE

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

NONE

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

NONE

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 6M - International - Section 1

NONE

Schedule P - Part 6M - International - Section 2

NONE

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1
N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2
N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1
N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2
N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A
N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A
N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B
N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B
N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	24		0.0	0		0.0
2. Private Passenger Auto Liability/ Medical	14		0.0	0		0.0
3. Commercial Auto/Truck Liability/ Medical			0.0	0		0.0
4. Workers' Compensation			0.0	0		0.0
5. Commercial Multiple Peril			0.0	0		0.0
6. Medical Professional Liability - Occurrence			0.0	0		0.0
7. Medical Professional Liability - Claims - Made			0.0	0		0.0
8. Special Liability			0.0	0		0.0
9. Other Liability - Occurrence			0.0	0		0.0
10. Other Liability - Claims-Made			0.0	0		0.0
11. Special Property	0		0.0	0		0.0
12. Auto Physical Damage	0		0.0	0		0.0
13. Fidelity/Surety			0.0	0		0.0
14. Other			0.0	0		0.0
15. International			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence			0.0	0		0.0
20. Products Liability - Claims-Made			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty			0.0	0		0.0
22. Warranty			0.0	0		0.0
23. Totals	38	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XX							
6. 2009.....	XXX	XXX	XX	XX						
7. 2010.....	XXX	XXX	XX	XX	XX					
8. 2011.....	XXX	XXX	XX	XXX	XX	XX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XX							
6. 2009.....	XXX	XXX	XX	XX						
7. 2010.....	XXX	XXX	XX	XX	XX					
8. 2011.....	XXX	XXX	XX	XXX	XX	XX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	24		0.0	.0		0.0
2. Private Passenger Auto Liability/Medical	14		0.0	.0		0.0
3. Commercial Auto/Truck Liability/Medical			0.0	.0		0.0
4. Workers' Compensation			0.0	.0		0.0
5. Commercial Multiple Peril			0.0	.0		0.0
6. Medical Professional Liability - Occurrence			0.0	.0		0.0
7. Medical Professional Liability - Claims - Made			0.0	.0		0.0
8. Special Liability			0.0	.0		0.0
9. Other Liability - Occurrence			0.0	.0		0.0
10. Other Liability - Claims-Made			0.0	.0		0.0
11. Special Property	0		0.0	.0		0.0
12. Auto Physical Damage	0		0.0	.0		0.0
13. Fidelity/Surety			0.0	.0		0.0
14. Other			0.0	.0		0.0
15. International			0.0	.0		0.0
16. Reinsurance - Nonproportional Assumed Property			0.0	.0		0.0
17. Reinsurance - Nonproportional Assumed Liability			0.0	.0		0.0
18. Reinsurance - Nonproportional Assumed Financial Lines			0.0	.0		0.0
19. Products Liability - Occurrence			0.0	.0		0.0
20. Products Liability - Claims-Made			0.0	.0		0.0
21. Financial Guaranty/Mortgage Guaranty			0.0	.0		0.0
22. Warranty			0.0	.0		0.0
23. Totals	38	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XX							
6. 2009.....	XXX	XXX	XX	XX						
7. 2010.....	XXX	XXX	XX	XX	XX					
8. 2011.....	XXX	XXX	XX	XXX	XXX	XX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XX							
6. 2009.....	XXX	XXX	XX	XX						
7. 2010.....	XXX	XXX	XX	XX	XX					
8. 2011.....	XXX	XXX	XX	XXX	XXX	XX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts
N O N E

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts
N O N E

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts
N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts
N O N E

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or “ERE”) benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
If the answer to question 1.1 is “no”, leave the following questions blank. If the answer to question 1.1 is “yes”, please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?\$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2005		
1.603 2006		
1.604 2007		
1.605 2008		
1.606 2009		
1.607 2010		
1.608 2011		
1.609 2012		
1.610 2013.....		
1.611 2014.....		
1.612 Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as “Defense and Cost Containment” and “Adjusting and Other”) reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:
(in thousands of dollars)

5.1 Fidelity
5.2 Surety
6. Claim count information is reported per claim or per claimant (Indicate which).per claim.....
If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2 (An extended statement may be attached.)
.....

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

Allocated by States and Territories

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

NONE

SCHEDULE Y

[illegible]

NONE

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SCHEDULE Y

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company











SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

		Responses
MARCH FILING		
1.	Will an actuarial opinion be filed by March 1?	WAIVED
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?.....	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	SEE EXPLANATION
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 supplemental 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 Financial Guaranty Insurance Exhibit be filed by March 1?.....	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	YES
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?.....	NO
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25.	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
26.	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
27.	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		
28.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
29.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
31.	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
32.	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		
33.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
Explanations:		
8.	Not combined with any other PC Comapny	
12.	N/A	
13.	N/A	
14.	N/A	
15.	N/A	
16.	N/A	
17.	N/A	
19.	N/A	
20.	N/A	
21.	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	
32.	N/A	
33.	N/A	

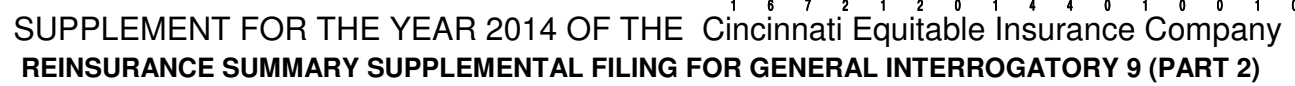
Bar Codes:	
1. Actuarial Opinion [Document Identifier 440]	
12. SIS Stockholder Information Supplement [Document Identifier 420]	
13. Financial Guaranty Insurance Exhibit [Document Identifier 240]	
14. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
15. Supplement A to Schedule T [Document Identifier 455]	
16. Trusteed Surplus Statement [Document Identifier 490]	
17. Premiums Attributed to Protected Cells [Document Identifier 385]	
19. Medicare Part D Coverage Supplement [Document Identifier 365]	
20. Actuarial Opinion Summary (AOS) [Document Identifier 441]	
21. Reinsurance Attestation Supplement [Document Identifier 399]	

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Cincinnati Equitable Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

22.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 6 7 2 1 2 0 1 4 4 0 0 0 0 0 0 0
23.	Bail Bond Supplement [Document Identifier 500]	 1 6 7 2 1 2 0 1 4 5 0 0 0 0 0 0 0
24.	Director and Officer Insurance Coverage Supplement [Document Identifier 505]	 1 6 7 2 1 2 0 1 4 5 0 5 0 0 0 0 0
25.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 6 7 2 1 2 0 1 4 2 2 4 0 0 0 0 0
26.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 6 7 2 1 2 0 1 4 2 2 5 0 0 0 0 0
27.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 6 7 2 1 2 0 1 4 2 2 6 0 0 0 0 0
28.	Credit Insurance Experience Exhibit [Document Identifier 230]	 1 6 7 2 1 2 0 1 4 2 3 0 0 0 0 0 0
29.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 6 7 2 1 2 0 1 4 3 0 6 0 0 0 0 0
30.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 6 7 2 1 2 0 1 4 2 1 0 0 0 0 0 0
31.	Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 1 6 7 2 1 2 0 1 4 2 1 6 0 0 0 0 0
32.	Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 1 6 7 2 1 2 0 1 4 2 1 7 0 0 0 0 0
33.	Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 1 6 7 2 1 2 0 1 4 2 2 3 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS



	1	2	3
	As Reported	Interrogatory 9 Reinsurance Effect	Restated Without Interrogatory 9 Reinsurance
A01. Assets	3,916,018	0	3,916,018
A02. Liabilities	85,954	0	85,954
A03. Surplus as regards to policyholders	3,830,064	0	3,830,064
A04. Income before taxes	71,688	0	71,688

[illegible]

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