



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019  
OF THE CONDITION AND AFFAIRS OF THE

### Cincinnati Equitable Life Insurance Company

NAIC Group Code 0838 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 OH

Country of Domicile United States of America

Licensed as business type: Life, Accident and Health [ X ] Fraternal Benefit Societies [ ]

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 www.cineqlife.com

Statutory Statement Contact Gregory A. Baker, 513-621-1826  
(Name) gbaker@cineqlife.com, 513-621-4531  
(E-mail Address) (FAX Number)

#### OFFICERS

Chief Financial Officer Gregory Allen Baker Treasurer David Duane Baker #  
Secretary Andrew James Kok #

#### OTHER

Tonya Gail Crawford, V.P. Sales & Marketing

#### DIRECTORS OR TRUSTEES

<u>David Howard Bahrman #</u>	<u>Carl Joseph Bednarski #</u>	<u>Douglas Elgin Darling #</u>
<u>Michael Allen DeRuiter #</u>	<u>Travis Edward Fahley #</u>	<u>Michael Charles Fusilier #</u>
<u>Andrew Kent Hagenow #</u>	<u>Jeffery Blair Sandborn #</u>	<u>Benjamin Jeffery LaCross #</u>
<u>Brigette Louise Leach #</u>	<u>Jennifer Lynn Lewis #</u>	<u>Patrick William McGuire #</u>
<u>Michael Richard Mulders #</u>	<u>Stephanie Lee Schafer #</u>	<u>Leona Mary Daniels #</u>

State of Ohio SS: Hamilton  
County of

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.

Gregory Allen Baker  
Chief Financial Officer

Andrew James Kok  
Secretary

David Duane Baker  
Treasurer

Subscribed and sworn to before me this  
17th day of February

a. Is this an original filing? ..... Yes [ X ] No [ ]  
b. If no,  
1. State the amendment number.....  
2. Date filed ..... 02/26/2020  
3. Number of pages attached.....

Richard H. Hansman Jr.

11/8/2024

## ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	153,096,395		153,096,395	138,423,262
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	1,185,391		1,185,391	1,422,359
2.2 Common stocks .....	3,246,975		3,246,975	3,753,568
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	1,000,000		1,000,000	0
3.2 Other than first liens.....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ encumbrances) .....			0	0
4.3 Properties held for sale (less \$ encumbrances) .....			0	0
5. Cash (\$ 583,083 , Schedule E - Part 1), cash equivalents (\$ 5,788,186 , Schedule E - Part 2) and short-term investments (\$ , Schedule DA) .....	6,371,269		6,371,269	8,237,983
6. Contract loans (including \$ premium notes) .....	204,899		204,899	172,910
7. Derivatives (Schedule DB) .....			0	0
8. Other invested assets (Schedule BA) .....	242,271		242,271	244,155
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	165,347,200	0	165,347,200	152,254,238
13. Title plants less \$ charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	1,379,627		1,379,627	1,253,591
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	127		127	90
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums) .....	1,153,305		1,153,305	1,096,875
15.3 Accrued retrospective premiums (\$ ) and contracts subject to redetermination (\$ ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	58,485		58,485	0
18.2 Net deferred tax asset .....	2,366,332	1,127,177	1,239,155	1,630,000
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....	907		907	907
21. Furniture and equipment, including health care delivery assets (\$ ) .....	690	690	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	386		386	6,071
24. Health care (\$ ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	2,400,127	40,270	2,359,857	2,088,847
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	172,707,186	1,168,137	171,539,049	158,330,619
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	172,707,186	1,168,137	171,539,049	158,330,619
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0	0
2501. Assignments Receivable .....	2,191,931		2,191,931	1,943,233
2502. Premium Receivable .....	166,624		166,624	145,614
2503. Prepaid Expenses .....	40,270	40,270	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	1,302	0	1,302	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	2,400,127	40,270	2,359,857	2,088,847

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ ..... 159,237,295 (Exh. 5, Line 9999999) less \$ ..... included in Line 6.3 (including \$ ..... Modco Reserve) .....	.159,237,295	144,471,844
2. Aggregate reserve for accident and health contracts (including \$ ..... Modco Reserve) .....	2,204	2,645
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ ..... Modco Reserve) .....	191,554	207,151
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11) .....	444,702	.376,272
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11) .....	5,063	6,441
5. Policyholders' dividends/refunds to members \$ ..... and coupons \$ ..... due and unpaid (Exhibit 4, Line 10) .....	.0	0
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ ..... Modco) .....	510	587
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ ..... Modco) .....	2,136	2,468
7. Amount provisionally held for deferred dividend policies not included in Line 6 .....		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ ..... discount; including \$ .....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14) .....	459,905	.486,107
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts .....		
9.2 Provision for experience rating refunds, including the liability of \$ ..... accident and health experience rating refunds of which \$ .....0 is for medical loss ratio rebate per the Public Health Service Act .....		
9.3 Other amounts payable on reinsurance, including \$ ..... assumed and \$ ..... ceded .....	.0	0
9.4 Interest maintenance reserve (IMR, Line 6) .....	730,396	.786,462
10. Commissions to agents due or accrued-life and annuity contracts \$ ..... accident and health \$ ..... and deposit-type contract funds \$ .....	156,203	.159,766
11. Commissions and expense allowances payable on reinsurance assumed .....		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7) .....	348,083	.380,323
13. Transfers to Separate Accounts due or accrued (net) (including \$ ..... accrued for expense allowances recognized in reserves, net of reinsured allowances) .....		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6) .....	133,246	.104,386
15.1 Current federal and foreign income taxes, including \$ ..... on realized capital gains (losses) .....		57,638
15.2 Net deferred tax liability .....		
16. Unearned investment income .....	4,548	.3,725
17. Amounts withheld or retained by reporting entity as agent or trustee .....		
18. Amounts held for agents' account, including \$ ..... agents' credit balances .....		
19. Remittances and items not allocated .....		
20. Net adjustment in assets and liabilities due to foreign exchange rates .....		
21. Liability for benefits for employees and agents if not included above .....		
22. Borrowed money \$ ..... and interest thereon \$ .....		
23. Dividends to stockholders declared and unpaid .....		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7) .....	1,562,549	.1,464,893
24.02 Reinsurance in unauthorized and certified (\$ .....0 ) companies .....	.0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$ ..... ) reinsurers .....		
24.04 Payable to parent, subsidiaries and affiliates .....		
24.05 Drafts outstanding .....		
24.06 Liability for amounts held under uninsured plans .....		
24.07 Funds held under coinsurance .....		
24.08 Derivatives .....	.0	0
24.09 Payable for securities .....		
24.10 Payable for securities lending .....		
24.11 Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....	0	0
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25) .....	163,278,394	148,993,707
27. From Separate Accounts Statement .....		
28. Total liabilities (Lines 26 and 27) .....	163,278,394	148,993,707
29. Common capital stock .....	1,000,000	1,000,000
30. Preferred capital stock .....		
31. Aggregate write-ins for other than special surplus funds .....	.0	0
32. Surplus notes .....	.0	
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1) .....	9,780,231	9,780,231
34. Aggregate write-ins for special surplus funds .....	.0	0
35. Unassigned funds (surplus) .....	(2,519,576)	(1,443,319)
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 29 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 30 \$ ..... ) .....		
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ ..... in Separate Accounts Statement) .....	7,260,655	8,336,912
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55) .....	8,260,655	9,336,912
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3) .....	171,539,049	158,330,619
<b>DETAILS OF WRITE-INS</b>		
2501. ....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	.0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	0	0
3101. ....		
3102. ....		
3103. ....		
3198. Summary of remaining write-ins for Line 31 from overflow page .....	.0	0
3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above) .....	0	0
3401. ....		
3402. ....		
3403. ....		
3498. Summary of remaining write-ins for Line 34 from overflow page .....	.0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....	0	0

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company**  
**SUMMARY OF OPERATIONS**

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11) .....	37,146,979	37,956,916
2. Considerations for supplementary contracts with life contingencies .....	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17) .....	5,410,195	4,696,006
4. Amortization of Interest Maintenance Reserve (IMR, Line 5) .....	124,525	160,047
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1) .....	0	0
7. Reserve adjustments on reinsurance ceded .....	0	0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0	0
8.2 Charges and fees for deposit-type contracts .....	0	0
8.3 Aggregate write-ins for miscellaneous income .....	474,363	462,564
9. Total (Lines 1 to 8.3) .....	43,156,062	43,275,533
10. Death benefits .....	21,359,382	19,441,774
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8) .....	170,555	186,981
13. Disability benefits and benefits under accident and health contracts .....	8,460	12,279
14. Coupons, guaranteed annual pure endowments and similar benefits .....	2,138	2,393
15. Surrender benefits and withdrawals for life contracts .....	78,603	69,368
16. Group conversions .....	0	0
17. Interest and adjustments on contract or deposit-type contract funds .....	417	228
18. Payments on supplementary contracts with life contingencies .....	0	0
19. Increase in aggregate reserves for life and accident and health contracts .....	14,765,010	17,297,120
20. Totals (Lines 10 to 19) .....	36,384,565	37,010,143
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) .....	4,375,358	4,198,457
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1) .....	0	0
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6) .....	2,478,142	2,333,063
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) .....	673,639	658,308
25. Increase in loading on deferred and uncollected premiums .....	63,633	(12,371)
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0	0
27. Aggregate write-ins for deductions .....	6,837	6,897
28. Totals (Lines 20 to 27) .....	43,982,174	44,194,497
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	(826,112)	(918,964)
30. Dividends to policyholders and refunds to members .....	510	568
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	(826,622)	(919,532)
32. Federal and foreign income taxes incurred (excluding tax on capital gains) .....	(100,964)	189,625
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	(725,658)	(1,109,157)
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ (6,296) (excluding taxes of \$ 18,198 transferred to the IMR) .....	(23,684)	760,604
35. Net income (Line 33 plus Line 34) .....	(749,342)	(348,553)
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) .....	9,336,912	9,809,080
37. Net income (Line 35) .....	(749,342)	(348,553)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ 30,000 .....	112,912	(829,796)
39. Change in net unrealized foreign exchange capital gain (loss) .....		
40. Change in net deferred income tax .....	216,332	1,051,000
41. Change in nonadmitted assets .....	(558,502)	(505,168)
42. Change in liability for reinsurance in unauthorized and certified companies .....		
43. Change in reserve on account of change in valuation basis, (increase) or decrease .....	0	0
44. Change in asset valuation reserve .....	(97,657)	240,349
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1) .....	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period .....		
47. Other changes in surplus in Separate Accounts Statement .....		
48. Change in surplus notes .....		
49. Cumulative effect of changes in accounting principles .....		
50. Capital changes:		
50.1 Paid in .....		
50.2 Transferred from surplus (Stock Dividend) .....		
50.3 Transferred to surplus .....		
51. Surplus adjustment:		
51.1 Paid in .....	0	0
51.2 Transferred to capital (Stock Dividend) .....		
51.3 Transferred from capital .....		
51.4 Change in surplus as a result of reinsurance .....		
52. Dividends to stockholders .....	0	(80,000)
53. Aggregate write-ins for gains and losses in surplus .....	0	(472,168)
54. Net change in capital and surplus for the year (Lines 37 through 53) .....	(1,076,256)	(472,168)
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) .....	8,260,655	9,336,912
<b>DETAILS OF WRITE-INS</b>		
08.301. Advanced Funding Fees .....	474,363	462,564
08.302. .....		
08.303. .....		
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above) .....	474,363	462,564
2701. Change in Dividend & Coupon Reserves .....	6,837	6,897
2702. .....		
2703. .....		
2798. Summary of remaining write-ins for Line 27 from overflow page .....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above) .....	6,837	6,897
5301. AMT Loss Carry Forward Sperated from DTA .....		(80,000)
5302. .....		
5303. .....		
5398. Summary of remaining write-ins for Line 53 from overflow page .....	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above) .....	0	(80,000)

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	37,000,677	37,928,685
2. Net investment income .....	5,509,820	4,825,684
3. Miscellaneous income .....	474,363	462,564
4. Total (Lines 1 through 3) .....	42,984,860	43,216,933
5. Benefit and loss related payments .....	21,552,835	19,995,783
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	7,491,439	7,194,034
8. Dividends paid to policyholders .....	587	619
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	27,062	140,011
10. Total (Lines 5 through 9) .....	29,071,923	27,330,447
11. Net cash from operations (Line 4 minus Line 10) .....	13,912,937	15,886,486
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	11,083,248	13,259,065
12.2 Stocks .....	1,577,583	7,894,856
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0
12.7 Miscellaneous proceeds .....	0	483,000
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	12,660,831	21,636,921
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	25,945,267	32,538,179
13.2 Stocks .....	717,979	871,190
13.3 Mortgage loans .....	1,000,000	0
13.4 Real estate .....	0	0
13.5 Other invested assets .....	0	0
13.6 Miscellaneous applications .....	483,000	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	28,146,246	33,409,369
14. Net increase (decrease) in contract loans and premium notes .....	31,989	18,221
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(15,517,405)	(11,790,669)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	(15,597)	1,815
16.5 Dividends to stockholders .....	0	0
16.6 Other cash provided (applied) .....	(246,650)	2,590,533
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(262,247)	2,592,348
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(1,866,714)	6,688,165
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	8,237,983	1,549,818
19.2 End of year (Line 18 plus Line 19.1) .....	6,371,269	8,237,983

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

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**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company**

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY**

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident and Health	7 Fraternal	8 Other Lines of Business	9 YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts	37,146,979	36,965,833	0	156,701		24,445			0
2. Considerations for supplementary contracts with life contingencies	0	XXX	XXX			XXX	XXX		XXX
3. Net investment income	5,410,195	5,376,843	0	.33,352		0			0
4. Amortization of Interest Maintenance Reserve (IMR)	124,525	.124,525	0	.0		0			0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0	0		0	XXX		0
6. Commissions and expense allowances on reinsurance ceded	0	0	0	0		0	XXX	0	0
7. Reserve adjustments on reinsurance ceded	0	0	0	0		0	XXX		0
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0	0		0	XXX		0
8.2 Charges and fees for deposit-type contracts	0	0	0	0		XXX	XXX		0
8.3 Aggregate write-ins for miscellaneous income	474,363	474,363	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	43,156,062	42,941,564	0	190,053	0	24,445	0	0	0
10. Death benefits	21,359,382	21,359,382	0	.0		XXX	XXX		0
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0	0	0		XXX	XXX		0
12. Annuity benefits	170,555	XXX	XXX	170,555		XXX	XXX		XXX
13. Disability benefits and benefits under accident and health contracts	8,460	0	0	0		8,460	XXX		0
14. Coupons, guaranteed annual pure endowments and similar benefits	2,138	.2,138	0	0		0	XXX		0
15. Surrender benefits and withdrawals for life contracts	.78,603	.78,603	0	0		XXX	XXX		0
16. Group conversions	0	0	0	0		0	XXX		0
17. Interest and adjustments on contract or deposit-type contract funds	.417	.417	0	0		0	XXX		0
18. Payments on supplementary contracts with life contingencies	0	0	0	0		XXX	XXX		0
19. Increase in aggregate reserves for life and accident and health contracts	14,765,010	14,779,167	0	(13,716)		(441)	XXX		0
20. Totals (Lines 10 to 19)	36,384,565	36,219,707	0	156,839	0	.8,019	XXX	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	.4,375,358	.4,370,875		.816		3,667	0	0	XXX
22. Commissions and expense allowances on reinsurance assumed	0	0	0	0		0	XXX	0	0
23. General insurance expenses and fraternal expenses	2,478,142	2,465,164	0	10,970		2,008			0
24. Insurance taxes, licenses and fees, excluding federal income taxes	.673,639	.673,442	0	.0		197			0
25. Increase in loading on deferred and uncollected premiums	.63,633	.63,633	0	0		0	XXX		0
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0	0	0		0	XXX		0
27. Aggregate write-ins for deductions	6,837	6,837	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	43,982,174	43,799,658	0	168,625	0	13,891	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(826,112)	(858,094)	0	21,428	0	10,554	0	0	0
30. Dividends to policyholders and refunds to members	510	510	0	0		0	XXX		0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(826,622)	(858,604)	0	21,428	0	10,554	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	(100,964)	(107,041)	0	4,071		2,006			0
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	(725,658)	(751,563)	0	17,357	0	8,548	0	0	0
34. Policies/certificates in force end of year	0	0	0	0		0	XXX		0
<b>DETAILS OF WRITE-INS</b>									
08.301. Advance Funeral Funding	474,363	474,363							
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	474,363	474,363	0	0	0	0	0	0	0
2701. Chg in Div & Coupon Reserves	6,837	6,837							
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	6,837	6,837	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)**

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts <sup>(a)</sup> .....	36,965,833		36,962,145	3,688								
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	5,376,843		5,375,286	1,557								
4. Amortization of Interest Maintenance Reserve (IMR) .....	124,525		124,525									
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0											
6. Commissions and expense allowances on reinsurance ceded .....	0	0										
7. Reserve adjustments on reinsurance ceded .....	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0											
8.2 Charges and fees for deposit-type contracts .....	0											
8.3 Aggregate write-ins for miscellaneous income .....	474,363	0	474,363	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	42,941,564	0	42,936,319	5,245	0	0	0	0	0	0	0	0
10. Death benefits .....	21,359,382		21,359,382									
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0											
12. Annuity benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts .....	0											
14. Coupons, guaranteed annual pure endowments and similar benefits .....	2,138		2,138									
15. Surrender benefits and withdrawals for life contracts .....	78,603		78,603									
16. Group conversions .....	0											
17. Interest and adjustments on contract or deposit-type contract funds .....	.417		.417									
18. Payments on supplementary contracts with life contingencies .....	0											
19. Increase in aggregate reserves for life and accident and health contracts .....	14,779,167		14,778,110	1,057								
20. Totals (Lines 10 to 19) .....	36,219,707	0	36,218,650	1,057	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	4,370,875	0	4,370,875									XXX
22. Commissions and expense allowances on reinsurance assumed .....	0	0										
23. General insurance expenses .....	2,465,164		2,465,164									
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	673,442		673,442									
25. Increase in loading on deferred and uncollected premiums .....	63,633		63,633									
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0											
27. Aggregate write-ins for deductions .....	6,837	0	6,837	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	43,799,658	0	43,798,601	1,057	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	(858,094)	0	(862,282)	4,188	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members .....	510		510									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	(858,604)	0	(862,792)	4,188	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains) .....	(107,041)		(107,049)	8								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	(751,563)	0	(755,743)	4,180	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year .....	0											
<b>DETAILS OF WRITE-INS</b>												
08.301. Advanced Funding Fees .....	474,363		474,363									
08.302. .....												
08.303. .....												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....	474,363	0	474,363	0	0	0	0	0	0	0	0	0
2701. Change in Div & Coupon Reserves .....	6,837		6,837									
2702. .....												
2703. .....												
2798. Summary of remaining write-ins for Line 27 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....	6,837	0	6,837	0	0	0	0	0	0	0	0	0

(a) Include premium amounts for preneed plans included in Line 1 .....

(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected. ....

(c) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company**  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE INSURANCE (c)**

	1 Total	2 Whole Life	3 Term Life	4 Universal Life	5 Variable Life	6 Variable Universal Life	7 Credit Life (d)	8 Other Group Life (a)	9 YRT Mortality Risk Only
1. Premiums for life contracts <sup>(b)</sup>									
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income									
4. Amortization of Interest Maintenance Reserve (IMR)									
5. Separate Accounts net gain from operations excluding unrealized gains or losses									
6. Commissions and expense allowances on reinsurance ceded									
7. Reserve adjustments on reinsurance ceded									
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts									
8.2 Charges and fees for deposit-type contracts									
8.3 Aggregate write-ins for miscellaneous income									
9. Totals (Lines 1 to 8.3)									
10. Death benefits									
11. Matured endowments (excluding guaranteed annual pure endowments)									
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts									
14. Coupons, guaranteed annual pure endowments and similar benefits									
15. Surrender benefits and withdrawals for life contracts									
16. Group conversions									
17. Interest and adjustments on contract or deposit-type contract funds									
18. Payments on supplementary contracts with life contingencies									
19. Increase in aggregate reserves for life and accident and health contracts									
20. Totals (Lines 10 to 19)									
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)									XXX
22. Commissions and expense allowances on reinsurance assumed									
23. General insurance expenses									
24. Insurance taxes, licenses and fees, excluding federal income taxes									
25. Increase in loading on deferred and uncollected premiums									
26. Net transfers to or (from) Separate Accounts net of reinsurance									
27. Aggregate write-ins for deductions									
28. Totals (Lines 20 to 27)									
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)									
30. Dividends to policyholders and refunds to members									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)									
32. Federal income taxes incurred (excluding tax on capital gains)									
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)									
34. Policies/certificates in force end of year									
<b>DETAILS OF WRITE-INS</b>									
08.301.									
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page									
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)									
2701.									
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page									
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)									

(a) Includes the following amounts for FEGLI/SGLI: Line 1 ..... Line 10 ..... Line 16 ..... Line 23 ..... Line 24 .....

(b) Include premium amounts for preneed plans included in Line 1 .....

(c) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected .....

(d) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES <sup>(a)</sup>**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for individual annuity contracts .....	156,701	156,551					150
2. Considerations for supplementary contracts with life contingencies .....	0	XXX	XXX	XXX	XXX		XXX
3. Net investment income .....	33,352	31,610					1,742
4. Amortization of Interest Maintenance Reserve (IMR) .....	0						
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0						
6. Commissions and expense allowances on reinsurance ceded .....	0						
7. Reserve adjustments on reinsurance ceded .....	0						
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0						
8.2 Charges and fees for deposit-type contracts .....	0						
8.3 Aggregate write-ins for miscellaneous income .....	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	190,053	188,161	0	0	0	0	1,892
10. Death benefits .....	0						
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0						
12. Annuity benefits .....	170,555	170,555					
13. Disability benefits and benefits under accident and health contracts .....	0						
14. Coupons, guaranteed annual pure endowments and similar benefits .....	0						
15. Surrender benefits and withdrawals for life contracts .....	0						
16. Group conversions .....	0						
17. Interest and adjustments on contract or deposit-type contract funds .....	0						
18. Payments on supplementary contracts with life contingencies .....	0						
19. Increase in aggregate reserves for life and accident and health contracts .....	(13,716)	(15,458)					1,742
20. Totals (Lines 10 to 19) .....	156,839	155,097	0	0	0	0	1,742
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	816	816					
22. Commissions and expense allowances on reinsurance assumed .....	0						
23. General insurance expenses .....	10,970	10,970					
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	0						
25. Increase in loading on deferred and uncollected premiums .....	0						
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0						
27. Aggregate write-ins for deductions .....	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	168,625	166,883	0	0	0	0	1,742
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	21,428	21,278	0	0	0	0	150
30. Dividends to policyholders and refunds to members .....	0						
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	21,428	21,278	0	0	0	0	150
32. Federal income taxes incurred (excluding tax on capital gains) .....	4,071	4,042					29
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	17,357	17,236	0	0	0	0	121
34. Policies/certificates in force end of year .....	0						
<b>DETAILS OF WRITE-INS</b>							
08.301. ....							
08.302. ....							
08.303. ....							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....	0	0	0	0	0	0	0
2701. ....							
2702. ....							
2703. ....							
2798. Summary of remaining write-ins for Line 27 from overflow page .....	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP ANNUITIES <sup>(a)</sup>**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for group annuity contracts .....							
2. Considerations for supplementary contracts with life contingencies .....		XXX	XXX	XXX	XXX		XXX
3. Net investment income .....							
4. Amortization of Interest Maintenance Reserve (IMR) .....							
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....							
6. Commissions and expense allowances on reinsurance ceded .....							
7. Reserve adjustments on reinsurance ceded .....							
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....							
8.2 Charges and fees for deposit-type contracts .....							
8.3 Aggregate write-ins for miscellaneous income .....							
9. Totals (Lines 1 to 8.3) .....							
10. Death benefits .....							
11. Matured endowments (excluding guaranteed annual pure endowments) .....							
12. Annuity benefits .....							
13. Disability benefits and benefits under accident and health contracts .....							
14. Coupons, guaranteed annual pure endowments and similar benefits .....							
15. Surrender benefits and withdrawals for life contracts .....							
16. Group conversions .....							
17. Interest and adjustments on contract or deposit-type contract funds .....							
18. Payments on supplementary contracts with life contingencies .....							
19. Increase in aggregate reserves for life and accident and health contracts .....							
20. Totals (Lines 10 to 19) .....							
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....							
22. Commissions and expense allowances on reinsurance assumed .....							
23. General insurance expenses .....							
24. Insurance taxes, licenses and fees, excluding federal income taxes .....							
25. Increase in loading on deferred and uncollected premiums .....							
26. Net transfers to or (from) Separate Accounts net of reinsurance .....							
27. Aggregate write-ins for deductions .....							
28. Totals (Lines 20 to 27) .....							
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....							
30. Dividends to policyholders and refunds to members .....							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....							
32. Federal income taxes incurred (excluding tax on capital gains) .....							
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....							
34. Policies/certificates in force end of year .....							
<b>DETAILS OF WRITE-INS</b>							
08.301. ....							
08.302. ....							
08.303. ....							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....							
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....							
2701. ....							
2702. ....							
2703. ....							
2798. Summary of remaining write-ins for Line 27 from overflow page .....							
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company**  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
1. Premiums for accident and health contracts	24,445												24,445
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	0												
4. Amortization of Interest Maintenance Reserve (IMR)	0												
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0												
6. Commissions and expense allowances on reinsurance ceded	0									0			
7. Reserve adjustments on reinsurance ceded	0									0			
8. Miscellaneous Income:													
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0												
8.2 Charges and fees for deposit-type contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	24,445	0	0	0	0	0	0	0	0	0	0	0	24,445
10. Death benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Matured endowments (excluding guaranteed annual pure endowments)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	8,460												8,460
14. Coupons, guaranteed annual pure endowments and similar benefits	0												
15. Surrender benefits and withdrawals for life contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions	0												
17. Interest and adjustments on contract or deposit-type contract funds	0												
18. Payments on supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts	(441)												(441)
20. Totals (Lines 10 to 19)	.8,019	0	0	0	0	0	0	0	0	0	0	0	.8,019
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	3,667										0		3,667
22. Commissions and expense allowances on reinsurance assumed	0										0		
23. General insurance expenses	2,008												2,008
24. Insurance taxes, licenses and fees, excluding federal income taxes	197												197
25. Increase in loading on deferred and uncollected premiums	0												
26. Net transfers to or (from) Separate Accounts net of reinsurance	0												
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	13,891	0	0	0	0	0	0	0	0	0	0	0	13,891
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28)	.10,554	0	0	0	0	0	0	0	0	0	0	0	.10,554
30. Dividends to policyholders and refunds to members	0												
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	.10,554	0	0	0	0	0	0	0	0	0	0	0	.10,554
32. Federal income taxes incurred (excluding tax on capital gains)	2,006												2,006
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	8,548	0	0	0	0	0	0	0	0	0	0	0	8,548
34. Policies/certificates in force end of year	0												
<b>DETAILS OF WRITE-INS</b>													
08.301.													
08.302.													
08.303.													
08.398.	Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
08.399.	Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0	0	0	0	0	0
2701.													
2702.													
2703.													
2798.	Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
2799.	Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected. No

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE <sup>(a)</sup>**

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life <sup>(b)</sup> (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year	143,194,856	0	143,194,856									
2. Tabular net premiums or considerations	23,285,331		23,285,331									
3. Present value of disability claims incurred	0											
4. Tabular interest	5,160,600		5,160,600									
5. Tabular less actual reserve released	0											
6. Increase in reserve on account of change in valuation basis	0											
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve	0	XXX								XXX		
7. Other increases (net)	0											
8. Totals (Lines 1 to 7)	171,640,787	0	171,640,787	0	0	0	0	0	0	0	0	0
9. Tabular cost	.872,967		.872,967									
10. Reserves released by death	12,743,165		12,743,165									
11. Reserves released by other terminations (net)	80,741		80,741									
12. Annuity, supplementary contract and disability payments involving life contingencies	0											
13. Net transfers to or (from) Separate Accounts	0											
14. Total Deductions (Lines 9 to 13)	13,696,873	0	13,696,873	0	0	0	0	0	0	0	0	0
15. Reserve December 31 of current year	157,943,914	0	157,943,914	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>												
16. CSV Ending balance December 31, current year	143,144,264		143,144,264									
17. Amount Available for Policy Loans Based upon Line 16 CSV	142,939,365		142,939,365									

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on \_\_\_\_\_ page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE <sup>(a)</sup>**  
**(N/A Fraternal)**

	1 Total	2 Whole Life	3 Term Life	4 Variable Life	5 Universal Life	6 Variable Universal Life	7 Credit Life <sup>(b)</sup>	8 Other Group Life	9 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)									
1. Reserve December 31 of prior year .....									
2. Tabular net premiums or considerations .....									
3. Present value of disability claims incurred .....									
4. Tabular interest .....									
5. Tabular less actual reserve released .....									
6. Increase in reserve on account of change in valuation basis .....									
7. Other increases (net) .....									
8. Totals (Lines 1 to 7) .....									
9. Tabular cost .....									
10. Reserves released by death .....									
11. Reserves released by other terminations (net) .....									
12. Annuity, supplementary contract and disability payments involving life contingencies .....									
13. Net transfers to or (from) Separate Accounts .....									
14. Total Deductions (Lines 9 to 13) .....									
15. Reserve December 31 of current year .....									
<b>Cash Surrender Value and Policy Loans</b>									
16. CSV Ending balance December 31, current year .....									
17. Amount Available for Policy Loans Based upon Line 16 CSV .....									

**NONE**

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected. ....  
 (b) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees		
<b>Involving Life or Disability Contingencies (Reserves)</b>							
(Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year	1,276,988	1,276,988					
2. Tabular net premiums or considerations	156,701	156,701					
3. Present value of disability claims incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest	30,248	30,248					
5. Tabular less actual reserve released	0	0					
6. Increase in reserve on account of change in valuation basis	0						
7. Other increases (net)	0						
8. Totals (Lines 1 to 7)	1,463,937	1,463,937	0	0	0	0	0
9. Tabular cost	0						
10. Reserves released by death	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)	170,555	170,555					
12. Annuity, supplementary contract and disability payments involving life contingencies	0						
13. Net transfers to or (from) Separate Accounts	0						
14. Total Deductions (Lines 9 to 13)	170,555	170,555	0	0	0	0	0
15. Reserve December 31 of current year	1,293,382	1,293,382	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV Ending balance December 31, current year	0	0					
17. Amount Available for Policy Loans Based upon Line 16 CSV	0	0					

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES <sup>(a)</sup>**  
**(N/A Fraternal)**

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year .....							
2. Tabular net premiums or considerations .....		XXX	XXX	XXX	XXX	XXX	XXX
3. Present value of disability claims incurred .....							
4. Tabular interest .....							
5. Tabular less actual reserve released .....							
6. Increase in reserve on account of change in valuation basis .....							
7. Other increases (net) .....							
8. Totals (Lines 1 to 7) .....							
9. Tabular cost .....							
10. Reserves released by death .....		XXX		XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net) .....							
12. Annuity, supplementary contract and disability payments involving life contingencies .....							
13. Net transfers to or (from) Separate Accounts .....							
14. Total Deductions (Lines 9 to 13) .....							
15. Reserve December 31 of current year .....							
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV Ending balance December 31, current year .....							
17. Amount Available for Policy Loans Based upon Line 16 CSV .....							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....	(a) 26,990	26,811
1.1 Bonds exempt from U.S. tax .....	(a)	
1.2 Other bonds (unaffiliated) .....	(a) 5,268,054	5,395,083
1.3 Bonds of affiliates .....	(a)	
2.1 Preferred stocks (unaffiliated) .....	(b) 52,955	52,955
2.11 Preferred stocks of affiliates .....	(b)	
2.2 Common stocks (unaffiliated) .....	2,838	0
2.21 Common stocks of affiliates .....		
3. Mortgage loans .....	(c) 595	595
4. Real estate .....	(d)	
5. Contract loans .....	.12,778	11,955
6. Cash, cash equivalents and short-term investments .....	(e) 136,715	138,661
7. Derivative instruments .....	(f)	
8. Other invested assets .....	.11,390	11,390
9. Aggregate write-ins for investment income .....	119,581	.119,581
10. Total gross investment income .....	5,631,895	5,757,031
11. Investment expenses .....	(g) .346,836	
12. Investment taxes, licenses and fees, excluding federal income taxes .....	(g)	0
13. Interest expense .....	(h)	
14. Depreciation on real estate and other invested assets .....	(i)	
15. Aggregate write-ins for deductions from investment income .....		0
16. Total deductions (Lines 11 through 15) .....		.346,836
17. Net investment income (Line 10 minus Line 16) .....		5,410,195
<b>DETAILS OF WRITE-INS</b>		
0901. Service Fee Income .....	.95,765	.95,765
0902. Other Invested Income .....	23,816	23,816
0903. .....		
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	119,581	119,581
1501. .....		
1502. .....		
1503. .....		
1598. Summary of remaining write-ins for Line 15 from overflow page .....		0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....		0

(a) Includes \$ 127,730 accrual of discount less \$ 394,644 amortization of premium and less \$ 132,330 paid for accrued interest on purchases.  
 (b) Includes \$ 0 accrual of discount less \$ 5,519 amortization of premium and less \$ 0 paid for accrued dividends on purchases.  
 (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.  
 (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.  
 (e) Includes \$ 71,204 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.  
 (f) Includes \$ accrual of discount less \$ amortization of premium.  
 (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.  
 (h) Includes \$ interest on surplus notes and \$ interest on capital notes.  
 (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....	(1,057)	0	(1,057)	0	0
1.1 Bonds exempt from U.S. tax .....		0	0		
1.2 Other bonds (unaffiliated) .....	.86,252	0	.86,252	-(7,168)	0
1.3 Bonds of affiliates .....	0	0	0	0	0
2.1 Preferred stocks (unaffiliated) .....	616	0	616	0	0
2.11 Preferred stocks of affiliates .....	0	0	0	0	0
2.2 Common stocks (unaffiliated) .....	(29,134)	0	(29,134)	58,930	0
2.21 Common stocks of affiliates .....	0	0	0	91,149	0
3. Mortgage loans .....	0	0	0	0	0
4. Real estate .....	0	0	0	0	0
5. Contract loans .....					
6. Cash, cash equivalents and short-term investments .....					
7. Derivative instruments .....					
8. Other invested assets .....		0	0	0	0
9. Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10. Total capital gains (losses) .....	56,677	0	56,677	142,911	0
<b>DETAILS OF WRITE-INS</b>					
0901. .....					
0902. .....					
0903. .....					
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

## EXHIBIT - 1 PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Industrial Life	Ordinary		5 Credit Life (Group and Individual)	Insurance Group		Accident and Health			11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other		
<b>FIRST YEAR (other than single)</b>												
1. Uncollected .....	0											
2. Deferred and accrued .....	791,211		791,211									
3. Deferred, accrued and uncollected:												
3.1 Direct .....	791,211		791,211									
3.2 Reinsurance assumed .....	0											
3.3 Reinsurance ceded .....	0											
3.4 Net (Line 1 + Line 2) .....	791,211	0	791,211	0		0	0	0	0	0	0	0
4. Advance .....	195,465		195,465									
5. Line 3.4 - Line 4 .....	595,746	0	595,746	0		0	0	0	0	0	0	0
6. Collected during year:												
6.1 Direct .....	1,949,475		1,808,709	140,766								
6.2 Reinsurance assumed .....	0		1,808,709	140,766		0	0	0	0	0	0	0
6.3 Reinsurance ceded .....	0											
6.4 Net .....	1,949,475	0	1,808,709	140,766		0	0	0	0	0	0	0
7. Line 5 + Line 6.4 .....	2,545,221	0	2,404,455	140,766		0	0	0	0	0	0	0
8. Prior year (uncollected + deferred and accrued - advance) .....	501,182	0	501,182	0		0	0	0	0	0	0	0
9. First year premiums and considerations:												
9.1 Direct .....	2,044,039		1,903,273	140,766								
9.2 Reinsurance assumed .....	0											
9.3 Reinsurance ceded .....	0											
9.4 Net (Line 7 - Line 8) .....	2,044,039	0	1,903,273	140,766		0	0	0	0	0	0	0
<b>SINGLE</b>												
10. Single premiums and considerations:												
10.1 Direct .....	31,532,598		31,532,598									
10.2 Reinsurance assumed .....	0											
10.3 Reinsurance ceded .....	0											
10.4 Net .....	31,532,598	0	31,532,598	0		0	0	0	0	0	0	0
<b>RENEWAL</b>												
11. Uncollected .....	163		163									
12. Deferred and accrued .....	1,623,013		1,623,013									
13. Deferred, accrued and uncollected:												
13.1 Direct .....	1,623,176		1,623,176									
13.2 Reinsurance assumed .....	0											
13.3 Reinsurance ceded .....	0											
13.4 Net (Line 11 + Line 12) .....	1,623,176	0	1,623,176	0		0	0	0	0	0	0	0
14. Advance .....	264,440		264,440									
15. Line 13.4 - Line 14 .....	1,358,736	0	1,358,736	0		0	0	0	0	0	0	0
16. Collected during year:												
16.1 Direct .....	3,523,704		3,483,324	15,935						24,445		
16.2 Reinsurance assumed .....	0											
16.3 Reinsurance ceded .....	5,100		5,100									
16.4 Net .....	3,518,604	0	3,478,224	15,935		0	0	0	0	24,445	0	0
17. Line 15 + Line 16.4 .....	4,877,340	0	4,836,960	15,935		0	0	0	0	24,445	0	0
18. Prior year (uncollected + deferred and accrued - advance) .....	1,306,997	0	1,306,997	0		0	0	0	0	0	0	0
19. Renewal premiums and considerations:												
19.1 Direct .....	3,575,442		3,535,062	15,935						24,445		
19.2 Reinsurance assumed .....	0											
19.3 Reinsurance ceded .....	5,100		5,100									
19.4 Net (Line 17 - Line 18) .....	3,570,342	0	3,529,962	15,935		0	0	0	0	24,445	0	0
<b>TOTAL</b>												
20. Total premiums and annuity considerations:												
20.1 Direct .....	37,152,079	0	36,970,933	156,701		0	0	0	0	24,445	0	0
20.2 Reinsurance assumed .....	0	0	0	0		0	0	0	0	0	0	0
20.3 Reinsurance ceded .....	5,100	0	5,100	0		0	0	0	0	0	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4) .....	37,146,979	0	36,965,833	156,701		0	0	0	0	24,445	0	0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

**EXHIBIT - 1 PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)**

	1 Total	2 Industrial Life	Insurance									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other					
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>															
21. To pay renewal premiums .....	1,111			1,111											
22. All other .....	0														
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>															
23. First year (other than single):															
23.1 Reinsurance ceded .....	0														
23.2 Reinsurance assumed .....	0														
23.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
24. Single:															
24.1 Reinsurance ceded .....	0														
24.2 Reinsurance assumed .....	0														
24.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
25. Renewal:															
25.1 Reinsurance ceded .....	0														
25.2 Reinsurance assumed .....	0														
25.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
26. Totals:															
26.1 Reinsurance ceded (Page 6, Line 6) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
26.2 Reinsurance assumed (Page 6, Line 22) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
26.3 Net ceded less assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
<b>COMMISSIONS INCURRED (direct business only)</b>															
27. First year (other than single) .....	1,588,841			1,588,025	.816										
28. Single .....	2,753,720			2,753,720											
29. Renewal .....	32,797			29,130								3,667			
30. Deposit-type contract funds .....	0														
31. Totals (to agree with Page 6, Line 21)	4,375,358	0	4,370,875	816	0	0	0	0	0	0	3,667	0	0		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance			5	6	7	
	1 Life	Accident and Health			6	7	
		2 Cost Containment	3 All Other				
1. Rent .....	102,522		103	5,401		108,026	
2. Salaries and wages .....	1,007,131		1,008	53,542		1,061,681	
3.11 Contributions for benefit plans for employees .....	192,341		193	10,129		202,663	
3.12 Contributions for benefit plans for agents .....						0	
3.21 Payments to employees under non-funded benefit plans .....						0	
3.22 Payments to agents under non-funded benefit plans .....						0	
3.31 Other employee welfare .....						0	
3.32 Other agent welfare .....						0	
4.1 Legal fees and expenses .....	14,659		15			14,674	
4.2 Medical examination fees .....						0	
4.3 Inspection report fees .....	29,053		29			29,082	
4.4 Fees of public accountants and consulting actuaries .....	71,970		72	5,588		77,630	
4.5 Expense of investigation and settlement of policy claims .....	5,882					5,882	
5.1 Traveling expenses .....	128,169					128,169	
5.2 Advertising .....	103,156					103,156	
5.3 Postage, express, telegraph and telephone .....	118,711		119			118,830	
5.4 Printing and stationery .....	142,720		143			142,863	
5.5 Cost or depreciation of furniture and equipment .....						0	
5.6 Rental of equipment .....	24,547		25			24,572	
5.7 Cost or depreciation of EDP equipment and software .....						0	
6.1 Books and periodicals .....						0	
6.2 Bureau and association fees .....	2,098		2			2,100	
6.3 Insurance, except on real estate .....	80,788		81			80,869	
6.4 Miscellaneous losses .....	74,010					74,010	
6.5 Collection and bank service charges .....	36,292		36	9,088		45,416	
6.6 Sundry general expenses .....	181,539		182			181,721	
6.7 Group service and administration fees .....						0	
6.8 Reimbursements by uninsured plans .....						0	
7.1 Agency expense allowance .....						0	
7.2 Agents' balances charged off (less \$ recovered) .....						0	
7.3 Agency conferences other than local meetings .....	155,280					155,280	
8.1 Official publication (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0	
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0	
9.1 Real estate expenses .....						0	
9.2 Investment expenses not included elsewhere .....				263,079		263,079	
9.3 Aggregate write-ins for expenses .....	5,266	0	0	0	9	5,275	
10. General expenses incurred .....	2,476,134	0	2,008	0	346,836	(b) 0 (a) 2,824,978	
11. General expenses unpaid Dec. 31, prior year .....	273,847		274		106,202	380,323	
12. General expenses unpaid Dec. 31, current year .....	291,040		291		56,752	348,083	
13. Amounts receivable relating to uninsured plans, prior year .....						0	
14. Amounts receivable relating to uninsured plans, current year .....						0	
15. General expenses paid during year (Lines 10+11-12-13-14) .....	2,458,941	0	1,991	0	396,286	0 2,857,218	
<b>DETAILS OF WRITE-INS</b>							
09.301. Insurance Department Exam Fees .....	36				9	45	
09.302. Guaranty Fund Assessments .....	5,230					5,230	
09.303.							
09.398. Summary of remaining write-ins for Line 9.3 from overflow page .....	0	0	0	0	0	0	
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above) .....	5,266	0	0	0	9	5,275	

(a) Includes management fees of \$ to affiliates and \$ to non-affiliates.

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

1. Charitable \$ ; 2. Institutional \$ ; 3. Recreational and Health \$ ; 4. Educational \$ ;  
 5. Religious \$ ; 6. Membership \$ ; 7. Other \$ ; 8. Total \$ 0

**EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)**

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes .....						0
2. State insurance department licenses and fees .....	45,665	46				45,711
3. State taxes on premiums .....	526,515	50				526,565
4. Other state taxes, including \$ for employee benefits .....						0
5. U.S. Social Security taxes .....	97,652					97,652
6. All other taxes .....	3,610	101				3,711
7. Taxes, licenses and fees incurred .....	673,442	197	0	0	0	673,639
8. Taxes, licenses and fees unpaid Dec. 31, prior year .....	104,386					104,386
9. Taxes, licenses and fees unpaid Dec. 31, current year .....	133,246					133,246
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9) .....	644,582	197	0	0	0	644,779

**EXHIBIT 4 - DIVIDENDS OR REFUNDS**

	1 Life	2 Accident and Health
1. Applied to pay renewal premiums .....		
2. Applied to shorten the endowment or premium-paying period .....		
3. Applied to provide paid-up additions .....		
4. Applied to provide paid-up annuities .....		
5. Total Lines 1 through 4 .....		
6. Paid in cash .....		
7. Left on deposit .....		
8. Aggregate write-ins for dividend or refund options .....		
9. Total Lines 5 through 8 .....		
10. Amount due and unpaid .....		
11. Provision for dividends or refunds payable in the following calendar year .....		
12. Terminal dividends .....		
13. Provision for deferred dividend contracts .....		
14. Amount provisionally held for deferred dividend contracts (not included in Line 3) .....		
15. Total Lines 10 through 14 .....		
16. Total from prior year .....		
17. Total dividends or refunds (Lines 9 + 15 - 16) .....		
<b>DETAILS OF WRITE-INS</b>		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page .....		
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....		

**NONE**

**EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. 1958 CET3.0% NL	15,170		15,170		
0100002. 1958 CSO 3.0% CRVM	311,296		311,296		
0100003. 1958 CSO 3.0\$ NL	569,774		569,774		
0100004. 1958 CSO 4.0% CRVM	40,100		40,100		
0100005. 1958 CSO 4.0% NL	1,182		1,182		
0100006. 1958 CSO 4.5% CRVM	12,008		12,008		
0100007. 1980 CSO 3.0% CRVM	2,683,457		2,683,457		
0100008. 1980 CSO 3.5% CRVM	2,426,815		2,426,815		
0100009. 1980 CSO 4.0% CRVM	13,226,450		13,226,450		
0100010. 1980 CSO 4.5% CRVM	55,166		55,166		
0100011. 125% 1980 CSOC3.0% CRVM	218,227		218,227		
0100012. 125% 1980 CSO 3.5% CRVM	87,086		87,086		
0100013. 125% 1980 CSO 4.0% CRVM	7,899,440		7,899,440		
0100014. 125% M 100% F 1980 CSO 3.0% CRVM	77,780,169		77,780,169		
0100015. 125% M 100% F 1980 CSO 3.5% CRVM	41,053,635		41,053,635		
0100016. 125% M 100% F 1980 CSO 4.0% CRVM	8,076,456		8,076,456		
0100017. 200% 1980 CSO 3.0% CRVM	698,391		698,391		
0100018. 200% 1980 CSO 3.5% CRVM	632,303		632,303		
0100019. 200% 1980 CSO 4.0% CRVM	489,886		489,886		
0100020. 2001 CSO 3.0% CRVM	237,038		237,038		
0100021. 2001 CSO 3.5% CRVM	208,786		208,786		
0100022. 2001 CSO 4.0% CRVM	413,267		413,267		
0100023. Payer & Special Clase	800		800		
0199997. Totals (Gross)	157,136,902	0	157,136,902	0	0
0199998. Reinsurance ceded	3,175		3,175		
0199999. Life Insurance: Totals (Net)	157,133,727	0	157,133,727	0	0
0200001. 1958 CS04%	35,110	XXX	35,110	XXX	
0200002. 1980 CSO 4.0%	168,922	XXX	168,922	XXX	
0200003. 1980 CSO 3.75%	487,151	XXX	487,151	XXX	
0200004. 1980 CSO 3.5%	602,199	XXX	602,199	XXX	
0299997. Totals (Gross)	1,293,382	XXX	1,293,382	XXX	0
0299998. Reinsurance ceded	0	XXX		XXX	
0299999. Annuities: Totals (Net)	1,293,382	XXX	1,293,382	XXX	0
0399998. Reinsurance ceded	0				
0399999. SCWLC: Totals (Net)	0	0	0	0	0
0400001. 1958 CSO 4%	100		100		
0499997. Totals (Gross)	100	0	100	0	0
0499998. Reinsurance ceded	0				
0499999. Accidental Death Benefits: Totals (Net)	100	0	100	0	0
0500001. 1958 Disability with 1958 CSO 3%	350		350		
0599997. Totals (Gross)	350	0	350	0	0
0599998. Reinsurance ceded	0				
0599999. Disability-Active Lives: Totals (Net)	350	0	350	0	0
0600001. 1952 Disability 3%	937		937		
0699997. Totals (Gross)	937	0	937	0	0
0699998. Reinsurance ceded	0				
0699999. Disability-Disabled Lives: Totals (Net)	937	0	937	0	0
0700001. Non-Deductable & REmurn of Prorata Premiums	98,922		98,922		
0700002. Casket Growth	709,877		709,877		
0799997. Totals (Gross)	808,799	0	808,799	0	0
0799998. Reinsurance ceded	0				
0799999. Miscellaneous Reserves: Totals (Net)	808,799	0	808,799	0	0
9999999. Totals (Net) - Page 3, Line 1	159,237,295	0	159,237,295	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**EXHIBIT 5 - INTERROGATORIES**

1.1 Has the reporting entity ever issued both participating and non-participating contracts? ..... Yes [  ] No [  ]  
 1.2 If not, state which kind is issued.

2.1 Does the reporting entity at present issue both participating and non-participating contracts? ..... Yes [  ] No [  ]  
 2.2 If not, state which kind is issued.

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? ..... Yes [  ] No [  ]  
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

4. Has the reporting entity any assessment or stipulated premium contracts in force? ..... Yes [  ] No [  ]  
 If so, state:  
 4.1 Amount of insurance? ..... \$ .....  
 4.2 Amount of reserve? ..... \$ .....  
 4.3 Basis of reserve:  
 4.4 Basis of regular assessments:  
 4.5 Basis of special assessments:  
 4.6 Assessments collected during the year ..... \$ .....  
 5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? ..... Yes [  ] No [  ]  
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: ..... \$ .....  
 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: ..... \$ .....  
 Attach statement of methods employed in their valuation.

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? ..... Yes [  ] No [  ]  
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements ..... \$ .....  
 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:  
 7.3 State the amount of reserves established for this business: ..... \$ .....  
 7.4 Identify where the reserves are reported in the blank:

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? ..... Yes [  ] No [  ]  
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: ..... \$ .....  
 8.2 State the amount of reserves established for this business: ..... \$ .....  
 8.3 Identify where the reserves are reported in the blank:

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? ..... Yes [  ] No [  ]  
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: ..... \$ .....  
 9.2 State the amount of reserves established for this business: ..... \$ .....  
 9.3 Identify where the reserves are reported in the blank:

**EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR**

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
9999999 - Total (Column 4, only)			

**NONE**

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

**EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS <sup>(a)</sup>**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
<b>ACTIVE LIFE RESERVE</b>													
1. Unearned premium reserves	2,204												2,204
2. Additional contract reserves (b)	0												
3. Additional actuarial reserves-Asset/Liability analysis	0												
4. Reserve for future contingent benefits	0												
5. Reserve for rate credits	0												
6. Aggregate write-ins for reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross)	2,204	0	0	0	0	0	0	0	0	0	0	0	2,204
8. Reinsurance ceded	0												
9. Totals (Net)	2,204	0	0	0	0	0	0	0	0	0	0	0	2,204
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims	0												
11. Additional actuarial reserves-Asset/Liability analysis	0												
12. Reserve for future contingent benefits	0												
13. Aggregate write-ins for reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Gross)	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Reinsurance ceded	0												
16. Totals (Net)	0	0	0	0	0	0	0	0	0	0	0	0	0
17. TOTAL (Net)	2,204	0	0	0	0	0	0	0	0	0	0	0	2,204
<b>TABULAR FUND INTEREST</b>	0												
<b>DETAILS OF WRITE-INS</b>													
0601.													
0602.													
0603.													
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0	0	0	0	0	0	0	0
1301.													
1302.													
1303.													
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected. No

(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

## EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance .....	207,151	0	0	0	207,151	0
2. Deposits received during the year .....	1,493				1,493	
3. Investment earnings credited to the account .....	7,244				7,244	
4. Other net change in reserves .....	0					
5. Fees and other charges assessed .....	0					
6. Surrender charges .....	0					
7. Net surrender or withdrawal payments .....	24,334				24,334	
8. Other net transfers to or (from) Separate Accounts .....	0					
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) .....	191,554	0	0	0	191,554	0
10. Reinsurance balance at the beginning of the year .....	0	0	0	0	0	0
11. Net change in reinsurance assumed .....	0					
12. Net change in reinsurance ceded .....	0					
13. Reinsurance balance at the end of the year (Lines 10+11-12) .....	0	0	0	0	0	0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13) .....	191,554	0	0	0	191,554	0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

**EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS****PART 1 - Liability End of Current Year**

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct	0										
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	0	0	0	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted	0										
2.11 Direct	0										
2.12 Reinsurance assumed	0										
2.13 Reinsurance ceded	0										
2.14 Net	0	0	(b) 0	0	0	(b) 0	(b) 0	0	0	0	0
2.2 Other	2.21 Direct	839,765		334,702							5,063
	2.22 Reinsurance assumed	0									
	2.23 Reinsurance ceded	0									
	2.24 Net	339,765	0	(b) 334,702	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 5,063
3. Incurred but unreported:											
3.1 Direct	110,000			110,000							
3.2 Reinsurance assumed	0										
3.3 Reinsurance ceded	0										
3.4 Net	110,000	0	(b) 110,000	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0
4. TOTALS	4.1 Direct	449,765	0	444,702	0	0	0	0	0	0	5,063
	4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
	4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
	4.4 Net	449,765	(a) 0	(a) 444,702	0	0	0	(a) 0	0	0	5,063

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ ..... in Column 2, \$ ..... in Column 3 and \$ ..... in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$ ..... Individual Annuities \$ ..... Credit Life (Group and Individual) \$ ..... and Group Life \$ ..... are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$ ..... Credit (Group and Individual) Accident and Health \$ ..... and Other Accident and Health \$ ..... are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

Individual Annuities \$ ..... , Credit Life (Group and Individual) \$ ..... , and Group Life \$ ..... , are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$ ..... Credit (Group and Individual) Accident and Health \$ ..... , and Other Accident and Health \$ ..... are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

**PART 2 - Incurred During the Year**

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements During the Year:											
1.1 Direct	21,471,345		21,280,327	181,180							9,838
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	(d) 21,471,345	0	21,280,327	181,180	0	0	0	0	0	0	9,838
2. Liability December 31, current year from Part 1:											
2.1 Direct	449,765	0	444,702	0	0	0	0	0	0	0	5,063
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
2.4 Net	449,765	0	444,702	0	0	0	0	0	0	0	5,063
3. Amounts recoverable from reinsurers December 31, current year	0										
4. Liability December 31, prior year:											
4.1 Direct	382,713	0	365,647	10,625	0	0	0	0	0	0	6,441
4.2 Reinsurance assumed	0										
4.3 Reinsurance ceded	0										
4.4 Net	382,713	0	365,647	10,625	0	0	0	0	0	0	6,441
5. Amounts recoverable from reinsurers December 31, prior year	0										
6. Incurred Benefits											
6.1 Direct	21,538,397	0	21,359,382	170,555	0	0	0	0	0	0	8,460
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
6.4 Net	21,538,397	0	21,359,382	170,555	0	0	0	0	0	0	8,460

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 6.1, and \$ ..... in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.

\$ ..... in Line 6.1, and \$ ..... in Line 6.4.

(d) Includes \$ ..... premiums waived under total and permanent disability benefits.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**EXHIBIT OF NON-ADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....			0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....			0
2.2 Common stocks .....			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale .....			0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....			0
6. Contract loans .....			0
7. Derivatives (Schedule DB) .....			0
8. Other invested assets (Schedule BA) .....			0
9. Receivables for securities .....			0
10. Securities lending reinvested collateral assets (Schedule DL) .....			0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only) .....			0
14. Investment income due and accrued .....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....			0
16.2 Funds held by or deposited with reinsured companies .....			0
16.3 Other amounts receivable under reinsurance contracts .....			0
17. Amounts receivable relating to uninsured plans .....			0
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0
18.2 Net deferred tax asset .....	1,127,177	550,000	(577,177)
19. Guaranty funds receivable or on deposit .....			0
20. Electronic data processing equipment and software .....			0
21. Furniture and equipment, including health care delivery assets .....	690	690	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0
23. Receivables from parent, subsidiaries and affiliates .....			0
24. Health care and other amounts receivable .....			0
25. Aggregate write-ins for other than invested assets .....	40,270	58,945	18,675
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	1,168,137	609,635	(558,502)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0
28. Total (Lines 26 and 27) .....	1,168,137	609,635	(558,502)
<b>DETAILS OF WRITE-INS</b>			
1101. .....			
1102. .....			
1103. .....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0
2501. Prepaid Insurance .....	40,270	58,945	18,675
2502. .....		0	0
2503. .....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	40,270	58,945	18,675

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**1. Summary of Significant Accounting Policies and Going Concern**

**A. Accounting Practices**

The financial statements of Cincinnati Equitable Life Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, version effective January 1, 2019, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio. The State of Ohio has not adopted any prescribed or permitted practices that differ from NAIC SAP.

	SSAP #	F/S Page	F/S Line #	2019	2018
<b>Net Income</b>					
(1) State basis (Page 4, Line 35, Columns 1 & 2).....	XXX	XXX	XXX	\$ (749,341)	\$ (348,553)
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4).....	XXX	XXX	XXX	\$ (749,341)	\$ (348,553)
<b>Surplus</b>					
(5) State basis (Page 3, Line 38, Columns 1 & 2).....	XXX	XXX	XXX	\$ 8,260,655	\$ 9,336,912
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8).....	XXX	XXX	XXX	\$ 8,260,655	\$ 9,336,912

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

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

**C. Accounting Policy**

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

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

In addition, the company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the interest method.  
The Company does not hold any SVO Identified Bond ETFs on Schedule D-1.
- (3) Common Stocks at market except that investments in stocks of uncombined subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
- (4) Preferred stocks are stated in accordance with guidance provided in SSAP No. 32.
- (5) Mortgage loans on real estate are stated at the aggregate carrying value less accrued interest
- (6) Loan-backed securities are stated at either amortized cost or the lower or amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative; these are valued using the prospective method.
- (7) The Company owns 100% of the outstanding stock of Cincinnati Equitable Insurance Company, an Ohio domiciled property casualty insurance company. The stock of Cincinnati Equitable Insurance Company was contributed to the Company by their common parent Cincinnati Equitable Companies, Inc. in 2007.
- (8) The Company has no interest in Joint Ventures.
- (9) All derivatives, if any, are stated at fair value.
- (10) The Company does not anticipate investment income as a factor in the premium deficiency calculation.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) Pharmaceutical rebate receivables - None

**D. Going Concern**

The Company has no Going Concern issues.

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

2. **Accounting Changes and Corrections of Errors** - None
3. **Business Combinations and Goodwill** - None
4. **Discontinued Operations** - None
5. **Investments**
  - A. Mortgage Loans, including Mezzanine Real Estate Loans
    - (1) Maximum interest rate was 4.4% and minimum rate was 4.25%
    - (2) Maximum percentage of loan to value of security was 71%
    - (3) Taxes, assessments and any amounts advanced and not included in mortgage loan total - None
    - (4) Age analysis of mortgage loans and identification of mortgage loans in which the insurer is a participant or co-lender in a mortgage loan agreement

	Residential			Commercial			Total
	Farm	Insured	All Other	Insured	All Other	Mezzanine	
a. Current Year							
1. Recorded Investment (All)							
(a) Current	\$	\$	\$	\$	\$ 1,000,000	\$	\$ 1,000,000
(b) 30 - 59 days past due							
(c) 60 - 89 days past due							
(d) 90 - 179 days past due							
(e) 180+ days past due							
2. Accruing Interest 90-179 Days Past Due							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(b) Interest accrued							
3. Accruing Interest 180+ Days Past Due							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(b) Interest accrued							
4. Interest Reduced							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(b) Number of loans							
(c) Percent reduced	%	%	%	%	%	%	%
5. Participant or Co-lender in a Mortgage Loan Agreement							
(a) Recorded investment	\$	\$	\$	\$	\$ 1,000,000	\$	\$ 1,000,000
b. Prior Year							
1. Recorded Investment							
(a) Current	\$	\$	\$	\$	\$	\$	\$
(b) 30 - 59 days past due							
(c) 60 - 89 days past due							
(d) 90 - 179 days past due							
(e) 180+ days past due							
2. Accruing Interest 90-179 Days Past Due							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(b) Interest accrued							
3. Accruing Interest 180+ Days Past Due							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(b) Interest accrued							
4. Interest Reduced							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(b) Number of loans							
(c) Percent reduced	%	%	%	%	%	%	%
5. Participant or Co-lender in a Mortgage Loan Agreement							
(a) Recorded investment	\$	\$	\$	\$	\$	\$	\$
(5) Investment in impaired loans with or without allowance for credit losses and impaired loans subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan - None							
(6) Investment in impaired loans - average recorded investment, interest income recognized, recorded investment on nonaccrual status and amount of interest income recognized using a cash-basis method of accounting - Not Applicable							
(7) Allowance for credit losses - None							
(8) Mortgage loans derecognized as a result of foreclosure - None							
(9) The company recognizes interest income on its impaired loans upon receipt.							
B. Debt Restructuring - None							

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**5. Investments (Continued)**

C. Reverse Mortgages - None

D. Loan-Backed Securities

- (1) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from broker dealer survey values or NAIC RMBS/ CMBS modeling.
- (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) - None
- (3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities - None
- (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss

	<u>Amount</u>
a. The aggregate amount of unrealized losses:	
1. Less than 12 months .....	\$ ..... 1,893
2. 12 months or longer .....	\$ ..... -
b. The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months .....	\$ ..... 696,721
2. 12 months or longer .....	\$ ..... -

- (5) We used market values obtained from broker dealers and money managers to determine that these securities are not Other-than-temporary impairments.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None

H. Repurchase Agreements Transactions Accounted for as a Sale - None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None

J. Real Estate - None

K. Low-Income Housing Tax Credits (LIHTC) - None

**Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company**  
**Notes to the Financial Statements**

**5. Investments (Continued)**

**L. Restricted Assets**

**(1) Restricted assets (including pledged)**

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						Current Year				
	Current Year						Current Year				
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Total General Account (G/A)	G/A Supporting Separate Activity	Total S/A Restricted Assets	S/A Assets Supporting G/A Activity	Total (1 + 3)	Total From Prior Year	Increase / (Decrease) (5 - 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5-8)	Gross (Admitted & Nonadmitted) Restricted	Admitted to Total Admitted Assets, %
a. Subject to contractual obligation for which liability is not shown	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	% .....
b. Collateral held under security lending agreements	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
c. Subject to repurchase agreements	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
d. Subject to reverse repurchase agreements	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
e. Subject to dollar repurchase agreements	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
f. Subject to dollar reverse repurchase agreements	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
g. Placed under option contracts	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
i. FHLB capital stock	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
j. On deposit with states	1,099,344	.....	.....	.....	1,099,344	1,100,248	(904)	.....	1,099,344	0.637	0.612
k. On deposit with other regulatory bodies	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
l. Pledged as collateral to FHLB (including assets backing funding agreements)	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
m. Pledged as collateral not captured in other categories	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
n. Other restricted assets	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
o. Total restricted assets	\$ 1,099,344	\$ .....	\$ .....	\$ .....	\$ 1,099,344	\$ 1,100,248	\$ (904)	\$ .....	\$ 1,099,344	0.637%	0.612%

- (2) Detail of assets pledged as collateral not captured in other categories (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - None
- (3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - None
- (4) Collateral received and reflected as assets within the reporting entity's financial statements - None

**M. Working Capital Finance Investments - None**

**N. Offsetting and Netting of Assets and Liabilities - None**

**O. 5GI Securities**

Investment	Number of 5GI Securities		Aggregate BACV		Aggregate Fair Value	
	2019	2018	2019	2018	2019	2018
(1) Bonds - amortized cost	2	2	\$ 279,452	\$ 289,209	\$ 291,564	\$ 291,857
(2) LB & SS - amortized cost	.....	.....	.....	.....	.....	.....
(3) Preferred stock - amortized cost	.....	.....	.....	.....	.....	.....
(4) Preferred stock - fair value	.....	.....	.....	.....	.....	.....
(5) Total (1+2+3+4)	2	2	\$ 279,452	\$ 289,209	\$ 291,564	\$ 291,857

**P. Short Sales - None**

**Q. Prepayment Penalty and Acceleration Fees**

	General Account	Separate Account
(1) Number of CUSIPs	1	.....
(2) Aggregate Amount of Investment Income	\$ 10,715	\$ .....

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**6. Joint Ventures, Partnerships and Limited Liability Companies** - None

**7. Investment Income** - None

**8. Derivative Instruments** - None

**9. Income Taxes**

A. Components of the Net Deferred Tax Asset/(Liability)

(1) Change between years by tax character

	2019			2018			Change		
	(1) Ordinary	(2) Capital	(3) Total (Col 1+2)	(4) Ordinary	(5) Capital	(6) Total (Col 4+5)	(7) Ordinary (Col 1-4)	(8) Capital (Col 2-5)	(9) Total (Col 7+8)
(a) Gross deferred tax assets	\$ 3,669,000	\$ .....	\$ 3,669,000	\$ 2,440,000	\$ 12,000	\$ 2,452,000	\$ 1,229,000	\$ (12,000)	\$ 1,217,000
(b) Statutory valuation allowance adjustments									
(c) Adjusted gross deferred tax assets (1a - 1b)	3,669,000		3,669,000	2,440,000	12,000	2,452,000	1,229,000	(12,000)	1,217,000
(d) Deferred tax assets nonadmitted	1,127,000		1,127,000	550,000		550,000	577,000		577,000
(e) Subtotal net admitted deferred tax asset (1c - 1d)	\$ 2,542,000	\$ .....	\$ 2,542,000	\$ 1,890,000	\$ 12,000	\$ 1,902,000	\$ 652,000	\$ (12,000)	\$ 640,000
(f) Deferred tax liabilities	1,302,000		1,302,000	272,000		272,000	1,030,000		1,030,000
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 1,240,000	\$ .....	\$ 1,240,000	\$ 1,618,000	\$ 12,000	\$ 1,630,000	\$ (378,000)	\$ (12,000)	\$ (390,000)

(2) Admission calculation components SSAP No. 101

	2019			2018			Change		
	(1) Ordinary	(2) Capital	(3) Total (Col 1+2)	(4) Ordinary	(5) Capital	(6) Total (Col 4+5)	(7) Ordinary (Col 1-4)	(8) Capital (Col 2-5)	(9) Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (lesser of 2(b)1 and 2(b)2 below)	1,240,000		1,240,000	1,383,000		1,383,000	(143,000)		(143,000)
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	2,574,000		2,574,000	1,401,000		1,401,000	1,173,000		1,173,000
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	1,240,000	XXX	XXX	1,401,000	XXX	XXX	(161,000)
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	1,302,000		1,302,000	272,000		272,000	1,030,000		1,030,000
(d) Deferred tax assets admitted as the result of application of SSAP No. 101.									
Total (2(a) + 2(b) + 2(c))	\$ 2,542,000	\$ .....	\$ 2,542,000	\$ 1,655,000	\$ .....	\$ 1,655,000	\$ 887,000	\$ .....	\$ 887,000

(3) Ratio used as basis of admissibility

	2019	2018
(a) Ratio percentage used to determine recovery period and threshold limitation amount	563.320%	627.110%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 8,584,304	\$ 9,172,099

(4) Impact of tax-planning strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage

	2019			2018			Change		
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) Ordinary (Col. 1-3)	(6) Capital (Col. 2-4)			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 3,669,000	\$ .....	\$ 2,440,000	\$ 12,000	\$ 1,229,000	\$ .....			
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	100.000%		% 100.000%		%	- %			
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 2,542,000	\$ .....	\$ 1,890,000	\$ 12,000	\$ 652,000	\$ .....			
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	100.000%		% 100.000%		%	- %			

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**9. Income Taxes (Continued)**

(b) Use of reinsurance-related tax-planning strategies

Does the company's tax-planning strategies include the use of reinsurance? No

B. Regarding Deferred Tax Liabilities That Are Not Recognized - None

C. Major Components of Current Income Taxes Incurred

	(1) 2019	(2) 2018	(3) Change (1-2)
Current income taxes incurred consist of the following major components:			
1. Current Income Tax			
(a) Federal .....	\$ (100,965)	\$ (114,337)	\$ 13,372
(b) Foreign .....			
(c) Subtotal .....	\$ (100,965)	\$ (114,337)	\$ 13,372
(d) Federal income tax on net capital gains .....	11,902	186,672	(174,770)
(e) Utilization of capital loss carry-forwards .....			
(f) Other .....	303,963	(303,963)	(303,963)
(g) Federal and foreign income taxes incurred .....	\$ (89,063)	\$ 376,298	\$ (465,361)
Current income taxes incurred consist of the following major components:			
2. Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of unpaid losses .....	\$ .....	\$ .....	\$ .....
(2) Unearned premium reserve .....			
(3) Policyholder reserves .....	1,931,000	748,000	1,183,000
(4) Investments .....			
(5) Deferred acquisition costs .....	1,683,000	1,640,000	43,000
(6) Policyholder dividends accrual .....			
(7) Fixed assets .....	1,000	1,000	-
(8) Compensation and benefits accrual .....			
(9) Pension accrual .....			
(10) Receivables - nonadmitted .....	40,000	51,000	(11,000)
(11) Net operating loss carry-forward .....			
(12) Tax credit carry-forward .....	12,000		12,000
(13) Other (including items less than 5% of total ordinary tax assets)* .....	2,000		2,000
(99) Subtotal .....	\$ 3,669,000	\$ 2,440,000	\$ 1,229,000
(b) Statutory valuation allowance adjustment .....			
(c) Nonadmitted .....	1,127,000	550,000	577,000
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) .....	\$ 2,542,000	\$ 1,890,000	\$ 652,000
(e) Capital			
(1) Investments .....	\$ .....	\$ 12,000	\$ (12,000)
(2) Net capital loss carry-forward .....			
(3) Real estate .....			
(4) Other (including items <5% of total capital tax assets) .....			
(99) Subtotal .....	\$ .....	\$ 12,000	\$ (12,000)
(f) Statutory valuation allowance adjustment .....			
(g) Nonadmitted .....			
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g) .....		12,000	(12,000)
(i) Admitted deferred tax assets (2d + 2h) .....	\$ 2,542,000	\$ 1,902,000	\$ 640,000

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**9. Income Taxes (Continued)**

	(1) 2019	(2) 2018	(3) Change (1-2)
Current income taxes incurred consist of the following major components:			
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$ 45,000	\$ 42,000	\$ 3,000
(2) Fixed assets			
(3) Deferred and uncollected premium	242,000	230,000	12,000
(4) Policyholder reserves			
(5) Other (including items <5% of total ordinary tax liabilities) <sup>†</sup>	1,015,000		1,015,000
(99) Subtotal	\$ 1,302,000	\$ 272,000	\$ 1,030,000
(b) Capital			
(1) Investments	\$	\$	\$
(2) Real estate			
(3) Other (including items <5% of total capital tax liabilities)			
(99) Subtotal	\$	\$	\$
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 1,302,000	\$ 272,000	\$ 1,030,000
4. Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 1,240,000</u>	<u>\$ 1,630,000</u>	<u>\$ (390,000)</u>
	(1) 2019	(2) 2018	(3) Change (1-2)

\* Items >5% of total ordinary tax assets included in Other

<sup>†</sup> Items >5% of total ordinary tax liabilities included in Other

Section 846 Transition Adjustment under TCJA

1,015,000

- 1,015,000

**D. Among the More Significant Book to Tax Adjustments**

	2019	Effective Tax Rate
Income before Taxes	\$ (214,117)	21.000%
Tax-Exempt Interest	(2,215)	0.217
Dividend Received Deduction	(3,745)	0.367
Difference between Statutory and Tax Policy		
Reserves	(1,610)	0.158
Section 846 Transition Adjustment under TCJA	169,256	-16.600
Deferred Acquisition Costs	99,692	-9.777
Deferred and Uncollected Premiums	(11,858)	1.163
Accrual of Discount on Bonds	(35,127)	3.445
Other Adjustments	(6,399)	0.628
Total statutory income taxes	<u>\$ (6,123)</u>	<u>0.601%</u>

**E. Operating Loss and Tax Credit Carryforwards**

(1) At December 31, 2019, the Company had no remaining Net Operating Loss carryforwards, they did have an AMT tax credit carryforward of \$58,486 available for tax purposes.

(2) Income tax expense available for recoupment

The following are income taxes incurred in the current and prior years that will be available for recoupment in the event of future net losses:

	Ordinary	Capital	Total
2017	\$	\$	\$
2018		888,914	888,914
2019		56,677	56,677

(3) Deposits admitted under IRC Section 6603 - None

**F. Consolidated Federal Income Tax Return**

(1) The Company's federal income tax return is not consolidated with any other entity.

(2) Method of allocation - None

**G. Federal or Foreign Income Tax Loss Contingencies - None**

**H. Repatriation Transition Tax (RTT) - None**

**I. Alternative Minimum Tax (AMT) Credit - None**

**10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

A. Effective September 30, 2019 Cincinnati Equitable Life Insurance Company became a wholly owned subsidiary of Michigan Farm Bureau Financial Corporation. Certain processing functions are shared between the companies, such as actuarial, investment management and federal income tax preparation.

B. Detail of Transactions Greater Than 0.5% of Admitted Assets - None

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties (Continued)**

- C. Cincinnati Equitable Life Insurance Company pays expenses under a management agreement for the general management of the company. These expenses are generally allocated to the company based on time spent working for each company. As of September 30, 2019, the company was acquired by Michigan Farm Bureau Financial Corporation. A cost sharing agreement has been executed with the new parent company where by certain functions will be performed for the company. The charges for these services will be calculated using current methods.
- D. At December 31, 2019, the Company reported \$386 receivable from Cincinnati Equitable Insurance Company. The terms of the settlement require that these amounts are settled within 90 days.
- E. The Company has made no guarantees on behalf of the Parent Company.
- F. Michigan Farm Bureau Financial Corporation has agreed to provide Management and certain processing functions to Cincinnati Equitable Life Insurance Company (see 10.A. above). In 2019 the expense for these services was \$50,333. Prior to September 30, 2019 Cincinnati Equitable Companies provided management services and certain processing functions. In 2019 the allocated expenses for these services was \$317,957.
- G. All outstanding stock of Cincinnati Equitable Life Insurance Company is owned by Cincinnati Equitable Companies, Inc., an insurance holding company domiciled in the State of Ohio. All outstanding stock of Cincinnati Equitable Companies, Inc. is owned by Michigan Farm Bureau Financial Corporation (see Schedule Y of this statement).
- H. Amount Deducted for Investment in Upstream Company - None
- I. The Company owns 100% of the outstanding stock of Cincinnati Equitable Insurance Company, an Ohio domiciled Property Casualty Company, whose value is less than 10% of the admitted assets of the Company. Cincinnati Equitable Insurance Company is valued at Statutory Surplus. No goodwill is associated with this asset.
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - None
- K. Foreign Subsidiary Value Using CARVM - None
- L. Downstream Holding Company Value Using Look-Through Method - None
- M. All SCA Investments - None
- N. Investment in Insurance SCAs - None
- O. SCA and SSAP No. 48 Entity Loss Tracking - None

**11. Debt - None**

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

- A. Defined Benefit Plan - None
- B. Investment Policies and Strategies of Plan Assets - None
- C. Fair Value of Each Class of Plan Assets - None
- D. Expected Long-Term Rate of Return for the Plan Assets - None
- E. Defined Contribution Plans - None
- F. Multiemployer Plans - None
- G. Consolidated/Holding Company Plans

The Company participates in a qualified, noncontributory defined contribution plan (401(k)) sponsored by Cincinnati Equitable Companies, Inc., our parent company. The Company does not provide certain other post retirement benefits to retired employees through a plan sponsored by Cincinnati Equitable Companies, Inc. The Company has no legal obligation for benefits under these plans. Cincinnati Equitable Companies, Inc. allocates amounts to the Company based on salary ratios. The Company's share of net expense for the 401(k) plan was \$37,418 and \$40,757 for 2019 and 2018, respectively and for other post retirement benefit plans was \$0 and \$0 for 2019 and 2018, respectively.

H. Postemployment Benefits and Compensated Absences

The Company does not provide for post-retirement benefits. However, the Company does compensate for unused absences.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - None

**13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations**

- 1. The Company has 1,000 shares authorized, 1,000 shares issued and 1,000 shares outstanding.
- 2. Dividend Rate of Preferred Stock - None
- 3. Without the prior approval of the domiciliary commissioner, dividends to the shareholders are limited by the laws of the Company's state of incorporation, Ohio, to \$0, an amount that is based on restrictions related to statutory surplus.
- 4. Ordinary Dividends - None
- 5. Within the limits of (3) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
- 6. There are no restrictions placed on the Company's surplus, including for whom the surplus is being held, other than the minimum surplus requirements of the state of Ohio.
- 7. Surplus Advances - None
- 8. Stock Held for Special Purposes - None
- 9. Changes in Special Surplus Funds - None
- 10. Unassigned funds (surplus)

The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains or losses is (\$468,609)

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations (Continued)**

11. Company-Issued Surplus Debentures or Similar Obligations - None
12. Impact of Any Restatement Due to Prior Quasi-Reorganizations - None
13. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years - None

**14. Liabilities, Contingencies and Assessments**

- A. Contingent Commitments - None
- B. Assessments
  - (1) The Company is not aware of any new insolvencies in 2019. It is expected that the Company will have to pay some amount, for insolvencies, at some point in the future. However, do to the size of the Company's premium volume; these assessments will not be material. The Company is carrying a liability of \$2,063 for Guarantee Fund Assessments.
  - (2) Assets (Liabilities) recognized from paid and accrued premium tax offsets and policy surcharges - None
  - (3) Guaranty fund liabilities and assets related to long-term care insolvencies - None
- C. Gain Contingencies - None
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - None
- E. Joint and Several Liabilities - None
- F. All Other Contingencies - None

**15. Leases**

A. Lessee Operating Lease

(1) Leasing arrangements

The Company leases automobiles and office equipment under various non-cancelable operating lease agreements that expire through March of 2022. The Company leases office space in a multi-tenant building. The current lease expires in March of 2020.

- (a) Rental expense for 2019, and 2018 were approximately \$160,000 and \$179,000. Expenses are allocated among the three companies on a prorata basis according to their usage.
- (b) Rental payment contingencies - None
- (c) **The existence and terms of renewal or purchase options and escalation clause - None**
- (d) Restrictions imposed by lease agreements - None
- (e) **Lease Agreements terminated early - None.**

(2) For leases having initial or remaining noncancelable lease terms in excess of one year

The Company leases automobiles and office equipment under non-cancelable lease terms that expire in 2022.

- (a) Minimum aggregate rental commitments at year end

At December 31, 2019, the minimum aggregate rental commitments for all companies are as follows:

Year Ending December 31	Operating Leases
1. 2020	\$ 65,000
2. 2021	28,000
3. 2022	3,000
4. 2023	-----
5. 2024	-----
6. Total	\$ 96,000

- (b) Sublease minimum rentals to be received - None

- (3) For sale-leaseback transactions - None

B. Lessor Leases - None

**16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - None**

**17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - None**

**18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - None**

**19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

Name and Address of Managing General Agent or Third Party Administration	FEIN Number	Exclusive Contract	Types of Business Written	Type of Authority Granted	Total Direct Premium Written / Produced By
Enterprise Group Planning 5910 Harper Road, Cleveland, OH 44122	34-1262548	YES	Individual A&H	CA, P	\$ 24,445
Total					\$ 24,445

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**20. Fair Value Measurements**

A. Fair Value Measurement

(1) Fair value measurements at reporting date

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Preferred Stocks .....	\$ 1,223,315	\$ .....	\$ .....	\$ .....	\$ 1,223,315
Bonds - Government .....	861,061	.....	.....	.....	861,061
Bonds - Other .....	.....	159,741,514	.....	.....	159,741,514
Other Invested Assets .....	.....	271,147	.....	.....	271,147
Common Stock - Affiliated .....	.....	3,246,975	.....	.....	3,246,975
Total assets at fair value/NAV	<u>\$ 2,084,376</u>	<u>\$ 163,259,636</u>	<u>\$</u>	<u>\$</u>	<u>\$ 165,344,012</u>
b. Liabilities at fair value					
Total liabilities at fair value	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

(2) Fair value measurements in Level 3 of the fair value hierarchy - None

(3) Policy on transfers into and out of Level 3 - None

(4) Inputs and techniques used for Level 2 and Level 3 fair values - None

(5) Derivatives - None

B. Other Fair Value Disclosures - None

C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds .....	\$ 160,602,575	\$ 153,096,395	\$ 861,061	\$ 159,741,514	\$ .....	\$ .....	\$ .....
Preferred Stocks .....	1,223,315	1,185,391	1,223,315	.....	.....	.....	.....
Common Stock .....	3,246,975	3,246,975	.....	3,246,975	.....	.....	.....
Other Invested Assets .....	271,147	248,479	.....	271,147	.....	.....	.....

D. Not Practicable to Estimate Fair Value - None

E. Nature and Risk of Investments Reported at NAV - None

**21. Other Items - None**

**22. Events Subsequent - None**

**23. Reinsurance - None**

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination - None**

**25. Change in Incurred Losses and Loss Adjustment Expenses - Not Applicable**

**26. Intercompany Pooling Arrangements - None**

**27. Structured Settlements - None**

**28. Health Care Receivables - None**

**29. Participating Policies**

For the reporting year ended December 31, 2019, premiums under individual life participating policies were \$5,898, or less than 1% of total individual life premium earned. The Company accounts for its policyholder dividends based upon the accrual method. The Company paid dividends in the amount of \$510 to policyholders and did not allocate any additional income to such policyholders.

**30. Premium Deficiency Reserves**

As of December 31, 2019 the Company had liabilities of \$0 related to premium deficiency reserves. The Company does not consider anticipated investment income when calculating its premium deficiency reserves.

1. Liability carried for premium deficiency reserves: \$-
2. Date of the most recent evaluation of this liability: 12/31/2019
3. Was anticipated investment income utilized in the calculation? 0

**31. Reserves for Life Contracts and Annuity Contracts**

1. The Company waives deduction of fractional deferred premiums upon death of insured. Surrender values are not promised in excess of the legally computed reserves.
2. Extra premiums are charged for substandard lives for policies issued. Mean reserves are equal to multiples of the substandard extra annual premium where such multiple is not less than one half.
3. As of December 31, 2019, the Company had no insurance in force for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Ohio.
4. The Tabular Interest has been determined by formula as described in the instructions.

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**31. Reserves for Life Contracts and Annuity Contracts (Continued)**

The Tabular Less Actual Reserves Released has been determined by formula as described in the instructions.

The Tabular Cost has been determined by formula as described in the instructions.

5. For the determination of Tabular Interest on funds not involving life contingencies for each valuation rate of interest the tabular interest is calculated as one hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and end of the year of valuation.

6. Details for Other Changes - None

**32. Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics**

A. Individual Annuities

	General Account	Separate Account With Guarantees	Separate Account Nonguaranteed	Total	Percent of Total
(1) Subject to discretionary withdrawal					
a. With market value adjustment	\$ .....	\$ .....	\$ .....	\$ .....	..... %
b. At book value less current surrender charge of 5% or more	451,493			451,493	34.908
c. At fair value					
d. Total with market value adjustment or at fair value (total of a through c)	451,493			451,493	34.908
e. At book value without adjustment (minimal or no charge or adjustment)	806,779			806,779	62.377
(2) Not subject to discretionary withdrawal	35,110			35,110	2.715
(3) Total (gross: direct + assumed)	1,293,382			1,293,382	100.000%
(4) Reinsurance ceded					
(5) Total (net) (3 - 4)	\$ 1,293,382	\$ .....	\$ .....	\$ 1,293,382	
(6) Amount included in A(1)b above that will move to A(1)e in the year after the statement date:	\$ .....	\$ .....	\$ .....	\$ .....	

B. Group Annuities - None

C. Deposit-Type Contracts (no life contingencies)

	General Account	Separate Account With Guarantees	Separate Account Nonguaranteed	Total	Percent of Total
(1) Subject to discretionary withdrawal					
a. With market value adjustment	\$ 191,554	\$ .....	\$ .....	\$ 191,554	100.000%
b. At book value less current surrender charge of 5% or more					
c. At fair value					
d. Total with market value adjustment or at fair value (total of a through c)	191,554			191,554	100.000
e. At book value without adjustment (minimal or no charge or adjustment)					
(2) Not subject to discretionary withdrawal					
(3) Total (gross: direct + assumed)	191,554			191,554	100.000%
(4) Reinsurance ceded					
(5) Total (net) (3 - 4)	\$ 191,554	\$ .....	\$ .....	\$ 191,554	
(6) Amount included in C(1)b above that will move to C(1)e in the year after the statement date:	\$ .....	\$ .....	\$ .....	\$ .....	

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**32. Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics (Continued)**

D. Reconciliation of Total Annuity Actuarial Reserves and Deposit Fund Liabilities Amounts

	Amount
Life & Accident & Health Annual Statement	
(1) Exhibit 5, annuities, total (net)	1,293,382
(2) Exhibit 5, supplementary contracts with life contingencies section, total (net)	191,554
(3) Exhibit of Deposit-type Contracts, Line 14, Column 1	191,554
(4) Subtotal	1,484,936
Separate Accounts Annual Statement	
(5) Exhibit 3, Line 0299999, Column 2	
(6) Exhibit 3, Line 0399999, Column 2	
(7) Policyholder dividend and coupon accumulations	
(8) Policyholder premiums	
(9) Guaranteed interest contracts	
(10) Other contract deposit funds	
(11) Subtotal	
(12) Combined total	\$ 1,484,936

**33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics**

	General Account			Separate Account – Guaranteed and Nonguaranteed		
	Account Value	Cash Value	Reserve	Account Value	Cash Value	Reserve
A. Subject to discretionary withdrawal, surrender values, or policy loans:						
(1) Term Policies with Cash Value	20,019	20,019	10,825			
(2) Universal Life						
(3) Universal Life with Secondary Guarantees						
(4) Indexed Universal Life						
(5) Indexed Universal Life with Secondary Guarantees						
(6) Indexed Life						
(7) Other Permanent Cash Value Life Insurance	143,315,799	143,124,245	157,108,891			
(8) Variable Life						
(9) Variable Universal Life						
(10) Miscellaneous Reserves						
B. Not subject to discretionary withdrawal or no cash values						
(1) Term Policies without Cash Value	XXX	XXX	16,386	XXX	XXX	
(2) Accidental Death Benefits	XXX	XXX	100	XXX	XXX	
(3) Disability - Active Lives	XXX	XXX	350	XXX	XXX	
(4) Disability - Disabled Lives	XXX	XXX	937	XXX	XXX	
(5) Miscellaneous Reserves	XXX	XXX	809,599	XXX	XXX	
C. Total (gross: direct + assumed)	143,335,818	143,144,264	157,947,088			
D. Reinsurance Ceded			3,175			
E. Total (net) (C) - (D)	143,335,818	143,144,264	157,943,913			

	Amount
F. Life & Accident & Health Annual Statement:	
(1) Exhibit 5, Life Insurance Section, Total (net)	157,133,727
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	100
(3) Exhibit 5, Disability – Active Lives Section, Total (net)	350
(4) Exhibit 5, Disability – Disabled Lives Section, Total (net)	937
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net)	808,799
(6) Subtotal	157,943,913
Separate Accounts Annual Statement:	
(7) Exhibit 3, Line 0199999, Column 2	
(8) Exhibit 3, Line 0499999, Column 2	
(9) Exhibit 3, Line 0599999, Column 2	
(10) Subtotal (Lines (7) through (9))	
(11) Combined Total ((6) and (10))	\$ 157,943,913

Annual Statement for the Year 2019 of the Cincinnati Equitable Life Insurance Company  
**Notes to the Financial Statements**

**34. Premiums and Annuity Considerations Deferred and Uncollected**

A. Deferred and Uncollected Life Insurance Premiums and Annuity Considerations

Type	Gross	Net of Loading
(1) Industrial.....	\$.....	\$.....
(2) Ordinary new business.....	791,211	280,212
(3) Ordinary renewal.....	1,623,175	873,220
(4) Credit life.....	.....	.....
(5) Group life.....	.....	.....
(6) Group annuity.....	.....	.....
(7) Totals	<u>\$ 2,414,386</u>	<u>\$ 1,153,432</u>

**35. Separate Accounts - None**

**36. Loss/Claim Adjustment Expenses**

The balance in the liability for unpaid accident and health claim adjustment expenses as of December 31, 2019 and December 31, 2018 was \$0 and \$0 respectively.

The Company pays a Managing General Agent to adjust accident and health claims. The amounts attributable to prior years are unknown.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES  
 GENERAL**

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

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....  Yes [ X ]  No [ ]  N/A [ ]

1.3 State Regulating? ..... Michigan

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? .....  Yes [ ]  No [ X ]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....  Yes [ ]  No [ X ]

2.2 If yes, date of change: .....

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2018

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2013

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 11/16/2014

3.4 By what department or departments?  
 Ohio .....

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....  Yes [ ]  No [ ]  N/A [ X ]

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

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
 4.11 sales of new business? .....  Yes [ ]  No [ X ]  
 4.12 renewals? .....  Yes [ ]  No [ X ]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
 4.21 sales of new business? .....  Yes [ ]  No [ X ]  
 4.22 renewals? .....  Yes [ ]  No [ X ]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....  
 If yes, complete and file the merger history data file with the NAIC. ....  Yes [ ]  No [ X ]

5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
---------------------	------------------------	------------------------

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....  Yes [ ]  No [ X ]

6.2 If yes, give full information: .....

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....  Yes [ ]  No [ X ]

7.2 If yes,  
 7.21 State the percentage of foreign control; ..... %  
 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity
------------------	---------------------

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company**  
**GENERAL INTERROGATORIES**

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]  
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
 ..... Yes [ ] No [ X ]

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [ X ]  
 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....	.....	.....	.....	.....	.....

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
 BDO - GGrand Rapids Office  
 200 Ottawa Avenue NW, Suite 300  
 Gran Rapids, MI 49503

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]

10.2 If the response to 10.1 is yes, provide information related to this exemption:  
 .....  
 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]

10.4 If the response to 10.3 is yes, provide information related to this exemption:  
 .....  
 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]

10.6 If the response to 10.5 is no or n/a, please explain  
 .....  
 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
 Bryan Amburn, FSA, MAAA, CLU  
 Cheif Actury and Director of Life Actuarial Services  
 Michign Farm Bureau an affiliated Company

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]  
 12.11 Name of real estate holding company .....  
 12.12 Number of parcels involved .....  
 12.13 Total book/adjusted carrying value ..... \$ .....

12.2 If, yes provide explanation:  
 .....  
 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
 .....  
 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ X ] No [ ]  
 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ X ]  
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ X ]

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  
 a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
 b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
 c. Compliance with applicable governmental laws, rules and regulations;  
 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
 e. Accountability for adherence to the code.  
 14.11 If the response to 14.1 is No, please explain:  
 .....  
 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]  
 14.21 If the response to 14.2 is yes, provide information related to amendment(s).  
 .....  
 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]  
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).  
 .....

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company**  
**GENERAL INTERROGATORIES**

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans): 20.11 To directors or other officers..... \$ ..... 0  
20.12 To stockholders not officers..... \$ ..... 0  
20.13 Trustees, supreme or grand (Fraternal Only) ..... \$ ..... 0

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans): 20.21 To directors or other officers..... \$ ..... 0  
20.22 To stockholders not officers..... \$ ..... 0  
20.23 Trustees, supreme or grand (Fraternal Only) ..... \$ ..... 0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]

21.2 If yes, state the amount thereof at December 31 of the current year: 21.21 Rented from others..... \$ ..... 0  
21.22 Borrowed from others..... \$ ..... 0  
21.23 Leased from others ..... \$ ..... 0  
21.24 Other ..... \$ ..... 0

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]

22.2 If answer is yes: 22.21 Amount paid as losses or risk adjustment \$ .....  
22.22 Amount paid as expenses ..... \$ .....  
22.23 Other amounts paid ..... \$ .....  
22.24 Other ..... \$ ..... 386

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ X ] No [ ]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ ..... 386

**INVESTMENT**

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [ X ] No [ ]

24.02 If no, give full and complete information relating thereto

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? ..... Yes [ ] No [ ] N/A [ X ]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. .... \$ .....

24.06 If answer to 24.04 is no, report amount of collateral for other programs. .... \$ .....

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]

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

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [ X ]

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**GENERAL INTERROGATORIES**

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

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ ..... 0
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ ..... 0
24.103 Total payable for securities lending reported on the liability page. ....	\$ ..... 0

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). ....  Yes [ X ]  No [ ]

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

25.21 Subject to repurchase agreements .....	\$ .....
25.22 Subject to reverse repurchase agreements .....	\$ .....
25.23 Subject to dollar repurchase agreements .....	\$ .....
25.24 Subject to reverse dollar repurchase agreements .....	\$ .....
25.25 Placed under option agreements .....	\$ .....
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock .....	\$ .....
25.27 FHLB Capital Stock .....	\$ .....
25.28 On deposit with states .....	\$ ..... 1,099,344
25.29 On deposit with other regulatory bodies .....	\$ .....
25.30 Pledged as collateral - excluding collateral pledged to an FHLB .....	\$ .....
25.31 Pledged as collateral to FHLB - including assets backing funding agreements .....	\$ .....
25.32 Other .....	\$ .....

25.3 For category (25.26) provide the following:

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

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

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? .....  Yes [ ]  No [ ]  N/A [ X ]  
If no, attach a description with this statement.

LINES 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

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

26.4 If the response to 26.3 is YES, does the reporting entity utilize:

26.41 Special accounting provision of SSAP No. 108 .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ X ]
26.42 Permitted accounting practice .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ X ]
26.43 Other accounting guidance .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ X ]

26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: .....  Yes [ ]  No [ X ]

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? .....  Yes [ ]  No [ X ]

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

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? .....  Yes [ X ]  No [ ]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Fifth Third Bank .....	38 Fountain Square Plaza, Cincinnati, OH 45263 .....
U.S. Bank .....	225 Water Street, Suite 7, Jacksonville, FL 32202 .....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**GENERAL INTERROGATORIES**

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....	.....	.....

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?..... Yes [ ] No [ X ]

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

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

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
David D. Baker .....	I.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....	.....	.....	.....	.....

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

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total	.....	0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
.....	.....	.....	.....

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**GENERAL INTERROGATORIES**

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	153,096,395	160,602,575	7,506,180
30.2 Preferred stocks .....	1,185,391	1,223,315	37,924
30.3 Totals .....	154,281,786	161,825,890	7,544,104

30.4 Describe the sources or methods utilized in determining the fair values:

.....

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

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ X ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

.....

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

32.2 If no, list exceptions:

.....

33. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? ..... Yes [ X ] No [ ]

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [ X ]

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

**OTHER**

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... \$ ..... 26,100

36.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
A.M Best .....	26,100

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
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37.1 Amount of payments for legal expenses, if any? .....\$ .....7,674

37.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Dinsmore & Shohl .....	6,716

38.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....0

38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
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**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

**Life, Accident and Health Companies/Fraternal Benefit Societies:**

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [  ] No [  ]

1.2 If yes, indicate premium earned on U.S. business only ..... \$ ..... 24,445

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ ..... 0  
 1.31 Reason for excluding:  
 0 .....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ..... \$ .....

1.5 Indicate total incurred claims on all Medicare Supplement insurance. ..... \$ ..... 8,460

1.6 Individual policies:  
 Most current three years:  
 1.61 Total premium earned ..... \$ ..... 0  
 1.62 Total incurred claims ..... \$ ..... 0  
 1.63 Number of covered lives ..... 0

All years prior to most current three years  
 1.64 Total premium earned ..... \$ ..... 24,445  
 1.65 Total incurred claims ..... \$ ..... 8,460  
 1.66 Number of covered lives ..... 12

1.7 Group policies:  
 Most current three years:  
 1.71 Total premium earned ..... \$ ..... 0  
 1.72 Total incurred claims ..... \$ ..... 0  
 1.73 Number of covered lives ..... 0

All years prior to most current three years  
 1.74 Total premium earned ..... \$ ..... 0  
 1.75 Total incurred claims ..... \$ ..... 0  
 1.76 Number of covered lives ..... 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	24,445	29,436
2.2 Premium Denominator	37,146,979	37,956,916
2.3 Premium Ratio (2.1/2.2)	0.001	0.001
2.4 Reserve Numerator	7,267	6,441
2.5 Reserve Denominator	158,880,465	144,138,013
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

3.1 Does this reporting entity have Separate Accounts? ..... Yes [  ] No [  ]

3.2 If yes, has a Separate Accounts Statement been filed with this Department? ..... Yes [  ] No [  ] N/A [  ]

3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? ..... \$ .....

3.4 State the authority under which Separate Accounts are maintained:  
 .....

3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? ..... Yes [  ] No [  ]

3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? ..... Yes [  ] No [  ]

3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"? ..... \$ .....

4. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

4.1 Amount of loss reserves established by these annuities during the current year: ..... \$ .....

4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
P&C Insurance Company And Location	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

5.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

5.2 If yes, please provide the amount of custodial funds held as of the reporting date. ..... \$ .....

5.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

5.4 If yes, please provide the balance of funds administered as of the reporting date. ..... \$ .....

6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ ] N/A [ X ]

6.2 If the answer to 6.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
.....	.....	.....	.....	.....	.....	.....

7. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

7.1 Direct Premium Written ..... \$ .....
7.2 Total Incurred Claims ..... \$ .....
7.3 Number of Covered Lives .....

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ X ] No [ ]

8.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]

**Life, Accident and Health Companies Only:**

9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? ..... Yes [ X ] No [ ]

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid ..... \$ .....
9.22 Received ..... \$ .....

10.1 Does the reporting entity write any guaranteed interest contracts? ..... Yes [ ] No [ X ]

10.2 If yes, what amount pertaining to these lines is included in:

10.21 Page 3, Line 1 ..... \$ .....
10.22 Page 4, Line 1 ..... \$ .....

11. For stock reporting entities only:

11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: ..... \$ .....

12. Total dividends paid stockholders since organization of the reporting entity:

12.11 Cash ..... \$ .....
12.12 Stock ..... \$ .....

13.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as: ..... Yes [ ] No [ X ]  
 Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

13.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? ..... Yes [ ] No [ X ]

13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
13.31 Earned premium .....	.....	.....	0
13.32 Paid claims .....	.....	.....	0
13.33 Claim liability and reserve (beginning of year) .....	.....	.....	0
13.34 Claim liability and reserve (end of year) .....	.....	.....	0
13.35 Incurred claims .....	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
13.41	<\$25,000	.....	.....
13.42	\$25,000 - 99,999	.....	.....
13.43	\$100,000 - 249,999	.....	.....
13.44	\$250,000 - 999,999	.....	.....
13.45	\$1,000,000 or more	.....	.....

13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools? ..... \$ .....

**Fraternal Benefit Societies Only:**

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? ..... Yes [ ] No [ X ]

15. How often are meetings of the subordinate branches required to be held? .....

16. How are the subordinate branches represented in the supreme or governing body? .....

17. What is the basis of representation in the governing body? .....

18.1 How often are regular meetings of the governing body held? .....

18.2 When was the last regular meeting of the governing body held? .....

18.3 When and where will the next regular or special meeting of the governing body be held? .....

18.4 How many members of the governing body attended the last regular meeting? .....

18.5 How many of the same were delegates of the subordinate branches? .....

19. How are the expenses of the governing body defrayed? .....

20. When and by whom are the officers and directors elected? .....

21. What are the qualifications for membership? .....

22. What are the limiting ages for admission? .....

23. What is the minimum and maximum insurance that may be issued on any one life? .....

24. Is a medical examination required before issuing a benefit certificate to applicants? ..... Yes [ ] No [ X ]

25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? ..... Yes [ ] No [ X ]

26.1 Are notices of the payments required sent to the members? ..... Yes [ ] No [ ] N/A [ X ]

26.2 If yes, do the notices state the purpose for which the money is to be used? ..... Yes [ ] No [ X ]

27. What proportion of first and subsequent year's payments may be used for management expenses? ..... %

27.11 First Year ..... %

27.12 Subsequent Years ..... %

28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? ..... Yes [ ] No [ X ]

28.2 If so, what amount and for what purpose? ..... \$ .....

29.1 Does the reporting entity pay an old age disability benefit? ..... Yes [ ] No [ X ]

29.2 If yes, at what age does the benefit commence? .....

30.1 Has the constitution or have the laws of the reporting entity been amended during the year? ..... Yes [ ] No [ X ]

30.2 If yes, when? .....

31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? ..... Yes [ ] No [ X ]

32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? ..... Yes [ ] No [ ]

32.2 If so, was an additional reserve included in Exhibit 5? ..... Yes [ ] No [ ] N/A [ ]

32.3 If yes, explain .....

33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? ..... Yes [ ] No [ X ]

33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? ..... Yes [ ] No [ ] N/A [ X ]

34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? ..... Yes [ ] No [ X ]

35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? ..... Yes [ ] No [ X ]

35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus? .....

Date	Outstanding Lien Amount
.....	.....

**FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

\$000 omitted for amounts of life insurance

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Life Insurance in Force</b>					
(Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4) .....	226,679	208,273	187,076	165,385	141,354
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) .....	636	656	636	976	976
3. Credit life (Line 21, Col. 6) .....	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4) .....	0	0	0	0	0
5. Industrial (Line 21, Col. 2) .....	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4) .....	0	0	0	0	0
7. Total (Line 21, Col. 10) .....	227,315	208,929	187,712	166,361	142,330
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated .....				XXX	XXX
<b>New Business Issued</b>					
(Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2) .....	40,790	41,861	41,377	41,410	41,000
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2) .....	0	0	0	0	0
10. Credit life (Line 2, Col. 6) .....	0	0	0	0	0
11. Group (Line 2, Col. 9) .....	0	0	0	0	0
12. Industrial (Line 2, Col. 2) .....	0	0	0	0	0
13. Total (Line 2, Col. 10) .....	40,790	41,861	41,377	41,410	41,000
<b>Premium Income - Lines of Business</b>					
(Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2) .....	0	0	0	0	0
15.1 Ordinary-life insurance (Line 20.4, Col. 3) .....	36,965,833	37,787,770	35,972,171	36,430,104	35,041,247
15.2 Ordinary-individual annuities (Line 20.4, Col. 4) .....	156,701	139,613	33,092	100,320	203,168
16. Credit life (group and individual) (Line 20.4, Col. 5) .....	0	0	0	0	0
17.1 Group life insurance (Line 20.4, Col. 6) .....	0	0	0	0	0
17.2 Group annuities (Line 20.4, Col. 7) .....	0	0	0	0	0
18.1 A & H-group (Line 20.4, Col. 8) .....	0	0	0	0	0
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9) .....	0	0	0	0	0
18.3 A & H-other (Line 20.4, Col. 10) .....	24,445	29,533	40,369	52,638	60,035
19. Aggregate of all other lines of business (Line 20.4, Col. 11) .....	0	0	0	0	0
20. Total .....	37,146,979	37,956,916	36,045,632	36,583,062	35,304,450
<b>Balance Sheet (Pages 2 &amp; 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) .....	171,539,049	158,330,619	141,659,194	123,061,537	104,200,777
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) .....	163,278,394	148,993,707	131,850,114	114,991,000	96,136,519
23. Aggregate life reserves (Page 3, Line 1) .....	159,237,295	144,471,844	127,170,751	111,363,166	93,374,116
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1 .....				XXX	XXX
24. Aggregate A & H reserves (Page 3, Line 2) .....	2,204	2,645	6,618	10,650	11,626
25. Deposit-type contract funds (Page 3, Line 3) .....	191,554	207,151	205,336	215,491	281,174
26. Asset valuation reserve (Page 3, Line 24.01) .....	1,562,549	1,464,893	1,705,242	883,296	514,768
27. Capital (Page 3, Lines 29 and 30) .....	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
28. Surplus (Page 3, Line 37) .....	7,260,655	8,336,912	8,809,080	7,070,537	7,064,258
<b>Cash Flow (Page 5)</b>					
29. Net Cash from Operations (Line 11) .....	13,912,937	15,886,486	14,873,166	17,103,895	17,263,392
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital .....	9,823,459	10,802,099	11,514,641	8,954,165	8,579,479
31. Authorized control level risk - based capital .....	1,530,064	1,462,598	1,850,162	1,625,488	1,591,163
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b>					
(Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1) .....	92.6	90.9	89.5	88.1	87.8
33. Stocks (Lines 2.1 and 2.2) .....	2.7	3.4	9.1	9.9	9.6
34. Mortgage loans on real estate(Lines 3.1 and 3.2) .....	0.6	0.0	0.0	0.0	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3) .....	0.0	0.0	0.0	0.0	0.0
36. Cash, cash equivalents and short-term investments (Line 5) .....	3.9	5.4	1.2	1.8	2.5
37. Contract loans (Line 6) .....	0.1	0.1	0.1	0.1	0.1
38. Derivatives (Page 2, Line 7) .....	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8) .....	0.1	0.2	0.2	0.0	0.0
40. Receivables for securities (Line 9) .....	0.0	0.0	0.0	0.1	0.0
41. Securities lending reinvested collateral assets (Line 10) .....	0.0	0.0	0.0	0.0	0.0
42. Aggregate write-ins for invested assets (Line 11) .....	0.0	0.0	0.0	0.0	0.0
43. Cash, cash equivalents and invested assets (Line 12) .....	100.0	100.0	100.0	100.0	100.0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1) .....					
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1) .....	0				
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1), .....	3,246,975	3,155,826	3,079,516	3,069,924	3,338,104
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....	0	0	0	0	0
48. Affiliated mortgage loans on real estate .....					
49. All other affiliated .....					
50. Total of above Lines 44 to 49 .....	3,246,975	3,155,826	3,079,516	3,069,924	3,338,104
51. Total Investment in Parent included in Lines 44 to 49 above .....					
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2) .....	1,168,137	609,635	104,467	939,574	715,968
53. Total admitted assets (Page 2, Line 28, Col. 3) .....	171,539,049	158,330,619	141,659,194	123,061,537	104,200,777
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income) .....	5,410,195	4,696,006	4,270,831	3,719,309	3,452,142
55. Realized capital gains (losses) (Page 4, Line 34, Column 1) .....	(23,684)	760,604	(51,615)	41,132	99,569
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) .....	112,912	(829,796)	628,244	26,139	(597,178)
57. Total of above Lines 54, 55 and 56 .....	5,499,423	4,626,814	4,847,460	3,786,580	2,954,533
<b>Benefits and Reserve Increases (Page 6)</b>					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 and 8) .....	21,610,678	19,700,516	19,009,420	16,368,394	14,413,365
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) .....	8,460	12,279	24,474	33,593	31,321
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) .....	14,779,167	17,314,809	15,881,913	18,035,336	17,528,941
61. Increase in A & H reserves (Line 19, Col. 6) .....	(441)	(3,973)	(4,032)	0	336
62. Dividends to policyholders and refunds to members (Line 30, Col. 1) .....	510	568	635	697	943
<b>Operating Percentages</b>					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.0 .....	18.4	17.2	18.2	17.7	18.4
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0 .....	0.8	1.2	1.0	1.3	1.2
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) .....	32.8	28.1	50.6	62.0	52.7
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2) .....	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2) .....	24.0	23.1	23.1	21.8	21.2
<b>A &amp; H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2) .....	0	0	0	0	0
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2) .....	0	0	0	0	0
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2) .....	1,899	2,816	3,645	8,982	8,550
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2) .....	6,441	8,753	7,397	9,733	13,110
<b>Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)</b>					
72. Industrial life (Page 6.1, Col. 2) .....	0	0	0	0	0
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12) .....	(751,563)	(1,123,550)	(851,083)	(376,976)	(153,489)
74. Ordinary - individual annuities (Page 6, Col. 4) .....	17,357	2,736	(753)	(13,498)	9,413
75. Ordinary-supplementary contracts .....	XXX	0	0	0	0
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7) .....	0	0	0	0	0
77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9) .....	0	0	0	0	0
78. Group annuities (Page 6, Col. 5) .....	0	0	0	0	0
79. A & H-group (Page 6.5, Col. 3) .....	0	0	0	0	0
80. A & H-credit (Page 6.5, Col. 10) .....	0	0	0	0	0
81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10) .....	8,548	11,657	8,589	6,616	13,306
82. Aggregate of all other lines of business (Page 6, Col. 8) .....	0	0	0	0	0
83. Fraternal (Page 6, Col. 7) .....	0				
84. Total (Page 6, Col. 1) .....	(725,658)	(1,109,157)	(843,247)	(383,858)	(130,770)

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? .....

Yes [ ] No [ ]

If no, please explain: .....

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

## EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group		10 Total Amount of Insurance	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	Number of			
							7 Policies	8 Certificates		
1. In force end of prior year .....	.0	0	35,944	208,929	.0	0	0	0	208,929	
2. Issued during year .....		0	7,426	40,790		0			40,790	
3. Reinsurance assumed .....									0	
4. Revived during year .....									0	
5. Increased during year (net) .....				2,915					2,915	
6. Subtotals, Lines 2 to 5 .....	0	0	7,426	43,705	0	0	0	0	43,705	
7. Additions by dividends during year .....	XXX		XXX		XXX		XXX	XXX	0	
8. Aggregate write-ins for increases .....	0	0	0	0	0	0	0	0	0	
9. Totals (Lines 1 and 6 to 8) .....	0	0	43,370	252,634	0	0	0	0	252,634	
Deductions during year:										
10. Death .....			3,664	21,736			XXX		21,736	
11. Maturity .....							XXX		0	
12. Disability .....							XXX		0	
13. Expiry .....			282	1,765					1,765	
14. Surrender .....			.51	.277					.277	
15. Lapse .....			.204	1,534					1,534	
16. Conversion .....							XXX	XXX	0	
17. Decreased (net) .....				7					7	
18. Reinsurance .....									0	
19. Aggregate write-ins for decreases .....	0	0	0	0	0	0	0	0	0	
20. Totals (Lines 10 to 19) .....	0	0	4,201	25,319	0	0	0	0	25,319	
21. In force end of year (b) (Line 9 minus Line 20) .....	0	0	39,169	227,315	0	0	0	0	227,315	
22. Reinsurance ceded end of year .....	XXX		XXX	118	XXX		XXX	XXX	118	
23. Line 21 minus Line 22 .....	XXX	0	XXX	227,197	XXX	(a) 0	XXX	XXX	227,197	
<b>DETAILS OF WRITE-INS</b>										
0801. ....										
0802. ....										
0803. ....										
0898. Summary of remaining write-ins for Line 8 from overflow page .....	0	0	0	0	0	0	0	0	0	
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....	0	0	0	0	0	0	0	0	0	
1901. ....										
1902. ....										
1903. ....										
1998. Summary of remaining write-ins for Line 19 from overflow page .....	0	0	0	0	0	0	0	0	0	
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above) .....	0	0	0	0	0	0	0	0	0	

Life, Accident and Health Companies Only:

(a) Group \$ ..... ; Individual \$ .....

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates ....., Amount \$ .....

Additional accidental death benefits included in life certificates were in amount \$ ....., Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [ ] No [ ]

If not, how are such expenses met?

**EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance) (Continued)

**ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR**

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends .....	XXX		XXX	
25. Other paid-up insurance .....				1,027
26. Debit ordinary insurance .....	XXX	XXX		1,678

**ADDITIONAL INFORMATION ON ORDINARY INSURANCE**

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies - decreasing .....			.5	346
28. Term policies - other .....			.20	250
29. Other term insurance - decreasing .....	XXX		XXX	
30. Other term insurance .....	XXX		XXX	
31. Totals (Lines 27 to 30) .....	0	0	.25	596
Reconciliation to Lines 2 and 21:				
32. Term additions .....	XXX		XXX	
33. Totals, extended term insurance .....	XXX	XXX	10	40
34. Totals, whole life and endowment .....	7,426	40,790	39,134	226,679
35. Totals (Lines 31 to 34) .....	7,426	40,790	39,169	227,315

**CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS**

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial .....				
37. Ordinary .....	40,790		226,467	848
38. Credit Life (Group and Individual) .....				
39. Group .....				
40. Totals (Lines 36 to 39) .....	40,790	0	226,467	848

**ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE**

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies .....			XXX	
42. Number in force end of year if the number under 41 above is discounted on a pro-rata basis .....		XXX		XXX
43. Federal Employees' Group Life Insurance included in Line 21 .....				
44. Servicemen's Group Life Insurance included in Line 21 .....				
45. Group Permanent Insurance included in Line 21 .....				

**ADDITIONAL ACCIDENTAL DEATH BENEFITS**

46. Amount of additional accidental death benefits in force end of year under ordinary policies	17
---	----

**BASIS OF CALCULATION OF ORDINARY TERM INSURANCE**

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income, Mortgage Life, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Child, etc., policies and riders, included above.	
47.1 .....	
47.2 .....	

**NONE****POLICIES WITH DISABILITY PROVISIONS**

Disability Provisions	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium .....			.5	.40				
49. Disability Income .....			XXX	XXX				
50. Extended Benefits .....								
51. Other .....								
52. Total .....	0 (a)	0	5 (a)	40	0 (a)	0	0 (a)	0

(a) See the Annual Audited Financial Reports section of the annual statement instructions

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

**SUPPLEMENTARY CONTRACTS**

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year .....				
2. Issued during year .....				
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Total (Lines 1 to 4) .....				
Deductions during year:				
6. Decreased (net) .....				
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....				
9. In force end of year .....				
10. Amount on deposit .....				
11. Income now payable .....				
12. Amount of income payable .....	(a)	(a)	(a)	(a)

**NONE**

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year .....	0	188	0	0
2. Issued during year .....		29		
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Totals (Lines 1 to 4) .....	0	217	0	0
Deductions during year:				
6. Decreased (net) .....		32		
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....	0	32	0	0
9. In force end of year .....	0	185	0	0
Income now payable:				
10. Amount of income payable .....	(a)	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance .....	XXX	(a)	1,258,271	(a)
Deferred not fully paid:				
12. Account balance .....	XXX	(a)	XXX	(a)

**ACCIDENT AND HEALTH INSURANCE**

	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year .....	0		0		12	
2. Issued during year .....						
3. Reinsurance assumed .....						
4. Increased during year (net) .....		XXX		XXX		XXX
5. Totals (Lines 1 to 4) .....	0	XXX	0	XXX	12	XXX
Deductions during year:						
6. Conversions .....		XXX	XXX	XXX	XXX	XXX
7. Decreased (net) .....		XXX		XXX	2	XXX
8. Reinsurance ceded .....		XXX		XXX		XXX
9. Totals (Lines 6 to 8) .....	0	XXX	0	XXX	2	XXX
10. In force end of year .....	0	(a)	0	(a)	10	(a)

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

			1	2
			Deposit Funds Contracts	Dividend Accumulations Contracts
1. In force end of prior year .....			0	40
2. Issued during year .....				
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Totals (Lines 1 to 4) .....			0	40
Deductions During Year:				
6. Decreased (net) .....				5
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....			0	5
9. In force end of year .....			0	35
10. Amount of account balance .....			(a)	(a) 191,554

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)**

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					7 Deposit-Type Contracts
		2 Life Contracts	3 Life Insurance Premiums	4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	
1. Alabama	AL	N				0	
2. Alaska	AK	N				0	
3. Arizona	AZ	N				0	
4. Arkansas	AR	N				0	
5. California	CA	N				0	
6. Colorado	CO	N				0	
7. Connecticut	CT	N				0	
8. Delaware	DE	N				0	
9. District of Columbia	DC	N				0	
10. Florida	FL	N				0	
11. Georgia	GA	L	8,962,469	16,713	.0	8,979,182	0
12. Hawaii	HI	N				0	
13. Idaho	ID	N				0	
14. Illinois	IL	N				0	
15. Indiana	IN	L	11,795,445	123,208	.0	11,918,653	0
16. Iowa	IA	N				0	
17. Kansas	KS	N				0	
18. Kentucky	KY	L	6,455,781	15,005	.0	6,470,786	0
19. Louisiana	LA	N				0	
20. Maine	ME	N				0	
21. Maryland	MD	N				0	
22. Massachusetts	MA	N				0	
23. Michigan	MI	N				0	
24. Minnesota	MN	N				0	
25. Mississippi	MS	L	400,019	0	.0	400,019	0
26. Missouri	MO	N				0	
27. Montana	MT	N				0	
28. Nebraska	NE	N				0	
29. Nevada	NV	N				0	
30. New Hampshire	NH	N				0	
31. New Jersey	NJ	N				0	
32. New Mexico	NM	N				0	
33. New York	NY	N				0	
34. North Carolina	NC	N				0	
35. North Dakota	ND	N				0	
36. Ohio	OH	L	8,821,998	1,775	24,445	.0	8,848,218
37. Oklahoma	OK	N				0	
38. Oregon	OR	N				0	
39. Pennsylvania	PA	N				0	
40. Rhode Island	RI	N				0	
41. South Carolina	SC	N				0	
42. South Dakota	SD	N				0	
43. Tennessee	TN	L	388,919	0	.0	388,919	0
44. Texas	TX	N				0	
45. Utah	UT	N				0	
46. Vermont	VT	N				0	
47. Virginia	VA	N				0	
48. Washington	WA	N				0	
49. West Virginia	WV	N				0	
50. Wisconsin	WI	N				0	
51. Wyoming	WY	N				0	
52. American Samoa	AS	N				0	
53. Guam	GU	N				0	
54. Puerto Rico	PR	N				0	
55. U.S. Virgin Islands	VI	N				0	
56. Northern Mariana Islands	MP	N				0	
57. Canada	CAN	N				0	
58. Aggregate Other Alien	OT	XXX	0	0	0	0	0
59. Subtotal		XXX	36,824,631	156,701	24,445	.0	37,005,777
90. Reporting entity contributions for employee benefits plans		XXX					0
91. Dividends or refunds applied to purchase paid-up additions and annuities		XXX					0
92. Dividends or refunds applied to shorten endowment or premium paying period		XXX					0
93. Premium or annuity considerations waived under disability or other contract provisions		XXX					0
94. Aggregate or other amounts not allocable by State		XXX	0	0	0	0	0
95. Totals (Direct Business)		XXX	36,824,631	156,701	24,445	.0	37,005,777
96. Plus reinsurance assumed		XXX					0
97. Totals (All Business)		XXX	36,824,631	156,701	24,445	.0	37,005,777
98. Less reinsurance ceded		XXX		5,100			5,100
99. Totals (All Business) less Reinsurance Ceded		XXX	36,819,531	156,701	(c) 24,445	0	37,000,677
DETAILS OF WRITE-INS							
58001.		XXX					
58002.		XXX					
58003.		XXX					
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX	0	0	0	0	0
9401.		XXX					
9402.		XXX					
9403.		XXX					
9498. Summary of remaining write-ins for Line 94 from overflow page		XXX	0	0	0	0	0
9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)		XXX	0	0	0	0	0

(a) Active Status Counts:

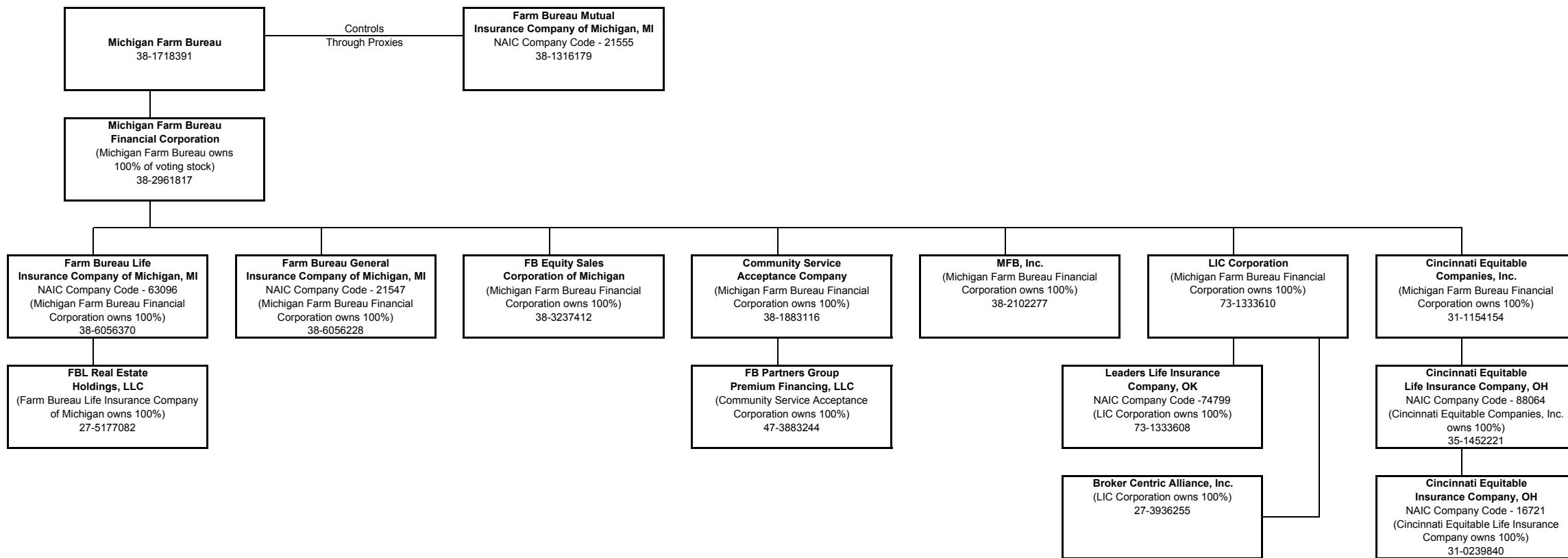
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 6 R - Registered - Non-domiciled RRGs..... 0  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0  
N - None of the above - Not allowed to write business in the state..... 51

(b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations  
Direct Writing

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4, and 16.4, Cols. 8, 9, 10, or with Schedule H, Part 1, Line 1, indicate which: Schedule H, Part 1, Line 1.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company

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



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Cincinnati Equitable Life Insurance Company  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
2504. Insurance Premium Receivable .....	1,302			1,302
2597. Summary of remaining write-ins for Line 25 from overflow page	1,302	0	1,302	0

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