





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

## QUARTERLY STATEMENT

AS OF MARCH 31, 2020  
OF THE CONDITION AND AFFAIRS OF THE

# Cincinnati Equitable Life Insurance Company

NAIC Group Code 0838 (Current) 0838 (Prior) NAIC Company Code 88064 Employer's ID Number 35-1452221  
of Ohio State of Domicile or Port of Entry OH

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  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

Main Administrative Office 525 Vine Street, Suite 1925  
(Street and Number) (City or Town, State, Country and Zip Code)  
Cincinnati, OH, US 45202, 513-621-1826  
(Street and Number)

(City or Town, State, County 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](http://www.cineqlife.com)

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

## OFFICERS

President Carl Joseph Bednarski # Secretary Andrew James Kok  
Executive Vice President Donald Eugene Simon # Treasurer David Duane Baker

**OTHER**

Thomas Alan Schrader, Chief Operating Officer, Gregory Allen Baker, Chief Financial Officer, Tonya Gail Crawford, Vice President of Sales & Marketing

#### **DIRECTORS OR TRUSTEES**

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

State of Michigan SS: \_\_\_\_\_  
County of Eaton

**Tonya Gail Crawford, Vice President of Sales & Marketing**

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.

Thomas Alan Schrote  
Chief Operating Officer

Andrew James Kok  
Secretary

David Duane Baker  
Treasurer

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_

a. Is this an original filing? ..... Yes [ ] No [ X ]

b. If no,

1. State the amendment number.....1
2. Date filed .....09/08/2020
3. Number of pages attached..... 1

**SCHEDULE DA - PART 1**

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals		XXX			

**SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	
2. Cost of short-term investments acquired .....		3,233,796
3. Accrual of discount .....		71,204
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....		
6. Deduct consideration received on disposals .....		3,305,000
7. Deduct amortization of premium .....		
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	0	0
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)	0	0