

**We are amending our original filing to account for additional premium taxes of \$103,660 less Federal Income Taxes of \$11,310. The additional tax is due to a loss of our Ohio premium tax credit. As a part of the Michigan Farm Bureau group of companies, our consolidated premium exceeds the Ohio credit threshold. The only pages that have changes are pages 2, 3, 4, 6, 11 & 22, as well as footnote #1 and \$9.**



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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2020  
OF THE CONDITION AND AFFAIRS OF THE

Cincinnati Equitable Life Insurance Company

NAIC Group Code

0067

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

Cincinnati, OH, US 45202

(Street and Number)

(City or Town, State, Country and Zip Code)

513-621-1826

(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

Cincinnati, OH, US 45202

(Street and Number)

(City or Town, State, Country and Zip Code)

513-621-1826

(Area Code) (Telephone Number)

Internet Website Address

www.cineqlife.com

Statutory Statement Contact

Gregory Allen Baker

513-621-1826

(Name)

(Area Code) (Telephone Number)

gbaker@1826.com

513-621-4531

(E-mail Address)

(FAX Number)

OFFICERS

President

Carl Joseph Bednarski #

Secretary

Andrew James Kok

Executive Vice President

Donald Eugene Simon #

Treasurer

David Duane Baker

OTHER

Thomas Alan Schrote #, Chief Operating Officer

Gregory Allen Baker, Chief Financial Officer

Tonya Gail Crawford, Vice President of Sales & Marketing

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

State of

Michigan

County of

Eaton

SS:

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

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 .....03/18/2021

3. Number of pages attached..... 7

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

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) .....	161,514,554		161,514,554	153,096,395
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	1,185,231		1,185,231	1,185,391
2.2 Common stocks .....	3,288,605		3,288,605	3,246,975
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	4,226,219		4,226,219	1,000,000
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 (\$ .....8,747 , Schedule E - Part 1), cash equivalents (\$ .....2,728,583 , Schedule E - Part 2) and short-term investments (\$ ..... , Schedule DA) .....	2,737,330		2,737,330	6,371,269
6. Contract loans (including \$ ..... premium notes) .....	226,136		226,136	204,899
7. Derivatives (Schedule DB) .....			0	0
8. Other invested assets (Schedule BA) .....	490,291		490,291	242,271
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) .....	173,668,367	0	173,668,367	165,347,200
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	1,457,346		1,457,346	1,379,627
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	122		122	127
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	1,210,464		1,210,464	1,153,305
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 .....	135,614		135,614	58,485
18.2 Net deferred tax asset .....	2,775,659	1,497,918	1,277,741	1,239,155
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....	105,176		105,176	907
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	32,732	32,732	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	33		33	386
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	2,496,473	0	2,496,473	2,359,857
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	181,881,986	1,530,650	180,351,336	171,539,049
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	181,881,986	1,530,650	180,351,336	171,539,049
DETAILS OF WRITE-INS				
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 .....	2,232,083		2,232,083	2,191,931
2502. Premium Receivable .....	264,390		264,390	166,624
2503. Insurance Premium Receivable .....			0	1,302
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	2,496,473	0	2,496,473	2,359,857

LIABILITIES, SURPLUS AND OTHER FUNDS

	1	2
	Current Year	Prior Year
1. Aggregate reserve for life contracts \$ ..... 168,443,266 (Exh. 5, Line 9999999) less \$ ..... included in Line 6.3 (including \$ ..... Modco Reserve) .....	168,443,266	159,237,295
2. Aggregate reserve for accident and health contracts (including \$ ..... Modco Reserve) .....	1,763	2,204
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ ..... Modco Reserve) .....	195,563	191,554
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11) .....	652,059	444,702
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11) .....	4,932	5,063
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) .....	469	510
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ ..... Modco) .....		
6.3 Coupons and similar benefits (including \$ ..... Modco) .....	2,025	2,136
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) .....	494,139	459,905
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) .....	636,920	730,396
10. Commissions to agents due or accrued-life and annuity contracts \$ ..... accident and health \$ ..... and deposit-type contract funds \$ ..... .....	180,941	156,203
11. Commissions and expense allowances payable on reinsurance assumed .....		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7) .....	277,487	348,083
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) .....	231,564	133,246
15.1 Current federal and foreign income taxes, including \$ ..... on realized capital gains (losses) .....		
15.2 Net deferred tax liability .....		
16. Unearned investment income .....	4,625	4,548
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) .....	1,720,925	1,562,549
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) .....	172,846,678	163,278,394
27. From Separate Accounts Statement .....		
28. Total liabilities (Lines 26 and 27) .....	172,846,678	163,278,394
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) .....	(3,275,573)	(2,519,576)
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) .....	6,504,658	7,260,655
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55) .....	7,504,658	8,260,655
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3) .....	180,351,336	171,539,049
DETAILS OF WRITE-INS		
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 2020 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) .....	36,106,640	37,146,979
2. Considerations for supplementary contracts with life contingencies .....	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17) .....	6,045,980	5,410,195
4. Amortization of Interest Maintenance Reserve (IMR, Line 5) .....	118,290	124,525
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 .....	394,834	474,363
9. Total (Lines 1 to 8.3) .....	42,665,744	43,156,062
10. Death benefits .....	26,212,555	21,359,382
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8) .....	197,520	170,555
13. Disability benefits and benefits under accident and health contracts .....	14,363	8,460
14. Coupons, guaranteed annual pure endowments and similar benefits .....	1,950	2,138
15. Surrender benefits and withdrawals for life contracts .....	261,251	78,603
16. Group conversions .....	0	0
17. Interest and adjustments on contract or deposit-type contract funds .....	136	417
18. Payments on supplementary contracts with life contingencies .....	0	0
19. Increase in aggregate reserves for life and accident and health contracts .....	9,205,529	14,765,010
20. Totals (Lines 10 to 19) .....	35,893,304	36,384,565
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) .....	4,223,203	4,375,358
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) .....	2,389,818	2,478,142
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) .....	742,373	673,639
25. Increase in loading on deferred and uncollected premiums .....	(46,001)	63,633
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0	0
27. Aggregate write-ins for deductions .....	6,419	6,837
28. Totals (Lines 20 to 27) .....	43,209,116	43,982,174
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	(543,372)	(826,112)
30. Dividends to policyholders and refunds to members .....	453	510
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	(543,825)	(826,622)
32. Federal and foreign income taxes incurred (excluding tax on capital gains) .....	148,022	(100,964)
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) .....	(691,847)	(725,658)
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ .....(368) (excluding taxes of \$ .....6,593 transferred to the IMR) .....	(1,386)	(23,684)
35. Net income (Line 33 plus Line 34) .....	(693,233)	(749,342)
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) .....	8,260,655	9,336,912
37. Net income (Line 35) .....	(693,233)	(749,342)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....10,248 .....	38,550	112,912
39. Change in net unrealized foreign exchange capital gain (loss) .....	0	0
40. Change in net deferred income tax .....	419,575	216,332
41. Change in nonadmitted assets .....	(362,513)	(558,502)
42. Change in liability for reinsurance in unauthorized and certified companies .....	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease .....	0	0
44. Change in asset valuation reserve .....	(158,376)	(97,657)
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 .....	0	0
47. Other changes in surplus in Separate Accounts Statement .....	0	0
48. Change in surplus notes .....	0	0
49. Cumulative effect of changes in accounting principles .....	0	0
50. Capital changes:		
50.1 Paid in .....	0	0
50.2 Transferred from surplus (Stock Dividend) .....	0	0
50.3 Transferred to surplus .....	0	0
51. Surplus adjustment:		
51.1 Paid in .....	0	0
51.2 Transferred to capital (Stock Dividend) .....	0	0
51.3 Transferred from capital .....	0	0
51.4 Change in surplus as a result of reinsurance .....	0	0
52. Dividends to stockholders .....	0	0
53. Aggregate write-ins for gains and losses in surplus .....	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53) .....	(755,997)	(1,076,256)
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) .....	7,504,658	8,260,655
DETAILS OF WRITE-INS		
08.301. Advanced Funding Fees .....	394,834	474,363
08.302. ....	0	0
08.303. ....	0	0
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) .....	394,834	474,363
2701. Change in Dividend & Coupon Reserves .....	6,419	6,837
2702. ....	0	0
2703. ....	0	0
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) .....	6,419	6,837
5301. ....	0	0
5302. ....	0	0
5303. ....	0	0
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	0

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance .....	36,129,721	37,000,677
2. Net investment income .....	6,193,710	5,509,820
3. Miscellaneous income .....	394,834	474,363
4. Total (Lines 1 through 3) .....	42,718,265	42,984,860
5. Benefit and loss related payments .....	26,480,660	21,552,835
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	7,291,210	7,491,439
8. Dividends paid to policyholders .....	494	587
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	231,379	27,062
10. Total (Lines 5 through 9) .....	34,003,743	29,071,923
11. Net cash from operations (Line 4 minus Line 10) .....	8,714,522	13,912,937
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	7,614,518	11,083,248
12.2 Stocks .....	0	1,577,583
12.3 Mortgage loans .....	68,081	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 .....	(1,599)	0
12.7 Miscellaneous proceeds .....	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	7,681,000	12,660,831
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	16,235,630	25,945,267
13.2 Stocks .....	0	717,979
13.3 Mortgage loans .....	3,294,300	1,000,000
13.4 Real estate .....	0	0
13.5 Other invested assets .....	250,000	0
13.6 Miscellaneous applications .....	0	483,000
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	19,779,930	28,146,246
14. Net increase (decrease) in contract loans and premium notes .....	21,237	31,989
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(12,120,166)	(15,517,405)
Cash from Financing and Miscellaneous Sources		
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 .....	4,009	(15,597)
16.5 Dividends to stockholders .....	0	0
16.6 Other cash provided (applied) .....	(232,304)	(246,650)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(228,295)	(262,247)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(3,633,939)	(1,866,714)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	6,371,269	8,237,983
19.2 End of year (Line 18 plus Line 19.1) .....	2,737,330	6,371,269

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

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

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

	1	2	3	4	5	6	7	8	9
	Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Other Lines of Business	YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts .....	36,106,640	36,011,106	0	76,232		19,302			0
2. Considerations for supplementary contracts with life contingencies .....	0	XXX	XXX			XXX	XXX		XXX
3. Net investment income .....	6,045,980	6,003,502	0	42,478		0			0
4. Amortization of Interest Maintenance Reserve (IMR) .....	118,289	118,289	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 .....	394,834	394,834	0	0	0	0		0	0
9. Totals (Lines 1 to 8.3) .....	42,665,743	42,527,731	0	118,710	0	19,302	0	0	0
10. Death benefits .....	26,212,555	26,212,555	0	0		XXX	XXX		0
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0	0	0	0		XXX	XXX		0
12. Annuity benefits .....	197,520	XXX	XXX	197,520		XXX	XXX		XXX
13. Disability benefits and benefits under accident and health contracts .....	14,363	0	0	0		14,363	XXX		0
14. Coupons, guaranteed annual pure endowments and similar benefits .....	1,950	1,950	0	0		0	XXX		0
15. Surrender benefits and withdrawals for life contracts .....	261,251	261,251	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 .....	136	136	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 .....	9,205,529	9,293,409	0	(87,439)		(441)	XXX		0
20. Totals (Lines 10 to 19) .....	35,893,304	35,769,301	0	110,081	0	13,922	XXX	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	4,223,203	4,219,841		467		2,895	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 .....	2,389,818	2,383,189	0	5,055		1,574			0
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	742,373	742,216	0	0		157			0
25. Increase in loading on deferred and uncollected premiums .....	(46,001)	(46,001)	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 .....	6,419	6,419	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	43,209,116	43,074,965	0	115,603	0	18,548	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	(543,373)	(547,234)	0	3,107	0	754	0	0	0
30. Dividends to policyholders and refunds to members .....	453	453	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) .....	(543,826)	(547,687)	0	3,107	0	754	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains) .....	148,022	147,289	0	590		143			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) .....	(691,848)	(694,976)	0	2,517	0	611	0	0	0
34. Policies/certificates in force end of year .....	41,870	41,681	0	181		8	XXX		0
<b>DETAILS OF WRITE-INS</b>									
08.301. Advanced Funeral Funding .....	394,834	394,834							
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) .....	394,834	394,834	0	0	0	0	0	0	0
2701. Chg Div & Coupon Reserves .....	6,419	6,419							
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) .....	6,419	6,419	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)**

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c)	Other Individual Life	YRT Mortality Risk Only
1. Premiums for life contracts (a) .....	36,011,106		36,011,106									
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	6,003,502		6,003,502									
4. Amortization of Interest Maintenance Reserve (IMR) .....	118,289		118,289									
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 .....	394,834	0	394,834	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	42,527,731	0	42,527,731	0	0	0	0	0	0	0	0	0
10. Death benefits .....	26,212,555		26,212,555									
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 .....	1,950		1,950									
15. Surrender benefits and withdrawals for life contracts .....	261,251		261,251									
16. Group conversions .....	.0											
17. Interest and adjustments on contract or deposit-type contract funds .....	136		136									
18. Payments on supplementary contracts with life contingencies .....	.0											
19. Increase in aggregate reserves for life and accident and health contracts .....	9,293,409		9,293,409									
20. Totals (Lines 10 to 19) .....	35,769,301	0	35,769,301	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	4,219,841	0	4,219,841									XXX
22. Commissions and expense allowances on reinsurance assumed .....	.0	0										
23. General insurance expenses .....	2,383,189		2,383,189									
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	742,216		742,216									
25. Increase in loading on deferred and uncollected premiums .....	(46,001)		(46,001)									
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	.0											
27. Aggregate write-ins for deductions .....	6,419	0	6,419	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27) .....	43,074,965	0	43,074,965	0	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) .....	(547,234)	0	(547,234)	0	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members .....	453		453									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	(547,687)	0	(547,687)	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains) .....	147,289		147,289									
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) .....	(694,976)	0	(694,976)	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year .....	41,681		41,681									
<b>DETAILS OF WRITE-INS</b>												
08.301. Advanced Funeral Funding .....	394,834		394,834									
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) .....	394,834	0	394,834	0	0	0	0	0	0	0	0	0
2701. Chg in Div & Coupon Reserves .....	6,419		6,419									
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) .....	6,419	0	6,419	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 2020 OF THE Cincinnati Equitable Life Insurance Company  
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE INSURANCE (c)

	1	2	3	4	5	6	7	8	9
	Total	Whole Life	Term Life	Universal Life	Variable Life	Variable Universal Life	Credit Life (d)	Other Group Life (a)	YRT Mortality Risk Only
1. Premiums for life contracts (b)									
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									
DETAILS OF WRITE-INS									
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 2020 OF THE Cincinnati Equitable Life Insurance Company

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES (a)**

	1  Total	Deferred				6  Life Contingent Payout (Immediate and Annuityizations)	7  Other Annuities
		2  Fixed Annuities	3  Indexed Annuities	4  Variable Annuities with Guarantees	5  Variable Annuities Without Guarantees		
1. Premiums for individual annuity contracts .....	76,232						76,232
2. Considerations for supplementary contracts with life contingencies .....	0	XXX	XXX	XXX	XXX		XXX
3. Net investment income .....	42,478						42,478
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) .....	118,710	0	0	0	0	0	118,710
10. Death benefits .....	0						
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0						
12. Annuity benefits .....	197,520						197,520
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 .....	(87,439)						(87,439)
20. Totals (Lines 10 to 19) .....	110,081	0	0	0	0	0	110,081
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	467						467
22. Commissions and expense allowances on reinsurance assumed .....	0						
23. General insurance expenses .....	5,055						5,055
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) .....	115,603	0	0	0	0	0	115,603
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	3,107	0	0	0	0	0	3,107
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) .....	3,107	0	0	0	0	0	3,107
32. Federal income taxes incurred (excluding tax on capital gains) .....	590						590
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) .....	2,517	0	0	0	0	0	2,517
34. Policies/certificates in force end of year .....	181						181
DETAILS OF WRITE-INS							
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 which columns are affected. ....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company  
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP ANNUITIES (a)

	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		
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 .....							
DETAILS OF WRITE-INS							
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. ....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company  
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)

	1	Comprehensive		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Premiums for accident and health contracts .....	19,302												19,302
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												
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
Totals (Lines 1 to 8.3) .....	19,302	0	0	0	0	0	0	0	0	0	0	0	19,302
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 .....	14,363												14,363
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)
Totals (Lines 10 to 19) .....	13,922	0	0	0	0	0	0	0	0	0	0	0	13,922
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	2,895									0			2,895
22. Commissions and expense allowances on reinsurance assumed .....	0									0			
23. General insurance expenses .....	1,574												1,574
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	157												157
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
Totals (Lines 20 to 27) .....	18,548	0	0	0	0	0	0	0	0	0	0	0	18,548
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28) .....	754	0	0	0	0	0	0	0	0	0	0	0	754
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) .....	754	0	0	0	0	0	0	0	0	0	0	0	754
32. Federal income taxes incurred (excluding tax on capital gains) .....	143												143
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) .....	611	0	0	0	0	0	0	0	0	0	0	0	611
34. Policies/certificates in force end of year .....	8												8
DETAILS OF WRITE-INS													
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	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	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	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 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. ....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE (a)**

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life <sup>(b)</sup> (N/A Fraternal)	Other Individual Life	YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year .....	157,943,914	0	157,943,914	0	0	0	0	0	0	0	0	0
2. Tabular net premiums or considerations .....	20,983,980		20,983,980									
3. Present value of disability claims incurred .....	0											
4. Tabular interest .....	5,540,587		5,540,587									
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) .....	184,468,481	0	184,468,481	0	0	0	0	0	0	0	0	0
9. Tabular cost .....	876,583		876,583									
10. Reserves released by death .....	16,091,374		16,091,374									
11. Reserves released by other terminations (net) .....	263,201		263,201									
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) .....	17,231,158	0	17,231,158	0	0	0	0	0	0	0	0	0
15. Reserve December 31 of current year .....	167,237,323	0	167,237,323	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 .....	0											
17. Amount Available for Policy Loans Based upon Line 16 CSV .....	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. ....

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE (a)**

**(N/A Fraternal)**

	1	2	3	4	5	6	7	8	9
	Total	Whole Life	Term Life	Variable Life	Universal Life	Variable Universal Life	Credit Life <sup>(b)</sup>	Other Group Life	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 .....									

(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 2020 OF THE Cincinnati Equitable Life Insurance Company

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)**

	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 .....	1,293,382	1,293,382	0	0	0	0	0
2. Tabular net premiums or considerations .....	76,232	76,232					
3. Present value of disability claims incurred .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest .....	33,849	33,849					
5. Tabular less actual reserve released .....	0						
6. Increase in reserve on account of change in valuation basis .....	0						
7. Other increases (net) .....	0						
8. Totals (Lines 1 to 7) .....	1,403,463	1,403,463	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) .....	0						
12. Annuity, supplementary contract and disability payments involving life contingencies .....	197,520	197,520					
13. Net transfers to or (from) Separate Accounts .....	0						
14. Total Deductions (Lines 9 to 13) .....	197,520	197,520	0	0	0	0	0
15. Reserve December 31 of current year	1,205,943	1,205,943	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV Ending balance December 31, current year .....	1,169,020	1,169,020					
17. Amount Available for Policy Loans Based upon Line 16 CSV	1,134,623	1,134,623					

(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 2020 OF THE Cincinnati Equitable Life Insurance Company

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES (a)**

**(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 .....							
3. Present value of disability claims incurred .....	xxx	xxx	xxx	xxx	xxx	xxx	xxx
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	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. ....



EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds .....	(a) .....20,724	.....19,471
1.1	Bonds exempt from U.S. tax .....	(a) .....	.....
1.2	Other bonds (unaffiliated) .....	(a) .....5,701,260	.....5,780,963
1.3	Bonds of affiliates .....	(a) .....	.....
2.1	Preferred stocks (unaffiliated) .....	(b) .....54,242	.....54,242
2.11	Preferred stocks of affiliates .....	(b) .....	.....
2.2	Common stocks (unaffiliated) .....	.....	.....
2.21	Common stocks of affiliates .....	.....	.....
3.	Mortgage loans .....	(c) .....91,695	.....91,695
4.	Real estate .....	(d) .....	.....
5	Contract loans .....	.....4,371	.....13,545
6	Cash, cash equivalents and short-term investments .....	(e) .....25,869	.....17,638
7	Derivative instruments .....	(f) .....	.....
8.	Other invested assets .....	.....11,296	.....18,796
9.	Aggregate write-ins for investment income .....	.....293,482	.....293,482
10.	Total gross investment income .....	6,202,938	6,289,831
11.	Investment expenses .....		(g) .....243,851
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) .....		.....243,851
17.	Net investment income (Line 10 minus Line 16)		6,045,980
DETAILS OF WRITE-INS			
0901.	Service Fee Income .....	.....95,375	.....95,375
0902.	Keyman Policy Surrender .....	.....193,484	.....193,484
0903.	Other .....	.....4,623	.....4,623
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)	293,482	293,482
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 \$ .....141,885 accrual of discount less \$ .....383,261 amortization of premium and less \$ .....39,900 paid for accrued interest on purchases.
- (b) Includes \$ .....0 accrual of discount less \$ .....160 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 \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... 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	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds .....	.....0	.....0	.....0	.....0	.....0
1.1	Bonds exempt from U.S. tax .....	.....0	.....0	.....0	.....0	.....0
1.2	Other bonds (unaffiliated) .....	.....31,256	.....0	.....31,256	.....7,168	.....0
1.3	Bonds of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.1	Preferred stocks (unaffiliated) .....	.....0	.....0	.....0	.....0	.....0
2.11	Preferred stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.2	Common stocks (unaffiliated) .....	.....0	.....0	.....0	.....0	.....0
2.21	Common stocks of affiliates .....	.....0	.....0	.....0	.....41,630	.....0
3.	Mortgage loans .....	.....0	.....0	.....0	.....0	.....0
4.	Real estate .....	.....0	.....0	.....0	.....0	.....0
5.	Contract loans .....	.....0	.....0	.....0	.....0	.....0
6.	Cash, cash equivalents and short-term investments .....	.....0	.....0	.....0	.....0	.....0
7.	Derivative instruments .....	.....0	.....0	.....0	.....0	.....0
8.	Other invested assets .....	.....0	.....0	.....0	.....0	.....0
9.	Aggregate write-ins for capital gains (losses) .....	.....0	.....(1,602)	.....(1,602)	.....0	.....0
10.	Total capital gains (losses)	31,255	(1,602)	29,653	48,798	0
DETAILS OF WRITE-INS						
0901.	Write-off Fixed Assets .....	.....	.....(1,602)	.....(1,602)	.....	.....
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	(1,602)	(1,602)	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

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

	Insurance											
	1	2	Ordinary		5	Group		Accident and Health			11	12
			3	4		6	7	8	9	10		
	Total	Industrial Life	Life Insurance	Individual Annuities	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other	Aggregate of All Other Lines of Business	Fraternal (Fraternal Benefit Societies Only)
<b>FIRST YEAR (other than single)</b>												
1. Uncollected	0											
2. Deferred and accrued	642,809		642,809									
3. Deferred , accrued and uncollected:												
3.1 Direct	642,809		642,809									
3.2 Reinsurance assumed	0											
3.3 Reinsurance ceded	0											
3.4 Net (Line 1 + Line 2)	642,809	0	642,809	0	0	0	0	0	0	0	0	0
4. Advance	206,903		206,903									
5. Line 3.4 - Line 4	435,906	0	435,906	0	0	0	0	0	0	0	0	0
6. Collected during year:												
6.1 Direct	1,855,646		1,779,564	76,082								
6.2 Reinsurance assumed	0											
6.3 Reinsurance ceded	0											
6.4 Net	1,855,646	0	1,779,564	76,082	0	0	0	0	0	0	0	0
7. Line 5 + Line 6.4	2,291,552	0	2,215,470	76,082	0	0	0	0	0	0	0	0
8. Prior year (uncollected + deferred and accrued - advance)	595,746	0	595,746	0	0	0	0	0	0	0	0	0
9. First year premiums and considerations:												
9.1 Direct	1,695,806		1,619,724	76,082								
9.2 Reinsurance assumed	0											
9.3 Reinsurance ceded	0											
9.4 Net (Line 7 - Line 8)	1,695,806	0	1,619,724	76,082	0	0	0	0	0	0	0	0
<b>SINGLE</b>												
10. Single premiums and considerations:												
10.1 Direct	30,609,912		30,609,912									
10.2 Reinsurance assumed	0											
10.3 Reinsurance ceded	0											
10.4 Net	30,609,912	0	30,609,912	0	0	0	0	0	0	0	0	0
<b>RENEWAL</b>												
11. Uncollected	398		398									
12. Deferred and accrued	1,782,333		1,782,333									
13. Deferred, accrued and uncollected:												
13.1 Direct	1,782,731		1,782,731									
13.2 Reinsurance assumed	0											
13.3 Reinsurance ceded	0											
13.4 Net (Line 11 + Line 12)	1,782,731	0	1,782,731	0	0	0	0	0	0	0	0	0
14. Advance	287,236		287,236									
15. Line 13.4 - Line 14	1,495,495	0	1,495,495	0	0	0	0	0	0	0	0	0
16. Collected during year:												
16.1 Direct	3,664,923		3,645,471	150						19,302		
16.2 Reinsurance assumed	0											
16.3 Reinsurance ceded	760		760									
16.4 Net	3,664,163	0	3,644,711	150	0	0	0	0	0	19,302	0	0
Line 15 + Line 16.4	5,159,658	0	5,140,206	150	0	0	0	0	0	19,302	0	0
18. Prior year (uncollected + deferred and accrued - advance)	1,358,736	0	1,358,736	0	0	0	0	0	0	0	0	0
19. Renewal premiums and considerations:												
19.1 Direct	3,801,682		3,782,230	150						19,302		
19.2 Reinsurance assumed	0											
19.3 Reinsurance ceded	760		760									
19.4 Net (Line 17 - Line 18)	3,800,922	0	3,781,470	150	0	0	0	0	0	19,302	0	0
<b>TOTAL</b>												
20. Total premiums and annuity considerations:												
20.1 Direct	36,107,400	0	36,011,866	76,232	0	0	0	0	0	19,302	0	0
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded	760	0	760	0	0	0	0	0	0	0	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4)	36,106,640	0	36,011,106	76,232	0	0	0	0	0	19,302	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 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)**

	Insurance											
	1	2	Ordinary		5	Group		Accident and Health			11	12
			3	4		6	7	8	9	10		
	Total	Industrial Life	Life Insurance	Individual Annuities	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other	Aggregate of All Other Lines of Business	Fraternal (Fraternal Benefit Societies Only)
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>												
21. To pay renewal premiums .....	940		940									
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
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
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
26. Totals:												
26.1 Reinsurance ceded (Page 6, Line 6) .....	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
26.3 Net ceded less assumed .....	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) .....	68,447		67,980	467								
28. Single .....	2,922,817		2,922,817									
29. Renewal .....	1,231,939		1,229,044							2,895		
30. Deposit-type contract funds .....	0											
31. Totals (to agree with Page 6, Line 21)	4,223,203	0	4,219,841	467	0	0	0	0	0	2,895	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

EXHIBIT 2 - GENERAL EXPENSES

	Insurance				5	6	7
	1	Accident and Health		4			
		2	3				
	Life	Cost Containment	All Other	All Other Lines of Business	Investment	Fraternal	Total
1. Rent .....	79,483		60		4,186		83,729
2. Salaries and wages .....	991,358		744		52,589		1,044,691
3.11 Contributions for benefit plans for employees .....	296,384		222		15,951		312,557
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 .....	14,679		11				14,690
4.2 Medical examination fees .....							0
4.3 Inspection report fees .....	19,341		15				19,356
4.4 Fees of public accountants and consulting actuaries .....	102,768		77		5,588		108,433
4.5 Expense of investigation and settlement of policy claims .....	4,353						4,353
5.1 Traveling expenses .....	49,381						49,381
5.2 Advertising .....	72,111						72,111
5.3 Postage, express, telegraph and telephone .....	99,576		75				99,651
5.4 Printing and stationery .....	117,034		88				117,122
5.5 Cost or depreciation of furniture and equipment .....	3,456		2		865		4,323
5.6 Rental of equipment .....	13,747		10				13,757
5.7 Cost or depreciation of EDP equipment and software .....	20,386						20,386
6.1 Books and periodicals .....							0
6.2 Bureau and association fees .....							0
6.3 Insurance, except on real estate .....	29,848		22				29,870
6.4 Miscellaneous losses .....							0
6.5 Collection and bank service charges .....	40,956		32		10,243		51,231
6.6 Sundry general expenses .....	258,821		194				259,015
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) .....	44,031						44,031
7.3 Agency conferences other than local meetings .....	100,870						100,870
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 .....					157,508		157,508
9.3 Aggregate write-ins for expenses .....	29,661	0	22	0	(3,079)	0	26,604
10. General expenses incurred .....	2,388,244	0	1,574	0	243,851	(b) 0	(a) 2,633,669
11. General expenses unpaid Dec. 31, prior year .....	291,040		291		56,752		348,083
12. General expenses unpaid Dec. 31, current year .....	238,617		291		38,579		277,487
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) .....	2,440,667	0	1,574	0	262,024	0	2,704,265
DETAILS OF WRITE-INS							
09.301. State Examination Fees .....	29,661		22		(3,079)	0	26,604
09.302. ....							
09.303. ....							
09.398. Summary of remaining write-ins for Line 9.3 from overflow page. ....	0	0	0	0	0	0	0
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above) .....	29,661	0	22	0	(3,079)	0	26,604

(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	2	3			
		Life	Accident and Health	All Other Lines of Business	Investment	Fraternal	Total
1.	Real estate taxes .....						0
2.	State insurance department licenses and fees .....	46,481	35				46,516
3.	State taxes on premiums .....	599,690	50				599,740
4.	Other state taxes, including \$ ..... for employee benefits .....						0
5.	U.S. Social Security taxes .....	79,918					79,918
6.	All other taxes .....	16,127	72				16,199
7.	Taxes, licenses and fees incurred .....	742,216	157	0	0	0	742,373
8.	Taxes, licenses and fees unpaid Dec. 31, prior year .....	133,246					133,246
9.	Taxes, licenses and fees unpaid Dec. 31, current year .....	231,564					231,564
10.	Taxes, licenses and fees paid during year (Lines 7 + 8 - 9) .....	643,898	157	0	0	0	644,055

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 13		
15. Total Lines 10 through 14		
16. Total from prior year		
17. Total dividends or refunds (Lines 9 + 15 - 16)		
DETAILS OF WRITE-INS		
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	2	3	4	5	6
Valuation Standard	Total <sup>(a)</sup>	Industrial	Ordinary	Credit (Group and Individual)	Group
0100001. 1958 CET 3.0% NL .....	15,027		15,027		
0100002. 1958 CSO 3.0% CRVM .....	110,357		110,357		
0100003. 1958 CSO 3.0% NL .....	576,200		576,200		
0100004. 1958 CSO 4.0% CRVM .....	41,278		41,278		
0100005. 1958 CSO 4.0% NL .....	1,056		1,056		
0100006. 1958 CSO 4.5% CRVM .....	12,328		12,328		
0100007. 1980 CSO 3.0% CRVM .....	3,475,155		3,475,155		
0100008. 1980 CSO 3.5% CRVM .....	2,524,538		2,524,538		
0100009. 1980 CSO 4.0% CRVM .....	12,355,205		12,355,205		
0100010. 1980 CSO 4.5% CRVM .....	58,323		58,323		
0100011. 125% 1980 CSO 3.0% CRVM .....	262,796		262,796		
0100012. 125% 1980 CSO 3.5% CRVM .....	85,268		85,268		
0100013. 125% 1980 CSO 4.0% CRVM .....	7,232,188		7,232,188		
0100014. 125%M 100%F 1980 CSO 3.0% CRVM .....	91,466,175		91,466,175		
0100015. 125%M 100%F 1980 CSO 3.5% CRVM .....	37,930,874		37,930,874		
0100016. 125%M 100%F 1980 CSO 4.0% CRVM .....	7,250,904		7,250,904		
0100017. 200% 1980 CSO 3.0% CRVM .....	885,967		885,967		
0100018. 200% 1980 CSO 3.5% CRVM .....	628,197		628,197		
0100019. 200% 1980 CSO 4.0% CRVM .....	464,121		464,121		
0100020. 2001 CSO 3.0% CRVM .....	374,032		374,032		
0100021. 2001 CSO 3.5% CRVM .....	239,431		239,431		
0100022. 2001 CSO 4.0% CRVM .....	448,627		448,627		
0100023. Payor and Special Class .....	800		800		
0100024. ....	0				
0199997. Totals (Gross)	166,438,847	0	166,438,847	0	0
0199998. Reinsurance ceded	379		379		
0199999. Life Insurance: Totals (Net)	166,438,468	0	166,438,468	0	0
0200001. 1958 CSO 4% .....	36,923	XXX	36,923	XXX	
0200002. 1980 CSO 4% .....	175,237	XXX	175,237	XXX	
0200003. 1980 CSO 3.75% .....	470,096	XXX	470,096	XXX	
0200004. 1980 CSO 3.50% .....	481,770	XXX	481,770	XXX	
0200005. 1980 CSO 3.25% .....	41,917	XXX	41,917	XXX	
0299997. Totals (Gross)	1,205,943	XXX	1,205,943	XXX	0
0299998. Reinsurance ceded	0	XXX		XXX	
0299999. Annuities: Totals (Net)	1,205,943	XXX	1,205,943	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. 1952 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% .....	888		888		
0699997. Totals (Gross)	888	0	888	0	0
0699998. Reinsurance ceded	0				
0699999. Disability-Disabled Lives: Totals (Net)	888	0	888	0	0
0700001. Non-Deductable & Return of Prorata Premium ....	99,418		99,418		
0700002. Casket Growth .....	698,099		698,099		
0799997. Totals (Gross)	797,517	0	797,517	0	0
0799998. Reinsurance ceded	0				
0799999. Miscellaneous Reserves: Totals (Net)	797,517	0	797,517	0	0
9999999. Totals (Net) - Page 3, Line 1	168,443,266	0	168,443,266	0	0

(a) Included in the above table are amounts of deposit-type contracts that originally contained a mortality risk. Amounts of deposit-type contracts in Column 2 that no longer contain a mortality risk are Life Insurance \$ ..... ; Annuities \$ ..... ; Supplementary Contracts with Life Contingencies \$ ..... ; Accidental Death Benefits \$ ..... ; Disability - Active Lives \$ ..... ; Disability - Disabled Lives \$ ..... ; Miscellaneous Reserves \$ ..... .

EXHIBIT 5 - INTERROGATORIES

1.1

Has the reporting entity ever issued both participating and non-participating contracts?

Yes [ X ] 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 [ X ]

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 [ X ] 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 [ X ]

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 [ X ]

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 [ X ]

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 [ X ]

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 [ X ]

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	Valuation Basis		4
	2	3	
Description of Valuation Class	Changed From	Changed To	Increase in Actuarial Reserve Due to Change
NONE			
9999999 - Total (Column 4, only)			

**CINCINNATI EQUITABLE LIFE INSURANCE COMPANY**  
**Exhibit 5 interrogatories related to Determination Procedures for Dividends**  
**For the Year Ended December 31, 2020**

**Process of Dividend Determination**

The Company's participating business block is quite small with less than 100 policies in force and less than \$600 dividends paid during 2020. All the policies were issued prior to 1968. The Company has not changed the dividend scale in more than twenty years and does not have any documentation on the determination of the current dividend scale.

**Description of Experience Factors**

As noted previously, the derivation of the current dividend scale is not documented so it is not possible to comment on the impact of experience factors on the current dividend scale.

**Interrogatories**

- I. Has the contribution principle been followed in determining the dividends or refunds? If not, describe.**

Since there is no record of how the current dividend scale was developed over twenty years ago, it is not possible to say if the contribution principle was followed in determining the dividends.

- II. Has any material change occurred with respect to the determination of contract factors? If yes, describe.**

No dividend factor changes have occurred in the last twenty years.

- III. Have there been any changes in the scales of dividends or refunds on new or existing business authorized for illustration by the reporting entity? If yes, describe in general the changes that were made.**

During 2020, the Company did not change the illustrated dividend scale.

- IV. Have there been any changes in the scales of dividends or refunds apportioned for payment? If yes, describe in general the changes that were made.**

During 2020, the Company did not change the dividend scale for dividends payable in 2020 and later.

- V. For each major block of business, indicate when the dividend or refund scale was last changed (including changes described in IV, above), and indicate the extent of such change in terms of the percentage by which dividends or refunds payable under the new scaled exceeded or were less than those that would have been paid in the year of change had the scale not been changed.**

The dividend scale has not been changed in more than twenty years.

- VI. Does the dividend or refund scale incorporate the use of projections or forecasts of experience factors for any period in excess of two years beyond the effective date of the scale? If yes, describe.**

No, the current dividend scale does not incorporate the use of projections or forecasts of experience factors for any period in excess of two years beyond the effective date of the scale.

- VII. In the basis of determining investment income experience factors, state whether the reporting entity uses (a) a portfolio average approach, (b) an investment generation approach, or (c) a combination of the two approaches. If (b) or (c), describe the general basis used, including the issue year groupings.**

It is unknown which type of investment income experience factors were used in determining the current dividend scale.

- VIII. With respect to contract loan provisions:**

**Describe how differences in such provisions affect dividends or refunds.**

**Does the dividend or refund scale contain any provision for varying the amount of dividend or refund in accordance with the extent to which an individual contract's loan provision is utilized? If yes, indicate the blocks of business where this treatment pertains, and describe the basis of variation used.**

The company does not explicitly reflect policy loans in their dividend determination process.

**IX. Does the reporting entity pay termination dividends or refunds on its contracts?**

The Company does not pay termination dividends on its policies.

**X. Does the reporting entity maintain separate participating and non-participating accounts? If yes, describe the basis.**

The Company does not maintain separate participating and non-participating accounts.

**XI. Are any transfers made from a participating account to another participating, non-participating, or shareholders' account? If yes, describe the basis for the transfers.**

No transfers are made since separate accounts are not maintained.

**XII. Does the undersigned believe there is a substantial probability that, because of expected deterioration of experience or for any other reason, the dividends or refunds illustrated on new or existing business cannot be supported for at least two years? If yes, explain why.**

No.

**XIII. Describe any aspects of the determination of the dividend or refund scale not covered above that involve material departures from the Actuarial Standards of Practice issued by the Actuarial Standards Board applicable to the determination of dividends or refunds.**

The dividend scale was determined over 20 years ago and the basis of its determination is unknown and therefore cannot be commented upon.

**XIV. Describe any material changes in the basis of determination of the dividend or refund scale that are not covered above.**

None.



**STATEMENT OF ACTUARIAL OPIONON**  
**CONCERNING POLICYHOLDER DIVIDENDS OF**  
**CINCINNATI EQUITABLE LIFE INSURANCE COMPANY**  
**For the Year Ended December 31, 2020**

I, Jared Meehan, Life Actuary & Manager, am an employee of Farm Bureau Life Insurance Company of Michigan and a member of the American Academy of Actuaries. I am the appointed actuary for Cincinnati Equitable Life Insurance Company and have been involved in the preparation of Cincinnati Equitable Life Insurance Company's Annual Statement. I meet the Academy qualification standards for rendering the opinion. Cincinnati Equitable has less than 100 participating policies inforce. All these policies were issued prior to 1968. During 2020, the company paid less than \$600 in dividends on their participating policies. The dividend scale for these policies has not been changed in over twenty years and the documentation of the derivation of the current dividend scale is not available. Given the size of the participating policies block of business and the lack of information regarding the derivation of the current dividend scale, I have not been able nor do I feel it practical to examine the actuarial assumptions and methods used in determining dividends under the dividend scale for the individual participating life insurance policies of the company issued for delivery in the United States. The dividends encompassed by this scale include:

- i. Apportioned for payment during 2021; and
- ii. in effect as of January 1, 2021 that are illustrated for payment on new or existing business in 2022 and later that are authorized for illustration by the company.

I relied upon Gregory A Baker, Chief Financial Officer, Cincinnati Equitable Life Insurance Company, as to the accuracy and completeness of the participating policies inforce and the dividend determination procedure, illustration practices, and actual current dividends.

As noted previously, given the immaterial size of the block of participating policies and lack of information concerning the derivation of the current dividend scale, it is not considered necessary to perform the normal examination and review of the actuarial assumptions and methods, of the underlying basis records relevant to the determination of the dividends specified above, and such tests of actuarial calculation. Therefore in my opinion, I do not feel it necessary to state that these dividends, described above, have been determined in accordance with the Actuarial Standards of Practice issued by the Actuarial Standards Board applicable to the determination of dividends.



Jared Meehan, ASA, MAAA  
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Lansing, MI 48909-7900  
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2/5/2021

Date

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 .....	1,763												1,763
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) .....	1,763	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1,763
8. Reinsurance ceded .....	0												
9. Totals (Net)	1,763	0	0	0	0	0	0	0	0	0	0	0	1,763
<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)	1,763	0	0	0	0	0	0	0	0	0	0	0	1,763
18. TABULAR FUND INTEREST	0												
DETAILS OF WRITE-INS													
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. ....  
(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods. ....

EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

	1	2	3	4	5	6
	Total	Guaranteed Interest Contracts	Annuities Certain	Supplemental Contracts	Dividend Accumulations or Refunds	Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance .....	191,554	0	0	0	191,554	0
2. Deposits received during the year .....	1,463				1,463	
3. Investment earnings credited to the account .....	6,571				6,571	
4. Other net change in reserves .....	0					
5. Fees and other charges assessed .....	0					
6. Surrender charges .....	0					
7. Net surrender or withdrawal payments .....	3,147				3,147	
8. Other net transfers to or (from) Separate Accounts .....	878				878	
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) .....	195,563	0	0	0	195,563	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)	195,563	0	0	0	195,563	0

ANNUAL STATEMENT FOR THE YEAR 2020 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	2	Ordinary			6	Group		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	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 .....											
2.11 Direct .....	0										
2.12 Reinsurance assumed .....	0										
2.13 Reinsurance ceded .....	0										
2.14 Net .....	0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	0	0	0
2.2 Other .....											
2.21 Direct .....	540,991		536,059								4,932
2.22 Reinsurance assumed .....	0										
2.23 Reinsurance ceded .....	0										
2.24 Net .....	540,991	0	(b) 536,059	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 4,932
3. Incurred but unreported:											
3.1 Direct .....	116,000		116,000								
3.2 Reinsurance assumed .....	0										
3.3 Reinsurance ceded .....	0										
3.4 Net .....	116,000	0	(b) 116,000	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 0
4. TOTALS .....											
4.1 Direct .....	656,991	0	652,059	0	0	0	0	0	0	0	4,932
4.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0
4.4 Net .....	656,991	(a) 0	(a) 652,059	0	0	0	(a) 0	0	0	0	4,932

(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).

ANNUAL STATEMENT FOR THE YEAR 2020 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 .....	26,217,212		26,005,198	197,520							14,494
1.2 Reinsurance assumed .....	0										
1.3 Reinsurance ceded .....	0										
1.4 Net .....	(d) 26,217,212	0	26,005,198	197,520	0	0	0	0	0	0	14,494
2. Liability December 31, current year from Part 1:											
2.1 Direct .....	656,991	0	652,059	0	0	0	0	0	0	0	4,932
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 .....	656,991	0	652,059	0	0	0	0	0	0	0	4,932
3. Amounts recoverable from reinsurers December 31, current year .....	0										
4. Liability December 31, prior year:											
4.1 Direct .....	449,765	0	444,702	0	0	0	0	0	0	0	5,063
4.2 Reinsurance assumed .....	0										
4.3 Reinsurance ceded .....	0										
4.4 Net .....	449,765	0	444,702	0	0	0	0	0	0	0	5,063
5. Amounts recoverable from reinsurers December 31, prior year .....	0										
6. Incurred Benefits											
6.1 Direct .....	26,424,438	0	26,212,555	197,520	0	0	0	0	0	0	14,363
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 .....	26,424,438	0	26,212,555	197,520	0	0	0	0	0	0	14,363

(a) 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.

(b) 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.

(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.

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	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 .....	1,497,918	1,127,177	(370,741)
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 .....	32,732	690	(32,042)
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 .....	0	40,270	40,270
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	1,530,650	1,168,137	(362,513)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0
28. Total (Lines 26 and 27) .....	1,530,650	1,168,137	(362,513)
DETAILS OF WRITE-INS			
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	40,270
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) .....	0	40,270	40,270

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, 2020, (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 #	2020	2019
Net Income					
(1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ (693,233)	\$ (749,341)
(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	<u>\$ (693,233)</u>	<u>\$ (749,341)</u>
Surplus					
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 7,504,658	\$ 8,260,655
(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	<u>\$ 7,504,658</u>	<u>\$ 8,260,655</u>

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.

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 3.85%
- (2) Maximum percentage of loan to value of security was 75%
- (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		Commerical			
	Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a. Current Year							
1. Recorded Investment (All)							
(a) Current	\$	\$	\$	\$	4,226,219	\$	4,226,219
(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	\$	\$	\$	\$		\$	\$
b. Prior Year							
1. Recorded Investment							
(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
(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							



Notes to the Financial Statements

5. Investments (Continued)

(9) The company recognizes interest income on its impaired loans upon receipt.

B. Debt Restructuring - None

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

a. The aggregate amount of unrealized losses:

1. Less than 12 months ..... \$ ..... 92,301

2. 12 months or longer ..... -

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 months ..... \$ ..... 2,015,900

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

Notes to the Financial Statements

5. Investments (Continued)

L. Restricted Assets

(1) Restricted assets (including pledged)

Gross (Admitted & Nonadmitted) Restricted											
Current Year							Current Year				
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Separate Account (S/A) 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 to Total Assets, %	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	1,099,749				1,099,749	1,099,344	405		1,099,749		
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	\$ 1,099,749	\$	\$	\$	\$ 1,099,749	\$ 1,099,344	\$ 405	\$	\$ 1,099,749	%	%

(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	
	2020	2019	2020	2019	2020	2019
(1) Bonds - amortized cost	2	2	\$ 269,760	\$ 279,452	\$ 275,559	\$ 291,564
(2) LB & SS - amortized cost						
(3) Preferred stock - amortized cost						
(4) Preferred stock - fair value						
(5) Total (1+2+3+4)	2	2	\$ 269,760	\$ 279,452	\$ 275,559	\$ 291,564

P. Short Sales - None

Notes to the Financial Statements

5. Investments (Continued)

Q. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
(1) Number of CUSIPs .....		
(2) Aggregate amount of investment income .....	\$ .....	\$ .....

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

	2020			2019			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets .....	\$ ..... 3,935,756	\$ .....	\$ ..... 3,935,756	\$ ..... 3,669,000	\$ .....	\$ ..... 3,669,000	\$ ..... 266,756	\$ .....	\$ ..... 266,756
(b) Statutory valuation allowance adjustments .....									
(c) Adjusted gross deferred tax assets (1a - 1b) .....	3,935,756		3,935,756	3,669,000		3,669,000	266,756		266,756
(d) Deferred tax assets nonadmitted .....	1,497,918		1,497,918	1,127,000		1,127,000	370,918		370,918
(e) Subtotal net admitted deferred tax asset (1c - 1d) .....	\$ ..... 2,437,838	\$ .....	\$ ..... 2,437,838	\$ ..... 2,542,000	\$ .....	\$ ..... 2,542,000	\$ ..... (104,162)	\$ .....	\$ ..... (104,162)
(f) Deferred tax liabilities .....	1,160,097		1,160,097	1,302,000		1,302,000	(141,903)		(141,903)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f) .....	\$ ..... 1,277,741	\$ .....	\$ ..... 1,277,741	\$ ..... 1,240,000	\$ .....	\$ ..... 1,240,000	\$ ..... 37,741	\$ .....	\$ ..... 37,741

(2) Admission calculation components SSAP No. 101

	2020			2019			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks .....	\$ ..... 147,238	\$ ..... 6,227	\$ ..... 153,465	\$ .....	\$ .....	\$ .....	\$ ..... 147,238	\$ ..... 6,227	\$ ..... 153,465
(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) .....	1,124,002	(6,227)	1,117,775	1,240,000		1,240,000	(115,998)	(6,227)	(122,225)
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date .....	3,099,317		3,099,317	2,574,000		2,574,000	525,317		525,317
2. Adjusted gross deferred tax assets allowed per limitation threshold .....	XXX	XXX	1,124,002	XXX	XXX	1,240,000	XXX	XXX	(115,998)
(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 .....	6,501		6,501	1,302,000		1,302,000	(1,295,499)		(1,295,499)
(d) Deferred tax assets admitted as the result of application of SSAP No. 101.									
Total (2(a) + 2(b) + 2(c)) .....	\$ ..... 1,277,741	\$ ..... -	\$ ..... 1,277,741	\$ ..... 2,542,000	\$ .....	\$ ..... 2,542,000	\$ ..... (1,264,259)	\$ ..... -	\$ ..... (1,264,259)

(3) Ratio used as basis of admissibility

	2020	2019
(a) Ratio percentage used to determine recovery period and threshold limitation amount .....	405.400 %	563.320 %
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above .....	\$ ..... 6,908,276	\$ ..... 8,584,304

Notes to the Financial Statements

9. Income Taxes (Continued)

(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

	2020		2019		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 3,935,756	\$	\$ 3,669,000	\$	\$ 266,756	\$
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)	\$ 2,437,838	\$	\$ 2,542,000	\$	\$ (104,162)	\$
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	100.000 %	%	-100.000 %	%

(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

Current income taxes incurred consist of the following major components:				(1)	(2)	(3)
				2020	2019	Change (1-2)
1. Current Income Tax						
(a) Federal				\$ 148,022	\$ (100,965)	\$ 248,987
(b) Foreign						
(c) Subtotal				\$ 148,022	\$ (100,965)	\$ 248,987
(d) Federal income tax on net capital gains				6,225	11,902	(5,677)
(e) Utilization of capital loss carry-forwards						
(f) Other						
(g) Federal and foreign income taxes incurred				\$ 154,247	\$ (89,063)	\$ 243,310
				(1)	(2)	(3)
				2020	2019	Change (1-2)
2. Deferred Tax Assets						
(a) Ordinary						
(1) Discounting of unpaid losses				\$	\$	\$
(2) Unearned premium reserve						
(3) Policyholder reserves				2,182,828	1,931,000	251,828
(4) Investments						
(5) Deferred acquisition costs				1,724,878	1,683,000	41,878
(6) Policyholder dividends accrual				99		99
(7) Fixed assets				6,874	1,000	5,874
(8) Compensation and benefits accrual						
(9) Pension accrual						
(10) Receivables - nonadmitted					40,000	(40,000)
(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)*				21,077	2,000	19,077
(99) Subtotal				\$ 3,935,756	\$ 3,669,000	\$ 266,756
(b) Statutory valuation allowance adjustment						
(c) Nonadmitted				1,497,918	1,127,000	370,918
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)				\$ 2,437,838	\$ 2,542,000	\$ (104,162)
(e) Capital						
(1) Investments				\$	\$	\$
(2) Net capital loss carry-forward						
(3) Real estate						
(4) Other (including items <5% of total capital tax assets)						
(99) Subtotal				\$	\$	\$
(f) Statutory valuation allowance adjustment						
(g) Nonadmitted						
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)						
(i) Admitted deferred tax assets (2d + 2h)				\$ 2,437,838	\$ 2,542,000	\$ (104,162)

Notes to the Financial Statements

9. Income Taxes (Continued)

	(1) 2020	(2) 2019	(3) Change (1-2)
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$	\$ 45,000	\$ (45,000)
(2) Fixed assets	28,961		28,961
(3) Deferred and uncollected premium	254,223	242,000	12,223
(4) Policyholder reserves			
(5) Other (including items <5% of total ordinary tax liabilities) <sup>†</sup>	876,913	1,015,000	(138,087)
(99) Subtotal	\$ 1,160,097	\$ 1,302,000	\$ (141,903)
(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)	\$ 1,160,097	\$ 1,302,000	\$ (141,903)
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 1,277,741	\$ 1,240,000	\$ 37,741
	(1) 2020	(2) 2019	(3) Change (1-2)
* Items >5% of total ordinary tax assets included in Other	\$	\$	
† Items >5% of total ordinary tax liabilities included in Other			
Section 846 Transition Adjustment under TCJA	\$ 846,280	\$ 1,015,000	(168,720)

D. Among the More Significant Book to Tax Adjustments

	2020	Effective Tax Rate
Income before Taxes	\$ (107,975)	21.000 %
Tax-Exempt Interest	(7,201)	1.401
Dividend Received Deduction	(3,745)	0.728
Difference between Statutory and Tax Policy Reserves	157,920	-30.714
Section 846 Transition Adjustment under TCJA	169,256	-32.918
Deferred Acquisition Costs	46,842	-9.110
Deferred and Uncollected Premiums	(12,002)	2.334
Accrual of Discount on Bonds	(29,796)	5.795
Other Adjustments	(71,212)	13.850
Total statutory income taxes	\$ 142,086	-27.634 %

E. Operating Loss and Tax Credit Carryforwards

- (1) At December 31, 2020, the Company had no remaining Net Operating Loss carryforwards or AMT tax credit carryforward.
- (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
2018	\$	\$	\$
2019	11,380		11,380
2020	135,859	6,227	142,086

- (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.

Notes to the Financial Statements

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

B. 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.

C. Transactions With Related Party Who Are Not Reported on Schedule Y

(1) Detail of material related party transactions

Ref #	Date of Transaction	Name of Related Party	Nature of Relationship	Type of Transaction	Written Agreement (Yes/No)	Due Date	Reporting Period Date Amount Due From (To)
-------	---------------------	-----------------------	------------------------	---------------------	----------------------------	----------	--

(2) Detail of material related party transactions involving services

Ref #	Name of Related Party	Overview Description	Amount Charged	Amount Based on Allocation of Costs or Market Rates	Amount Charged Modified or Waived (Yes/No)
Total			\$	\$	

(3) Detail of material related party transactions involving exchange of assets and liabilities

None

(a) Description of transaction

Ref #	Name of Related Party	Overview Description	Have Terms Changed from Preceding Period? (Yes/No)
-------	-----------------------	----------------------	--

(b) Assets received

Ref #	Name of Related Party	Description of Assets Received	Statement Value of Assets Received
Total			\$

(c) Assets transferred

Ref #	Name of Related Party	Description of Assets Transferred	Statement Value of Assets Transferred
Total			\$

(4) Detail of amounts owed to/from a related party

Ref #	Name of Related Party	Aggregate Reporting Period Amount Due From	Aggregate Reporting Period (Amount Due To)	Amount Offset in Financial Statement (if qualifying)	Net Amount Recoverable / (Payable) by Related Party	Admitted Recoverable
Total		\$	\$	\$	\$	\$

D. At December 31, 2020, the Company reported \$33 receivable from Cincinnati Equitable Insurance Company. The terms of the settlement require that these amounts are settled within 90 days.

E. 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 2020 the expense for these services was \$217,237.

F. The Company has made no guarantees on behalf of the Parent Company.

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

Notes to the Financial Statements

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans (Continued)

- 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 \$37,553 and \$37,418 for 2020 and 2019, respectively and for other post retirement benefit plans was \$0 and \$0 for 2020 and 2019, 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, Dividend Restrictions and Quasi-Reorganizations

- A. The Company has 1,000 shares authorized, 1,000 shares issued and 1,000 shares outstanding.
- B. Dividend Rate of Preferred Stock - None
- C. 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.
- D. Ordinary Dividends - None
- E. 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.
- F. 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.
- G. Surplus Advances - None
- H. Stock Held for Special Purposes - None
- I. Changes in Special Surplus Funds - None
- J. Unassigned Funds (Surplus)  
The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains or losses is (\$416,979)
- K. Company-Issued Surplus Debentures or Similar Obligations - None
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations - None
- M. 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 2020. 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 February of 2027. The Company leases office space in a multi-tenant building. The current lease expires in February of 2027.
    - (a) Rental expense for 2020, and 2019 were approximately \$126,000 and \$160,000. 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

Notes to the Financial Statements

15. Leases (Continued)

(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, 2020, the minimum aggregate rental commitments for all companies are as follows:

	Year Ending December 31	Operating Leases
1.	2021	\$ 129,000
2.	2022	122,000
3.	2023	124,000
4.	2024	126,000
5.	2025	124,000
6.	Total	\$ 625,000

(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	\$ 19,302
Total					\$ 19,302

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	\$ 1,243,561	\$	\$	\$	\$ 1,243,561
Bonds - Government	632,311				632,311
Bonds -Other		177,154,982			177,154,982
Other Invested Assets		523,963			523,963
Common Stock - Affiliated		3,288,605			3,288,605
Total assets at fair value/NAV	\$ 1,875,872	\$ 180,967,550	\$	\$	\$ 182,843,422
b. Liabilities at fair value					
Total liabilities at fair value	\$	\$	\$	\$	\$

(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	\$ 177,787,293	\$ 161,514,554	\$ 632,311	\$ 177,154,982	\$	\$	\$
Preferred Stocks	1,243,561	1,185,231	1,243,561				
Common Stock	3,288,605	3,288,605		3,288,605			
Other Invested Assets	523,963	490,291		523,963			

D. Not Practicable to Estimate Fair Value - None



Notes to the Financial Statements

20. Fair Value Measurements (Continued)

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

The Company has no retrospectively rated contracts or contracts subject to redetermination.

- A. Method Used to Estimate - None
- B. Method Used to Record - None
- C. Amount and Percent of Net Retrospective Premiums - None
- D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - None
- E. Risk-Sharing Provisions of the Affordable Care Act (ACA)

The Company does not write health insurance.

- (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions?  
No

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year - None
- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance - None
- (4) Roll-forward of risk corridors asset and liability balances by program benefit year - None
- (5) ACA risk corridors receivable as of reporting date - 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, 2020, premiums under individual life participating policies were \$5,325, 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 \$453 to policyholders and did not allocate any additional income to such policyholders.

30. Premium Deficiency Reserves

As of December 31, 2020 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:
- 3. Was anticipated investment income utilized in the calculation?

31. Reserves for Life Contracts and Annuity Contracts

- 1. The Company waves 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, 2020, 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.  
  
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

Notes to the Financial Statements

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	286,310			286,310	23.742
c. At fair value					
d. Total with market value adjustment or at fair value (total of a through c)	286,310			286,310	23.742
e. At book value without adjustment (minimal or no charge or adjustment)	882,710			882,710	73.197
(2) Not subject to discretionary withdrawal	36,923			36,923	3.062
(3) Total (gross: direct + assumed)	1,205,943			1,205,943	100.000 %
(4) Reinsurance ceded					
(5) Total (net) (3 - 4)	\$ 1,205,943	\$	\$	\$ 1,205,943	
(6) Amount included in A(1)b above that will move to A(1)e for the first time within 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	\$ 195,563	\$	\$	\$ 195,563	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)	195,563			195,563	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)	195,563			195,563	100.000 %
(4) Reinsurance ceded					
(5) Total (net) (3 - 4)	\$ 195,563	\$	\$	\$ 195,563	
(6) Amount included in C(1)b above that will move to C(1)e for the first time within the year after the statement date:	\$	\$	\$	\$	

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

	Amount
Life & Accident & Health Annual Statement	
(1) Exhibit 5, annuities, total (net)	\$ 1,205,943
(2) Exhibit 5, supplementary contracts with life contingencies section, total (net)	
(3) Exhibit of Deposit-type Contracts, Line 14, Column 1	195,563
(4) Subtotal	\$ 1,401,506
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	\$ 1,401,506

Notes to the Financial Statements

33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics

A. General Account		Account Value	Cash Value	Reserve
(1)	Subject to discretionary withdrawal, surrender values or policy loans:			
a.	Term Policies with Cash Value .....	\$ 21,656	\$ 21,656	\$ 27,883
b.	Universal Life .....			
c.	Universal Life with Secondary Guarantees .....			
d.	Indexed Universal Life .....			
e.	Indexed Universal Life with Secondary Guarantees .....			
f.	Indexed Life .....			
g.	Other Permanent Cash Value Life Insurance .....	151,335,110	151,139,547	166,391,760
h.	Variable Life .....			
i.	Variable Universal Life .....			
j.	Miscellaneous Reserves .....			
(2)	Not subject to discretionary withdrawal or no cash values			
a.	Term Policies without Cash Value .....	XXX	XXX	19,204
b.	Accidental Death Benefits .....	XXX	XXX	100
c.	Disability – Active Lives .....	XXX	XXX	350
d.	Disability – Disabled Lives .....	XXX	XXX	888
e.	Miscellaneous Reserves .....	XXX	XXX	797,517
(3)	Total (gross: direct + assumed) .....	151,356,766	151,161,203	167,237,702
(4)	Reinsurance Ceded .....			379
(5)	Total (net) (3) - (4) .....	\$ 151,356,766	\$ 151,161,203	\$ 167,237,323
B. Separate Account with Guarantees - None				
C. Separate Account Nonguaranteed - None				
D. Reconciliation of Total Life Insurance Reserves				

		Amount
Life & Accident & Health Annual Statement:		
(1)	Exhibit 5, Life Insurance Section, Total (net) .....	\$ 166,438,468
(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) .....	888
(5)	Exhibit 5, Miscellaneous Reserves Section, Total (net) .....	797,517
(6)	Subtotal .....	167,237,323
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)) .....	\$ 167,237,323

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 .....	642,809	234,473	
(3) Ordinary renewal .....	1,782,731	976,113	
(4) Credit life .....			
(5) Group life .....			
(6) Group annuity .....			
(7) Totals .....	\$ 2,425,540	\$ 1,210,586	

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, 2020 and December 31, 2019 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.

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?  
If yes, complete Schedule Y, Parts 1, 1A and 2

Yes ☒ No ☐

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 ☒ 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 ☒

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 ☒

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.

12/31/2018

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).

05/28/2020

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 ☒

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ 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?  
4.12 renewals?

Yes ☐ No ☒  
Yes ☐ No ☒

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?  
4.22 renewals?

Yes ☐ No ☒  
Yes ☐ No ☒

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 ☒

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 ☒

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 ☒

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 2020 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.

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

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

BDO - Grand Rapids Office  
200 Ottawa Avenue NW, Suite 300  
Grand 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?

Jared Meehan, MSA, MAAA  
Michigan Farm Bureauand 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?

None

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?

Yes [ X ] No [ ]

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).

## GENERAL INTERROGATORIES

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

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 [ ]

19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? .....		Yes [   ]	No [ <input checked="" type="checkbox"/> ]
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):	20.11 To directors or other officers.....	\$ .....	
		20.12 To stockholders not officers.....	\$ .....	
		20.13 Trustees, supreme or grand (Fraternal Only) .....	\$ .....	
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.....	\$ .....	
		20.22 To stockholders not officers.....	\$ .....	
		20.23 Trustees, supreme or grand (Fraternal Only) .....	\$ .....	
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 [ <input checked="" type="checkbox"/> ]
21.2	If yes, state the amount thereof at December 31 of the current year:	21.21 Rented from others.....	\$ .....	
		21.22 Borrowed from others.....	\$ .....	
		21.23 Leased from others .....	\$ .....	
		21.24 Other .....	\$ .....	
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 [ <input checked="" type="checkbox"/> ]
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 .....	\$ .....	
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? .....		Yes [ <input checked="" type="checkbox"/> ]	No [   ]
23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount: .....		\$ .....	33

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 securities 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) N/A .....				
24.04	For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. ....	\$			
24.05	For the reporting entity's securities lending program, report amount of collateral for other programs. ....	\$			
24.06	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 ]
24.07	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? .....	Yes	[ ]	No	[ ]
				N/A	[ X ]
24.08	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 2020 OF THE Cincinnati Equitable Life Insurance Company

GENERAL INTERROGATORIES

24.09 For the reporting entity’s securities lending program state the amount of the following as of December 31 of the current year:

24.091	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	0
24.092	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$	0
24.093	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	\$	1,099,749
	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

Yes [ ] No [ X ]

26.42 Permitted accounting practice

Yes [ ] No [ X ]

26.43 Other accounting guidance

Yes [ ] 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 2020 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 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



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

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	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	161,514,554	177,787,293	16,272,739
30.2 Preferred stocks .....	1,185,231	1,243,469	58,238
30.3 Totals	162,699,785	179,030,762	16,330,977

30.4 Describe the sources or methods utilized in determining the fair values:  
Direct feed from Bank .....

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 ]

36. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:  
a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.  
b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.  
c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.  
d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a - 36.c are reported as long-term investments.  
Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? ..... Yes [ ] No [ ] N/A [ X ]

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

GENERAL INTERROGATORIES

OTHER

37.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....27,800

37.2 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 .....	27,800
.....	.....

38.1 Amount of payments for legal expenses, if any? .....\$ .....14,690

38.2 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
Rector & Associates .....	13,000
.....	.....

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

39.2 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
.....	.....
.....	.....

GENERAL INTERROGATORIES

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 [ X ] No [ ]

1.2 If yes, indicate premium earned on U.S. business only \$ 19,302

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ 0

1.31 Reason for excluding:

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$ 0

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ 14,363

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 \$ 19,302

1.65 Total incurred claims \$ 14,363

1.66 Number of covered lives 8

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	19,302	24,445
2.2 Premium Denominator	36,106,640	37,146,979
2.3 Premium Ratio (2.1/2.2)	0.001	0.001
2.4 Reserve Numerator	6,695	7,267
2.5 Reserve Denominator	168,304,503	158,880,465
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

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

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

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? \$ 0

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 [ X ]

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

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	

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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 gurantee)
Universal Life (with or without secondary gurantee)
Variable Universal Life (with or without secondary gurantee)

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 [ X ]

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 ..... \$ .....217,237

9.22 Received ..... \$ .....0
- 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 reinsure 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	0

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 [ X ]

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

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
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

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 2020	2 2019	3 2018	4 2017	5 2016
<b>Life Insurance in Force</b> (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4) .....	237,901	226,679	208,273	187,076	165,385
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) .....	636	636	656	636	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) .....	238,537	227,315	208,929	187,712	166,361
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated .....	0				XXX
<b>New Business Issued</b> (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2) .....	38,776	40,790	41,861	41,377	41,410
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) .....	38,776	40,790	41,861	41,377	41,410
<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) .....	36,011,106	36,965,833	37,787,770	35,972,171	36,430,104
15.2 Ordinary-individual annuities (Line 20.4, Col. 4) .....	76,232	156,701	139,613	33,092	100,320
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) .....	19,302	24,445	29,533	40,369	52,638
19. Aggregate of all other lines of business (Line 20.4, Col. 11) .....	0	0	0	0	0
20. Total .....	36,106,640	37,146,979	37,956,916	36,045,632	36,583,062
<b>Balance Sheet (Pages 2 &amp; 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) .....	180,351,336	171,539,049	158,330,619	141,659,194	123,061,537
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) .....	172,846,678	163,278,394	148,993,707	131,850,114	114,991,000
23. Aggregate life reserves (Page 3, Line 1) .....	168,443,266	159,237,295	144,471,844	127,170,751	111,363,166
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1 .....	0				XXX
24. Aggregate A & H reserves (Page 3, Line 2) .....	1,763	2,204	2,645	6,618	10,650
25. Deposit-type contract funds (Page 3, Line 3) .....	195,563	191,554	207,151	205,336	215,491
26. Asset valuation reserve (Page 3, Line 24.01) .....	1,720,925	1,562,549	1,464,893	1,705,242	883,296
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) .....	6,504,658	7,260,655	8,336,912	8,809,080	7,070,537
<b>Cash Flow (Page 5)</b>					
29. Net Cash from Operations (Line 11) .....	8,714,522	13,912,937	15,886,486	14,873,166	17,103,895
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital .....	8,186,017	9,823,459	10,802,099	11,514,641	8,954,165
31. Authorized control level risk - based capital .....	1,704,066	1,530,064	1,462,598	1,850,162	1,625,488
<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) .....	93.0	92.6	90.9	89.5	88.1
33. Stocks (Lines 2.1 and 2.2) .....	2.6	2.7	3.4	9.1	9.9
34. Mortgage loans on real estate(Lines 3.1 and 3.2 ) .....	2.4	0.6	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) .....	1.6	3.9	5.4	1.2	1.8
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) .....	0.3	0.1	0.2	0.2	0.0
40. Receivables for securities (Line 9) .....	0.0	0.0	0.0	0.0	0.1
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

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2020	2 2019	3 2018	4 2017	5 2016
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1) .....	0				
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1) .....	0	0			
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1), .....	3,288,605	3,246,975	3,155,826	3,079,516	3,069,924
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....		0	0	0	0
48. Affiliated mortgage loans on real estate .....					
49. All other affiliated .....					
50. Total of above Lines 44 to 49 .....	3,288,605	3,246,975	3,155,826	3,079,516	3,069,924
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) .....	1,530,650	1,168,137	609,635	104,467	939,574
53. Total admitted assets (Page 2, Line 28, Col. 3) .....	180,351,336	171,539,049	158,330,619	141,659,194	123,061,537
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income) .....	6,045,980	5,410,195	4,696,006	4,270,831	3,719,309
55. Realized capital gains (losses) (Page 4, Line 34, Column 1 ) .....	(1,386)	(23,684)	760,604	(51,615)	41,132
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) .....	38,550	112,912	(829,796)	628,244	26,139
57. Total of above Lines 54, 55 and 56 .....	6,083,144	5,499,423	4,626,814	4,847,460	3,786,580
<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) .....	26,673,276	21,610,678	19,700,516	19,009,420	16,368,394
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) .....	14,363	8,460	12,279	24,474	33,593
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) .....	9,293,409	14,779,167	17,314,809	15,881,913	18,035,336
61. Increase in A & H reserves (Line 19, Col. 6) .....	(441)	(441)	(3,973)	(4,032)	0
62. Dividends to policyholders and refunds to members (Line 30, Col. 1) .....	453	510	568	635	697
<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 .....	18.3	18.4	17.2	18.2	17.7
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 .....	0.7	0.8	1.2	1.0	1.3
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) .....	72.1	32.8	28.1	50.6	62.0
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	24.0	23.1	23.1	21.8
<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) .....	2,798	1,899	2,816	3,645	8,982
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2) .....	5,063	6,441	8,753	7,397	9,733
<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) .....	(694,976)	(751,563)	(1,123,550)	(851,083)	(376,976)
74. Ordinary - individual annuities (Page 6, Col. 4) .....	2,517	17,357	2,736	(753)	(13,498)
75. Ordinary-supplementary contracts .....	XXX	XXX	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) .....	611	8,548	11,657	8,589	6,616
82. Aggregate of all other lines of business (Page 6, Col. 8) .....	0	0	0	0	0
83. Fraternal (Page 6, Col. 7) .....	0	0			
84. Total (Page 6, Col. 1) .....	(691,848)	(725,658)	(1,109,157)	(843,247)	(383,858)

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 2020 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	2	3	4	5	6	Number of		9	
	Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance	Number of Individual Policies and Group Certificates	Amount of Insurance	7 Policies	8 Certificates	Amount of Insurance	
1. In force end of prior year .....	0	0	39,169	227,315	0	0	0	0	0	227,315
2. Issued during year .....		0	7,382	38,776		0			0	38,776
3. Reinsurance assumed .....										0
4. Revived during year .....			1	15						15
5. Increased during year (net) .....				2,135						2,135
6. Subtotals, Lines 2 to 5 .....	0	0	7,383	40,926	0	0	0	0	0	40,926
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	0
9. Totals (Lines 1 and 6 to 8) .....	0	0	46,552	268,241	0	0	0	0	0	268,241
Deductions during year:										
10. Death .....			4,414	26,407			XXX			26,407
11. Maturity .....							XXX			0
12. Disability .....							XXX			0
13. Expiry .....			272	1,692						1,692
14. Surrender .....			36	501						501
15. Lapse .....			149	1,102						1,102
16. Conversion .....							XXX	XXX	XXX	0
17. Decreased (net) .....				2						2
18. Reinsurance .....										0
19. Aggregate write-ins for decreases .....	0	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19) .....	0	0	4,871	29,704	0	0	0	0	0	29,704
21. In force end of year (b) (Line 9 minus Line 20) .....	0	0	41,681	238,537	0	0	0	0	0	238,537
22. Reinsurance ceded end of year .....	XXX		XXX	18	XXX		XXX	XXX		18
23. Line 21 minus Line 22 .....	XXX	0	XXX	238,519	XXX	(a) 0	XXX	XXX	0	238,519
<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	0
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....	0	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	0
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above) .....	0	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 .....			1,061	1,777
26. Debit ordinary insurance .....	XXX	XXX		

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 .....	7,382	38,776	41,646	237,901
35. Totals (Lines 31 to 34) .....	7,382	38,776	41,681	238,537

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 .....	38,776		237,700	837
38. Credit Life (Group and Individual) .....				
39. Group .....				
40. Totals (Lines 36 to 39) .....	38,776	0	237,700	837

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individual Policies or 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		XXX	
42. Number in force end of year if the number under insured groups is limited on a pro-rata basis .....				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
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BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Child, etc., policies and riders included in Line 2 .....	
47.1 .....	
47.2 .....	

POLICIES WITH 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 .....								
50. Extended Benefits .....			XXX	XXX				
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 2020 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 (line 5 minus line 8) .....				
10. Amount on deposit .....		(a)		(a)
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	185	0	0
2. Issued during year .....		21		
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Totals (Lines 1 to 4) .....	0	206	0	0
Deductions during year:				
6. Decreased (net) .....		25		
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....	0	25	0	0
9. In force end of year (line 5 minus line 8) .....	0	181	0	0
Income now payable:				
10. Amount of income payable .....	(a)	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance .....	XXX	(a) 1,169,020	XXX	(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		10	
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	10	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 (line 5 minus line 9) .....	0	(a)	0	(a)	8	(a)

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS		
	1	2
	Deposit Funds Contracts	Dividend Accumulations Contracts
1. In force end of prior year .....	0	35
2. Issued during year .....		
3. Reinsurance assumed .....		
4. Increased during year (net) .....		
5. Totals (Lines 1 to 4) .....	0	35
Deductions During Year:		
6. Decreased (net) .....		2
7. Reinsurance ceded .....		
8. Totals (Lines 6 and 7) .....	0	2
9. In force end of year (line 5 minus line 8) .....	0	33
10. Amount of account balance .....	(a)	(a) 195,563

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Cincinnati Equitable Life Insurance Company

**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)**

Allocated by States and Territories

States, Etc.			1	Life Contracts		Direct Business Only				
				2	3	4	5	6	7	
										Active Status (a)
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	8,071,436	18,815		0	8,090,251		0
12.	Hawaii .....	HI	N						.0	
13.	Idaho .....	ID	N						.0	
14.	Illinois .....	IL	N						.0	
15.	Indiana .....	IN	L	12,030,716	42,657		0	12,073,373		0
16.	Iowa .....	IA	N						.0	
17.	Kansas .....	KS	N						.0	
18.	Kentucky .....	KY	L	6,436,725	10,610		0	6,447,335		0
19.	Louisiana .....	LA	N						.0	
20.	Maine .....	ME	N						.0	
21.	Maryland .....	MD	N						.0	
22.	Massachusetts .....	MA	N						.0	
23.	Michigan .....	MI	L						.0	
24.	Minnesota .....	MN	N						.0	
25.	Mississippi .....	MS	L	336,881	0		0	336,881		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	8,884,311	4,150	19,302	0	8,907,763		0
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	274,877	0		0	274,877		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	0	0
59.	Subtotal .....	XXX		36,034,946	76,232	19,302	0	36,130,480		0
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		0
95.	Totals (Direct Business) .....	XXX		36,034,946	76,232	19,302	0	36,130,480		0
96.	Plus reinsurance assumed .....	XXX						0		
97.	Totals (All Business) .....	XXX		36,034,946	76,232	19,302	0	36,130,480		0
98.	Less reinsurance ceded .....	XXX		760				760		
99.	Totals (All Business) less Reinsurance Ceded .....	XXX		36,034,186	76,232	(c) 19,302	0	36,129,720		0
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		0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) .....	XXX		0	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		0
9499.	Totals (Lines 9401 through 9403 plus 9498)(Line 94 above) .....	XXX		0	0	0	0	0		0

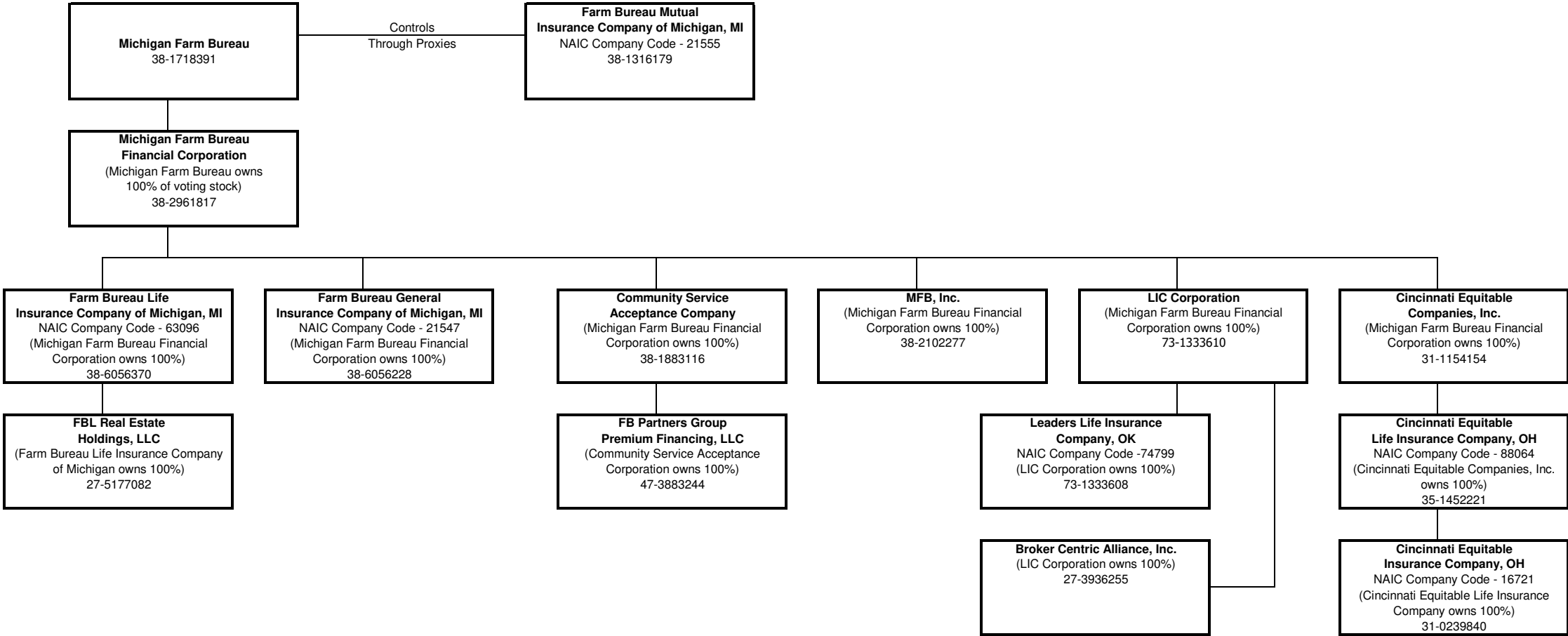
(a) Active Status Counts:  
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....7  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....0  
N - None of the above - Not allowed to write business in the state.....50  
R - Registered - Non-domiciled RRGs.....0  
Q - Qualified - Qualified or accredited reinsurer.....0

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

(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.....

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

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**OVERFLOW PAGE FOR WRITE-INS**