



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 Life Insurance Company

NAIC Group Code02440244NAIC Company Code76236Employer's ID Number31-1213778  
(Current)(Prior)

Organized under the Laws ofOhio, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

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

Incorporated/Organized07/02/1987Commenced Business02/01/1988

Statutory Home Office6200 SOUTH GILMORE ROADFAIRFIELD, OH, US 45014-5141  
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office6200 SOUTH GILMORE ROADFAIRFIELD, OH, US 45014-5141  
(Street and Number)(City or Town, State, Country and Zip Code)513-870-2000  
(Area Code) (Telephone Number)

Mail Address6200 SOUTH GILMORE ROADFAIRFIELD, OH, US 45014-5141  
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records6200 SOUTH GILMORE ROADFAIRFIELD, OH, US 45014-5141  
(Street and Number)(City or Town, State, Country and Zip Code)513-870-2000  
(Area Code) (Telephone Number)

Internet Website AddressWWW.CINFIN.COM

Statutory Statement ContactJOSEPH DAVID WURZELBACHER513-870-2000-4902  
(Name)(Area Code) (Telephone Number)  
JOE\_WURZELBACHER@CINFIN.COM513-603-5500  
(E-mail Address)(FAX Number)

OFFICERS

CEO & PRESIDENT	STEVEN JUSTUS JOHNSTON	TREASURER & VICE PRESIDENT	TODD HANCOCK PENDERY
CFO & SENIOR VICE PRESIDENT	MICHAEL JAMES SEWELL	COO & SENIOR VICE PRESIDENT	ROGER ANDREW BROWN

OTHER

TERESA CURRIN CRACAS, SENIOR VICE PRESIDENT	THERESA ANN HOFFER, SENIOR VICE PRESIDENT	THOMAS CHRISTOPHER HOGAN, SENIOR VICE PRESIDENT
MARTIN FRANCIS HOLLENBECK, SENIOR VICE PRESIDENT	JOHN SCOTT KELLINGTON, SENIOR VICE PRESIDENT	LISA ANNE LOVE, SENIOR VICE PRESIDENT
STEPHEN MICHAEL SPRAY, SENIOR VICE PRESIDENT		

DIRECTORS OR TRUSTEES

WILLIAM FORREST BAHL	ROGER ANDREW BROWN	TERESA CURRIN CRACAS
MARTIN FRANCIS HOLLENBECK	STEVEN JUSTUS JOHNSTON	JOHN SCOTT KELLINGTON
LISA ANNE LOVE	DAVID PUTNAM OSBORN	THOMAS REID SCHIFF
MICHAEL JAMES SEWELL	STEPHEN MICHAEL SPRAY	LARRY RUSSELL WEBB

State ofOhioSS:

County ofButler

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.

STEVEN JUSTUS JOHNSTON  
CEO & PRESIDENT

MICHAEL JAMES SEWELL  
CFO & SENIOR VICE PRESIDENT

TODD HANCOCK PENDERY  
TREASURER & VICE PRESIDENT

Subscribed and sworn to before me this  
12TH day of FEBRUARY 2021

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

b. If no,  
1. State the amendment number.....  
2. Date filed .....  
3. Number of pages attached.....

KAREN S. DONNER  
NOTARY PUBLIC  
OCTOBER 26, 2024



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	5
		Ordinary	Credit Life (Group and Individual)	Group	Total
1.	Life insurance	6,373,168			6,373,265
2.	Annuity considerations	300,524			300,524
3.	Deposit-type contract funds		XXX		
4.	Other considerations			XXX	
5.	Totals (Sum of Lines 1 to 4)	6,673,692		97	6,673,788
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1	Paid in cash or left on deposit				
6.2	Applied to pay renewal premiums				
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period				
6.4	Other				
6.5	Totals (Sum of Lines 6.1 to 6.4)				
Annuities:					
7.1	Paid in cash or left on deposit				
7.2	Applied to provide paid-up annuities				
7.3	Other				
7.4	Totals (Sum of Lines 7.1 to 7.3)				
8.	Grand Totals (Lines 6.5 plus 7.4)				
DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,807,125			2,807,125
10.	Matured endowments			500	500
11.	Annuity benefits	409,488			409,488
12.	Surrender values and withdrawals for life contracts	1,060,262			1,060,262
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				
14.	All other benefits, except accident and health				
15.	Totals	4,276,875		500	4,277,375
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398.	Summary of Line 13 from overflow page				
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)				

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16.	Unpaid December 31, prior year						5		5	
17.	Incurred during current year	44	2,807,125				1	500	45	2,807,625
Settled during current year:										
18.1	By payment in full	44	2,807,125				6	500	50	2,807,625
18.2	By payment on compromised claims									
18.3	Totals paid	44	2,807,125				6	500	50	2,807,625
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	44	2,807,125				6	500	50	2,807,625
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	7,876	1,901,902,623	(a)			53	63,093	7,929	1,901,965,716
21.	Issued during year	534	193,476,882						534	193,476,882
22.	Other changes to in force (Net)	(384)	(68,112,042)				(2)	(1,500)	(386)	(68,113,542)
23.	In force December 31 of current year	8,026	2,027,267,462	(a)			51	61,593	8,077	2,027,329,055

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)	72	72		22
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	47,361	47,366		(14,352)
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only				
25.5	All other (b)	558	558	314	480
25.6	Totals (sum of Lines 25.1 to 25.5)	47,918	47,924	314	(13,872)
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	47,990	47,996	314	(13,850)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	96,727				96,727
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	96,727				96,727
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....	74,813				74,813
12. Surrender values and withdrawals for life contracts .....	607				607
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	75,420				75,420
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	103	35,676,985	(a)						103	35,676,985
21. Issued during year .....	13	6,850,000							13	6,850,000
22. Other changes to in force (Net) .....	(4)	(2,135,523)							(4)	(2,135,523)
23. In force December 31 of current year .....	112	40,391,462	(a)						112	40,391,462

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	3,330,234			64	3,330,298
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	3,330,234			64	3,330,298
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	5,352,258		2,138,076		7,490,334
10. Matured endowments .....					
11. Annuity benefits .....	574,682				574,682
12. Surrender values and withdrawals for life contracts .....	178,513				178,513
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	6,105,452		2,138,076		8,243,528
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	18	5,352,258			1	2,138,076			19	7,490,334
Settled during current year:										
18.1 By payment in full .....	18	5,352,258			1	2,138,076			19	7,490,334
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	18	5,352,258			1	2,138,076			19	7,490,334
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	18	5,352,258			1	2,138,076			19	7,490,334
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,988	1,157,100,932	(a)				28	21,500	3,016	1,157,122,432
21. Issued during year .....	140	80,608,680							140	80,608,680
22. Other changes to in force (Net) .....	(90)	(25,764,558)					(1)	(1,000)	(91)	(25,765,558)
23. In force December 31 of current year .....	3,038	1,211,945,054	(a)				27	20,500	3,065	1,211,965,554

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	17,023	22,889		20,130	(34,926)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	17,023	22,889		20,130	(34,926)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	17,023	22,889		20,130	(34,926)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	5
		Ordinary	Credit Life (Group and Individual)	Group	Total
1.	Life insurance	3,615,480			3,615,562
2.	Annuity considerations	114,720			114,720
3.	Deposit-type contract funds		XXX	XXX	
4.	Other considerations				
5.	Totals (Sum of Lines 1 to 4)	3,730,200		82	3,730,282
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1	Paid in cash or left on deposit				
6.2	Applied to pay renewal premiums				
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period				
6.4	Other				
6.5	Totals (Sum of Lines 6.1 to 6.4)				
Annuities:					
7.1	Paid in cash or left on deposit				
7.2	Applied to provide paid-up annuities				
7.3	Other				
7.4	Totals (Sum of Lines 7.1 to 7.3)				
8.	Grand Totals (Lines 6.5 plus 7.4)				
DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,478,475			1,478,475
10.	Matured endowments				
11.	Annuity benefits	335,018			335,018
12.	Surrender values and withdrawals for life contracts	151,164			151,164
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				
14.	All other benefits, except accident and health				
15.	Totals	1,964,657			1,964,657
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398.	Summary of Line 13 from overflow page				
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)				

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	8	1,478,475						8	1,478,475
Settled during current year:										
18.1	By payment in full	8	1,478,475						8	1,478,475
18.2	By payment on compromised claims									
18.3	Totals paid	8	1,478,475						8	1,478,475
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	8	1,478,475						8	1,478,475
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	2,935	1,139,143,215	(a)	1	20,419,851	13	12,093	2,949	1,159,575,159
21.	Issued during year	137	80,677,506						137	80,677,506
22.	Other changes to in force (Net)	(161)	(59,780,447)			24,371			(161)	(59,756,076)
23.	In force December 31 of current year	2,911	1,160,040,274	(a)	1	20,444,222	13	12,093	2,925	1,180,496,589

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)	.68	.68		.11
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				.11
25.2	Guaranteed renewable (b)	15,319	15,453		.12
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only				
25.5	All other (b)	.21	.21		.11
25.6	Totals (sum of Lines 25.1 to 25.5)	15,340	15,474		.34
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	15,407	15,542		.45

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4
		Ordinary	Credit Life (Group and Individual)	Group	Industrial
					Total
1.	Life insurance	8,498,826			572
2.	Annuity considerations	56,717			
3.	Deposit-type contract funds		XXX		XXX
4.	Other considerations				
5.	Totals (Sum of Lines 1 to 4)	8,555,543			572
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1	Paid in cash or left on deposit				
6.2	Applied to pay renewal premiums				
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period				
6.4	Other				
6.5	Totals (Sum of Lines 6.1 to 6.4)				
Annuities:					
7.1	Paid in cash or left on deposit				
7.2	Applied to provide paid-up annuities				
7.3	Other				
7.4	Totals (Sum of Lines 7.1 to 7.3)				
8.	Grand Totals (Lines 6.5 plus 7.4)				
DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,412,882			2,000
10.	Matured endowments	1,000			711
11.	Annuity benefits	985,385			
12.	Surrender values and withdrawals for life contracts	347,203			3,499
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				
14.	All other benefits, except accident and health				
15.	Totals	5,746,470			6,210
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398.	Summary of Line 13 from overflow page				
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)				

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	43	4,413,882				4	2,711	47	4,416,593
Settled during current year:										
18.1	By payment in full	43	4,413,882				4	2,711	47	4,416,593
18.2	By payment on compromised claims									
18.3	Totals paid	43	4,413,882				4	2,711	47	4,416,593
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	43	4,413,882				4	2,711	47	4,416,593
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	10,977	2,718,166,228	(a)			304	293,084	11,281	2,718,459,312
21.	Issued during year	494	340,570,403						494	340,570,403
22.	Other changes to in force (Net)	(563)	(104,381,495)				(11)	(9,400)	(574)	(104,390,895)
23.	In force December 31 of current year	10,908	2,954,355,136	(a)			293	283,683	11,201	2,954,638,819

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	15,050	15,617	21,596	36,789
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only	114	114		22
25.5	All other (b)				
25.6	Totals (sum of Lines 25.1 to 25.5)	15,164	15,732	21,596	36,811
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	15,164	15,732	21,596	36,811

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	3,284,745				3,284,745
2. Annuity considerations .....	152,500				152,500
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	3,437,245				3,437,245
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	129,921				129,921
10. Matured endowments .....					
11. Annuity benefits .....	113,242				113,242
12. Surrender values and withdrawals for life contracts .....	166,599				166,599
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	409,762				409,762
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	10	129,921							10	129,921
Settled during current year:										
18.1 By payment in full .....	10	129,921							10	129,921
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	10	129,921							10	129,921
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	10	129,921							10	129,921
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,579	1,072,294,060	(a)				19	22,593	2,598	1,072,316,653
21. Issued during year .....	200	117,719,382							200	117,719,382
22. Other changes to in force (Net) .....	(132)	(32,821,580)					(1)	(1,000)	(133)	(32,822,580)
23. In force December 31 of current year .....	2,647	1,157,191,863	(a)				18	21,593	2,665	1,157,213,455

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	13,843	14,405		82,380	(75,100)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	13,843	14,405		82,380	(75,100)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	13,843	14,405		82,380	(75,100)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	1,450,421				1,450,421
2. Annuity considerations .....	300				300
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	1,450,721				1,450,721
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	27,000				27,000
10. Matured endowments .....					
11. Annuity benefits .....	22,737				22,737
12. Surrender values and withdrawals for life contracts .....	146,197				146,197
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	195,934				195,934
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	3	27,000							3	27,000
Settled during current year:										
18.1 By payment in full .....	3	27,000							3	27,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	3	27,000							3	27,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	3	27,000							3	27,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,239	460,181,995	(a)				2	2,501	1,241	460,184,496
21. Issued during year .....	110	61,758,282							110	61,758,282
22. Other changes to in force (Net) .....	(61)	(22,310,028)							(61)	(22,310,028)
23. In force December 31 of current year .....	1,288	499,630,249	(a)				2	2,501	1,290	499,632,750

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					11
25.2 Guaranteed renewable (b) .....	2,234	2,254			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	2,234	2,254			11
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,234	2,254			11

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code    0244		LIFE INSURANCE			NAIC Company Code    76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance .....	591,846				591,846
2.	Annuity considerations .....	17,600				17,600
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	609,446				609,446
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1	Paid in cash or left on deposit .....					
6.2	Applied to pay renewal premiums .....					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4	Other .....					
6.5	Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:						
7.1	Paid in cash or left on deposit .....					
7.2	Applied to provide paid-up annuities .....					
7.3	Other .....					
7.4	Totals (Sum of Lines 7.1 to 7.3) .....					
8.	Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits .....	115,232				115,232
10.	Matured endowments .....				593	593
11.	Annuity benefits .....	103,599				103,599
12.	Surrender values and withdrawals for life contracts .....	3,637				3,637
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14.	All other benefits, except accident and health .....					
15.	Totals .....	222,468			593	223,061
DETAILS OF WRITE-INS						
1301.	.....					
1302.	.....					
1303.	.....					
1398.	Summary of Line 13 from overflow page .....					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	2	115,232				1	593	3	115,825
Settled during current year:										
18.1	By payment in full	2	115,232				1	593	3	115,825
18.2	By payment on compromised claims									
18.3	Totals paid	2	115,232				1	593	3	115,825
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	2	115,232				1	593	3	115,825
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	617	198,528,046	(a)			4	4,593	621	198,532,639
21.	Issued during year	48	19,133,984						48	19,133,984
22.	Other changes to in force (Net)	(22)	476,049				(1)	(593)	(23)	475,457
23.	In force December 31 of current year	643	218,138,079	(a)			3	4,000	646	218,142,079

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	2,666	2,677		(263)
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only				
25.5	All other (b)				
25.6	Totals (sum of Lines 25.1 to 25.5)	2,666	2,677		(263)
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,666	2,677		(263)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	225,915			980	226,895
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	225,915			980	226,895
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....				6,750	6,750
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....	8,742				8,742
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	8,742			6,750	15,492
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....							6	6,750	6	6,750
Settled during current year:										
18.1 By payment in full .....							6	6,750	6	6,750
18.2 By payment on compromised claims .....										
18.3 Totals paid .....							6	6,750	6	6,750
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....							6	6,750	6	6,750
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	201	83,498,937	(a)				240	264,750	441	83,763,687
21. Issued during year .....	17	10,235,000							17	10,235,000
22. Other changes to in force (Net) .....	(11)	4,737,850					(8)	(8,250)	(19)	4,729,600
23. In force December 31 of current year .....	207	98,471,787	(a)				232	256,500	439	98,728,287

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,296	4,310			(678)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,296	4,310			(678)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,296	4,310			(678)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	8,768,451			356	8,768,807
2. Annuity considerations .....	379,797				379,797
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	9,148,248			356	9,148,604
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	5,866,126		2,026,872		7,892,998
10. Matured endowments .....	15,000				15,000
11. Annuity benefits .....	2,293,361				2,293,361
12. Surrender values and withdrawals for life contracts .....	799,506				799,506
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	8,973,993		2,026,872		11,000,865
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	78	5,881,126			1	2,026,872			79	7,907,998
Settled during current year:										
18.1 By payment in full .....	78	5,881,126			1	2,026,872			79	7,907,998
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	78	5,881,126			1	2,026,872			79	7,907,998
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	78	5,881,126			1	2,026,872			79	7,907,998
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	9,820	2,476,617,471	(a)				91	85,123	9,911	2,476,702,594
21. Issued during year .....	484	165,183,998							484	165,183,998
22. Other changes to in force (Net) .....	(532)	(124,542,359)							(532)	(124,542,359)
23. In force December 31 of current year .....	9,772	2,517,259,110	(a)				91	85,123	9,863	2,517,344,233

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	418	418		873	964
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					33
25.2 Guaranteed renewable (b) .....	139,323	153,445		75,214	144,832
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	60	60			11
25.5 All other (b) .....	770	770		10	32
25.6 Totals (sum of Lines 25.1 to 25.5) .....	140,153	154,275		75,224	144,907
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	140,571	154,693		76,097	145,871

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia  
NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020  
NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	17,666,069			401	17,666,470
2. Annuity considerations .....	69,130				69,130
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	17,735,199			401	17,735,600
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....	11,111,318				11,111,318
10. Matured endowments .....				1,500	1,500
11. Annuity benefits .....	449,269				449,269
12. Surrender values and withdrawals for life contracts .....	1,419,861				1,419,861
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	12,980,447			1,500	12,981,947
<b>DETAILS OF WRITE-INS</b>					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	135	11,111,318					1	1,500	136	11,112,818
Settled during current year:										
18.1 By payment in full .....	135	11,111,318					1	1,500	136	11,112,818
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	135	11,111,318					1	1,500	136	11,112,818
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	135	11,111,318					1	1,500	136	11,112,818
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	25,595	4,772,824,713	(a)				164	149,383	25,759	4,772,974,096
21. Issued during year .....	2,151	409,624,900							2,151	409,624,900
22. Other changes to in force (Net) .....	(1,889)	(291,052,146)					(7)	(6,500)	(1,896)	(291,058,646)
23. In force December 31 of current year .....	25,857	4,891,397,467	(a)				157	142,883	26,014	4,891,540,349

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	4,819	4,819		2,653	2,653
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					11
25.2 Guaranteed renewable (b) .....	284,529	310,001		453,543	601,084
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	760	760			33
25.5 All other (b) .....	214	214			44
25.6 Totals (sum of Lines 25.1 to 25.5) .....	285,503	310,975		453,543	601,173
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	290,322	315,794		456,196	603,826

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	113,126				113,126
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	113,126				113,126
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	31,101				31,101
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	31,101				31,101
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	114	30,450,765	(a)				4	4,500	118	30,455,265
21. Issued during year	10	5,900,000							10	5,900,000
22. Other changes to in force (Net)	(8)	(2,260,729)							(8)	(2,260,729)
23. In force December 31 of current year	116	34,090,036	(a)				4	4,500	120	34,094,536

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,358,646				1,358,646
2. Annuity considerations	167,995				167,995
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	1,526,641				1,526,641
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,250,000				1,250,000
10. Matured endowments					
11. Annuity benefits	38,419				38,419
12. Surrender values and withdrawals for life contracts	15,785				15,785
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	1,304,204				1,304,204
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	3	1,250,000							3	1,250,000
Settled during current year:										
18.1 By payment in full	3	1,250,000							3	1,250,000
18.2 By payment on compromised claims										
18.3 Totals paid	3	1,250,000							3	1,250,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	1,250,000							3	1,250,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1,276	536,570,616	(a)				1	1,000	1,277	536,571,616
21. Issued during year	73	47,057,985							73	47,057,985
22. Other changes to in force (Net)	(70)	(25,253,464)							(70)	(25,253,464)
23. In force December 31 of current year	1,279	558,375,137	(a)				1	1,000	1,280	558,376,137

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	3,363	3,455		38,622	50,411
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	3,363	3,455		38,622	50,411
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,363	3,455		38,622	50,411

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	20,726,487			248	20,726,735
2. Annuity considerations .....	5,520,683				5,520,683
3. Deposit-type contract funds .....	525,090	XXX		XXX	525,090
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	26,772,260			248	26,772,509
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	10,098,660				10,098,660
10. Matured endowments .....					
11. Annuity benefits .....	5,915,779				5,915,779
12. Surrender values and withdrawals for life contracts .....	1,235,690				1,235,690
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	17,250,129				17,250,129
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	142	10,098,660							142	10,098,660
Settled during current year:										
18.1 By payment in full .....	141	9,848,660							141	9,848,660
18.2 By payment on compromised claims .....	1	250,000							1	250,000
18.3 Totals paid .....	142	10,098,660							142	10,098,660
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	142	10,098,660							142	10,098,660
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	27,829	6,395,767,387	(a)		1	20,000	27	25,186	27,857	6,395,812,573
21. Issued during year .....	1,419	436,630,429							1,419	436,630,429
22. Other changes to in force (Net) .....	(1,750)	(439,948,679)							(1,750)	(439,948,679)
23. In force December 31 of current year .....	27,498	6,392,449,137	(a)		1	20,000	27	25,186	27,526	6,392,494,323

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,310	3,310			50,000
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	1,148	1,148			231
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	314,714	326,717		356,188	424,694
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	139	139			33
25.5 All other (b) .....	17	17			11
25.6 Totals (sum of Lines 25.1 to 25.5) .....	314,869	326,873		356,188	424,738
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	319,327	331,330		356,188	474,970

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	20,005,340			1,162	20,006,502
2. Annuity considerations .....	2,741,860				2,741,860
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	22,747,200			1,162	22,748,362
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	14,198,123				14,198,123
10. Matured endowments .....					
11. Annuity benefits .....	3,441,213				3,441,213
12. Surrender values and withdrawals for life contracts .....	1,497,221			2,146	1,499,367
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	19,136,557			2,146	19,138,703
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	201	14,198,123							201	14,198,123
Settled during current year:										
18.1 By payment in full .....	201	14,198,123							201	14,198,123
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	201	14,198,123							201	14,198,123
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	201	14,198,123							201	14,198,123
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	32,377	5,620,903,534	(a)			10,000	226	273,451	32,603	5,621,186,986
21. Issued during year .....	2,908	475,789,915							2,908	475,789,915
22. Other changes to in force (Net) .....	(2,824)	(355,613,995)					(5)	(10,500)	(2,829)	(355,624,495)
23. In force December 31 of current year .....	32,461	5,741,079,454	(a)			10,000	221	262,951	32,682	5,741,352,405

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	177,609	191,831		101,561	33,491
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	105	105			11
25.5 All other (b) .....	235	235			55
25.6 Totals (sum of Lines 25.1 to 25.5) .....	177,948	192,170		101,561	33,558
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	177,948	192,170		101,561	33,558

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	13,638,060			9	13,638,070
2. Annuity considerations .....	9,979,094				9,979,094
3. Deposit-type contract funds .....	376,356	XXX		XXX	376,356
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	23,993,511			9	23,993,520
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,908,932				6,908,932
10. Matured endowments .....					
11. Annuity benefits .....	12,317,548				12,317,548
12. Surrender values and withdrawals for life contracts .....	622,910				622,910
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	19,849,390				19,849,390
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	61	6,908,932							61	6,908,932
Settled during current year:										
18.1 By payment in full .....	61	6,908,932							61	6,908,932
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	61	6,908,932							61	6,908,932
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	61	6,908,932							61	6,908,932
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	16,624	4,526,032,777	(a)				6	5,000	16,630	4,526,037,777
21. Issued during year .....	1,205	402,249,616							1,205	402,249,616
22. Other changes to in force (Net) .....	(911)	(238,059,015)							(911)	(238,059,015)
23. In force December 31 of current year .....	16,918	4,690,223,379	(a)				6	5,000	16,924	4,690,228,379

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	83,983	89,249		107,157	92,280
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	7,823	7,823		700	1,108
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	91,805	97,072		107,857	93,388
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	91,805	97,072		107,857	93,388

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	4,586,715				4,586,715
2. Annuity considerations .....	303,521				303,521
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	4,890,236				4,890,236
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,217,944				4,217,944
10. Matured endowments .....	46,698				46,698
11. Annuity benefits .....	742,043				742,043
12. Surrender values and withdrawals for life contracts .....	96,788				96,788
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	5,103,474				5,103,474
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	18	4,264,642							18	4,264,642
Settled during current year:										
18.1 By payment in full .....	18	4,264,642							18	4,264,642
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	18	4,264,642							18	4,264,642
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	18	4,264,642							18	4,264,642
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	4,718	1,712,746,631	(a)				1	1,000	4,719	1,712,747,631
21. Issued during year .....	286	132,533,538							286	132,533,538
22. Other changes to in force (Net) .....	(255)	(86,375,365)							(255)	(86,375,365)
23. In force December 31 of current year .....	4,749	1,758,904,804	(a)				1	1,000	4,750	1,758,905,804

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	16,898	19,314		13,478	6,985
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	16,898	19,314		13,478	6,985
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	16,898	19,314		13,478	6,985

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	11,828,625			672	11,829,298
2. Annuity considerations .....	626,609				626,609
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	12,455,235			672	12,455,907
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,562,250			2,000	7,564,250
10. Matured endowments .....					
11. Annuity benefits .....	794,373				794,373
12. Surrender values and withdrawals for life contracts .....	765,862				765,862
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	9,122,485			2,000	9,124,485
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	98	7,562,250					2	2,000	100	7,564,250
Settled during current year:										
18.1 By payment in full .....	98	7,562,250					2	2,000	100	7,564,250
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	98	7,562,250					2	2,000	100	7,564,250
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	98	7,562,250					2	2,000	100	7,564,250
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	18,181	3,546,382,880	(a)				242	243,990	18,423	3,546,626,870
21. Issued during year .....	1,308	246,669,051							1,308	246,669,051
22. Other changes to in force (Net) .....	(1,511)	(240,950,668)					2	1,875	(1,509)	(240,948,793)
23. In force December 31 of current year .....	17,978	3,552,101,263	(a)				244	245,865	18,222	3,552,347,127

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	188	188			.55
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	183,033	188,464		122,245	(15,738)
25.3 Non-renewable for stated reasons only (b) .....					286
25.4 Other accident only .....	.86	.86			.33
25.5 All other (b) .....	1,680	1,680		710	1,318
25.6 Totals (sum of Lines 25.1 to 25.5) .....	184,800	190,230		122,955	(14,101)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	184,987	190,418		122,955	(14,046)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana  
NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020  
NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,534,900				1,534,900
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	1,534,900				1,534,900
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	153,364				153,364
10. Matured endowments .....					
11. Annuity benefits .....	230,998				230,998
12. Surrender values and withdrawals for life contracts .....	8,560				8,560
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	392,923				392,923
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	6	153,364							6	153,364
Settled during current year:										
18.1 By payment in full .....	6	153,364							6	153,364
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	6	153,364							6	153,364
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	6	153,364							6	153,364
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,270	315,066,791	(a)				7	5,500	1,277	315,072,291
21. Issued during year .....	157	65,790,797							157	65,790,797
22. Other changes to in force (Net) .....	(38)	4,556,793							(38)	4,556,793
23. In force December 31 of current year .....	1,389	385,414,381	(a)				7	5,500	1,396	385,419,881

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					11
25.2 Guaranteed renewable (b) .....	1,166	1,176			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	40	40			11
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,206	1,216			22
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,206	1,216			22

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons  
insured under indemnity only products .....0 .





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	286,427				286,427
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	286,427				286,427
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....	18,765				18,765
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	18,765				18,765
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	292	66,633,990	(a)				2	2,000	294	66,635,990
21. Issued during year .....	21	5,305,000							21	5,305,000
22. Other changes to in force (Net) .....	(12)	(769,801)							(12)	(769,801)
23. In force December 31 of current year .....	301	71,169,189	(a)				2	2,000	303	71,171,189

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code		0244		LIFE INSURANCE		NAIC Company Code		76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total			
1.	Life insurance .....	4,339,530			404	4,339,934			
2.	Annuity considerations .....	87,171				87,171			
3.	Deposit-type contract funds .....		XXX		XXX				
4.	Other considerations .....								
5.	Totals (Sum of Lines 1 to 4) .....	4,426,701			404	4,427,105			
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS									
Life insurance:									
6.1	Paid in cash or left on deposit .....								
6.2	Applied to pay renewal premiums .....								
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period .....								
6.4	Other .....								
6.5	Totals (Sum of Lines 6.1 to 6.4) .....								
Annuities:									
7.1	Paid in cash or left on deposit .....								
7.2	Applied to provide paid-up annuities .....								
7.3	Other .....								
7.4	Totals (Sum of Lines 7.1 to 7.3) .....								
8.	Grand Totals (Lines 6.5 plus 7.4) .....								
DIRECT CLAIMS AND BENEFITS PAID									
9.	Death benefits .....	1,735,000			750	1,735,750			
10.	Matured endowments .....								
11.	Annuity benefits .....	219,297				219,297			
12.	Surrender values and withdrawals for life contracts .....	14,248			3,185	17,434			
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....								
14.	All other benefits, except accident and health .....								
15.	Totals .....	1,968,546			3,935	1,972,481			
DETAILS OF WRITE-INS									
1301.	.....								
1302.	.....								
1303.	.....								
1398.	Summary of Line 13 from overflow page .....								
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....								

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	8	1,735,000				1	750	9	1,735,750
Settled during current year:										
18.1	By payment in full	8	1,735,000				1	750	9	1,735,750
18.2	By payment on compromised claims									
18.3	Totals paid	8	1,735,000				1	750	9	1,735,750
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	8	1,735,000				1	750	9	1,735,750
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	3,989	1,505,063,261	(a)			185	182,852	4,174	1,505,246,113
21.	Issued during year	289	136,647,475						289	136,647,475
22.	Other changes to in force (Net)	(171)	(78,722,827)				(4)	(6,250)	(175)	(78,729,077)
23.	In force December 31 of current year	4,107	1,562,987,909	(a)			181	176,602	4,288	1,563,164,511

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	37,231	37,534		1,862
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only				
25.5	All other (b)	45	45		11
25.6	Totals (sum of Lines 25.1 to 25.5)	37,276	37,579		1,873
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	37,276	37,579		1,873

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,456,378				1,456,378
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	1,456,378				1,456,378
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	569,634		50,000		619,634
10. Matured endowments .....				593	593
11. Annuity benefits .....	72,630				72,630
12. Surrender values and withdrawals for life contracts .....	17,113				17,113
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	659,376		50,000	593	709,968
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	5	569,634			1	50,000	1	593	7	620,226
Settled during current year:										
18.1 By payment in full .....	5	569,634			1	50,000	1	593	7	620,226
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	5	569,634			1	50,000	1	593	7	620,226
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	5	569,634			1	50,000	1	593	7	620,226
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,217	463,815,247	(a)				14	14,278	1,231	463,829,524
21. Issued during year .....	95	65,750,004							95	65,750,004
22. Other changes to in force (Net) .....	(44)	(14,781,704)					(2)	(1,593)	(46)	(14,783,297)
23. In force December 31 of current year .....	1,268	514,783,547	(a)				12	12,685	1,280	514,796,232

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	14,137	14,162			(3,947)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	14,137	14,162			(3,947)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	14,137	14,162			(3,947)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons  
insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code    0244		LIFE INSURANCE			NAIC Company Code    76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance .....	16,452,734			6,043	16,458,777
2.	Annuity considerations .....	1,527,298				1,527,298
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	17,980,032			6,043	17,986,075
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1	Paid in cash or left on deposit .....					
6.2	Applied to pay renewal premiums .....					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4	Other .....					
6.5	Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:						
7.1	Paid in cash or left on deposit .....					
7.2	Applied to provide paid-up annuities .....					
7.3	Other .....					
7.4	Totals (Sum of Lines 7.1 to 7.3) .....					
8.	Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits .....	5,350,383			30,500	5,380,883
10.	Matured endowments .....	14,773			3,685	18,458
11.	Annuity benefits .....	2,568,925		9,266		2,578,191
12.	Surrender values and withdrawals for life contracts .....	488,342			11,690	500,031
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14.	All other benefits, except accident and health .....					
15.	Totals .....	8,422,423		9,266	45,875	8,477,564
DETAILS OF WRITE-INS						
1301.	.....					
1302.	.....					
1303.	.....					
1398.	Summary of Line 13 from overflow page .....					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	85	5,365,156				33	34,185	118	5,399,341
Settled during current year:										
18.1	By payment in full	85	5,365,156				33	34,185	118	5,399,341
18.2	By payment on compromised claims									
18.3	Totals paid	85	5,365,156				33	34,185	118	5,399,341
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	85	5,365,156				33	34,185	118	5,399,341
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	20,293	5,586,879,369	(a)			2,159	2,421,208	22,452	5,589,300,577
21.	Issued during year	969	388,210,035						969	388,210,035
22.	Other changes to in force (Net)	(1,059)	(275,451,439)				(75)	(82,750)	(1,134)	(275,534,189)
23.	In force December 31 of current year	20,203	5,699,637,965	(a)			2,084	2,338,458	22,287	5,701,976,423

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:				
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	243,555	322,295	242,946	425,526
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only	34	34		22
25.5	All other (b)	385	385		110
25.6	Totals (sum of Lines 25.1 to 25.5)	243,974	322,714	242,946	425,658
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	243,974	322,714	242,946	425,658

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	11,596,287				11,596,287
2. Annuity considerations .....	5,536,983				5,536,983
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	17,133,270				17,133,270
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,572,908				7,572,908
10. Matured endowments .....					
11. Annuity benefits .....	6,383,641				6,383,641
12. Surrender values and withdrawals for life contracts .....	219,654				219,654
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	14,176,203				14,176,203
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	30	7,572,908							30	7,572,908
Settled during current year:										
18.1 By payment in full .....	30	7,572,908							30	7,572,908
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	30	7,572,908							30	7,572,908
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	30	7,572,908							30	7,572,908
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	12,637	4,937,990,750	(a)				10	9,500	12,647	4,938,000,250
21. Issued during year .....	762	389,215,948							762	389,215,948
22. Other changes to in force (Net) .....	(654)	(256,500,076)							(654)	(256,500,076)
23. In force December 31 of current year .....	12,745	5,070,706,623	(a)				10	9,500	12,755	5,070,716,123

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	12,874	12,874		21,545	21,545
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	63,877	72,445		55,121	61,661
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	11	11			11
25.6 Totals (sum of Lines 25.1 to 25.5) .....	63,888	72,456		55,121	61,673
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	76,762	85,330		76,666	83,218

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi  
NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020  
NAIC Company Code 76236

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	2,027,835			.85	2,027,920
2. Annuity considerations .....	300				300
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	2,028,135			85	2,028,220
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....	1,660,348			3,000	1,663,348
10. Matured endowments .....					
11. Annuity benefits .....	10,820				10,820
12. Surrender values and withdrawals for life contracts .....	2,535				2,535
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	1,673,703			3,000	1,676,703
<b>DETAILS OF WRITE-INS</b>					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	5	1,660,348					2	3,000	7	1,663,348
Settled during current year:										
18.1 By payment in full .....	5	1,660,348					2	3,000	7	1,663,348
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	5	1,660,348					2	3,000	7	1,663,348
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	5	1,660,348					2	3,000	7	1,663,348
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	1,222	302,081,203	(a)				19	19,936	1,241	302,101,139
21. Issued during year .....	267	75,124,100							267	75,124,100
22. Other changes to in force (Net) .....	(85)	(17,238,300)					(2)	(2,750)	(87)	(17,241,050)
23. In force December 31 of current year .....	1,404	359,967,003	(a)				17	17,186	1,421	359,984,189

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	1,027	1,038			18
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	13	13			11
25.5 All other (b) .....	128	128			22
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,168	1,178			51
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,168	1,178			51

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	10,457,412				10,457,412
2. Annuity considerations .....	1,118,325				1,118,325
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	11,575,736				11,575,736
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,492,573				7,492,573
10. Matured endowments .....					
11. Annuity benefits .....	996,003				996,003
12. Surrender values and withdrawals for life contracts .....	417,843				417,843
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	8,906,419				8,906,419
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	67	7,492,573							67	7,492,573
Settled during current year:										
18.1 By payment in full .....	67	7,492,573							67	7,492,573
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	67	7,492,573							67	7,492,573
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	67	7,492,573							67	7,492,573
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	11,944	3,342,945,016	(a)				8	8,000	11,952	3,342,953,016
21. Issued during year .....	1,207	321,053,819							1,207	321,053,819
22. Other changes to in force (Net) .....	(705)	(181,369,542)							(705)	(181,369,542)
23. In force December 31 of current year .....	12,446	3,482,629,293	(a)				8	8,000	12,454	3,482,637,293

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	41,960	43,285		37,600	30,247
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	61	61			22
25.6 Totals (sum of Lines 25.1 to 25.5) .....	42,021	43,346		37,600	30,269
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	42,021	43,346		37,600	30,269

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code		0244		LIFE INSURANCE		NAIC Company Code		76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total			
1. Life insurance .....		2,569,156				2,569,156			
2. Annuity considerations .....		680				680			
3. Deposit-type contract funds .....			XXX		XXX				
4. Other considerations .....									
5. Totals (Sum of Lines 1 to 4) .....		2,569,835				2,569,835			
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS									
Life insurance:									
6.1 Paid in cash or left on deposit .....									
6.2 Applied to pay renewal premiums .....									
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....									
6.4 Other .....									
6.5 Totals (Sum of Lines 6.1 to 6.4) .....									
Annuities:									
7.1 Paid in cash or left on deposit .....									
7.2 Applied to provide paid-up annuities .....									
7.3 Other .....									
7.4 Totals (Sum of Lines 7.1 to 7.3) .....									
8. Grand Totals (Lines 6.5 plus 7.4) .....									
DIRECT CLAIMS AND BENEFITS PAID									
9. Death benefits .....		285,948				285,948			
10. Matured endowments .....									
11. Annuity benefits .....		6,668				6,668			
12. Surrender values and withdrawals for life contracts .....		16,112				16,112			
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....									
14. All other benefits, except accident and health .....									
15. Totals .....		308,728				308,728			
DETAILS OF WRITE-INS									
1301. ....									
1302. ....									
1303. ....									
1398. Summary of Line 13 from overflow page .....									
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....									

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	4	285,948							4	285,948
Settled during current year:										
18.1 By payment in full	4	285,948							4	285,948
18.2 By payment on compromised claims										
18.3 Totals paid	4	285,948							4	285,948
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	285,948							4	285,948
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2,039	860,462,225	(a)				1	1,000	2,040	860,463,225
21. Issued during year	218	122,565,006							218	122,565,006
22. Other changes to in force (Net)	(105)	(40,459,512)							(105)	(40,459,512)
23. In force December 31 of current year	2,152	942,567,719	(a)				1	1,000	2,153	942,568,719

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	4,798	4,840			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	4,798	4,840			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,798	4,840			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska  
NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020  
NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	3,058,092				3,058,092
2. Annuity considerations .....	77,485				77,485
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	3,135,576				3,135,576
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	422,739				422,739
10. Matured endowments .....					
11. Annuity benefits .....	1,031,065				1,031,065
12. Surrender values and withdrawals for life contracts .....	73,248				73,248
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	1,527,051				1,527,051
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	6	422,739							6	422,739
Settled during current year:										
18.1 By payment in full .....	6	422,739							6	422,739
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	6	422,739							6	422,739
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	6	422,739							6	422,739
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,863	975,544,777	(a)				1	500	2,864	975,545,277
21. Issued during year .....	247	143,866,169							247	143,866,169
22. Other changes to in force (Net) .....	(139)	(37,130,455)							(139)	(37,130,455)
23. In force December 31 of current year .....	2,971	1,082,280,491	(a)				1	500	2,972	1,082,280,991

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	16,744	16,898			16
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	779	779			55
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	17,523	17,677			71
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	17,523	17,677			71

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code		0244		LIFE INSURANCE		NAIC Company Code		76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5			
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total			
1. Life insurance .....		606,388			307	606,695			
2. Annuity considerations .....		3,890				3,890			
3. Deposit-type contract funds .....			XXX		XXX				
4. Other considerations .....									
5. Totals (Sum of Lines 1 to 4) .....		610,278			307	610,585			
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS									
Life insurance:									
6.1 Paid in cash or left on deposit .....									
6.2 Applied to pay renewal premiums .....									
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....									
6.4 Other .....									
6.5 Totals (Sum of Lines 6.1 to 6.4) .....									
Annuities:									
7.1 Paid in cash or left on deposit .....									
7.2 Applied to provide paid-up annuities .....									
7.3 Other .....									
7.4 Totals (Sum of Lines 7.1 to 7.3) .....									
8. Grand Totals (Lines 6.5 plus 7.4) .....									
DIRECT CLAIMS AND BENEFITS PAID									
9. Death benefits .....		614,294				614,294			
10. Matured endowments .....									
11. Annuity benefits .....		32,294				32,294			
12. Surrender values and withdrawals for life contracts .....		11,629				11,629			
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....									
14. All other benefits, except accident and health .....									
15. Totals .....		658,218				658,218			
DETAILS OF WRITE-INS									
1301. ....									
1302. ....									
1303. ....									
1398. Summary of Line 13 from overflow page .....									
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....									

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	4	614,294							4	614,294
Settled during current year:										
18.1 By payment in full	4	614,294							4	614,294
18.2 By payment on compromised claims										
18.3 Totals paid	4	614,294							4	614,294
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	614,294							4	614,294
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	517	169,296,952	(a)				31	34,186	548	169,331,138
21. Issued during year	32	12,950,000							32	12,950,000
22. Other changes to in force (Net)	(6)	(3,561,276)							(6)	(3,561,276)
23. In force December 31 of current year	543	178,685,677	(a)				31	34,186	574	178,719,862

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

ACCIDENT AND HEALTH INSURANCE

1		2		3		4		5	
Direct Premiums		Direct Premiums Earned		Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business		Direct Losses Paid		Direct Losses Incurred	
24. Group Policies (b)									
24.1 Federal Employees Health Benefits Plan premium (b)									
24.2 Credit (Group and Individual)									
24.3 Collectively renewable policies/certificates (b)									
24.4 Medicare Title XVIII exempt from state taxes or fees									
Other Individual Policies:									
25.1 Non-cancelable (b)									
25.2 Guaranteed renewable (b)		4,579		4,644				12	
25.3 Non-renewable for stated reasons only (b)									
25.4 Other accident only									
25.5 All other (b)		81		81				11	
25.6 Totals (sum of Lines 25.1 to 25.5)		4,660		4,725				23	
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)		4,660		4,725				23	

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	670,875				670,875
2. Annuity considerations .....	7,500				7,500
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	678,375				678,375
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,075,000				1,075,000
10. Matured endowments .....					
11. Annuity benefits .....	10,330				10,330
12. Surrender values and withdrawals for life contracts .....	1,653				1,653
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	1,086,983				1,086,983
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	2	1,075,000							2	1,075,000
Settled during current year:										
18.1 By payment in full .....	2	1,075,000							2	1,075,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	2	1,075,000							2	1,075,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	2	1,075,000							2	1,075,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	612	217,847,798	(a)						612	217,847,798
21. Issued during year .....	38	20,690,007							38	20,690,007
22. Other changes to in force (Net) .....	(19)	(3,223,515)							(19)	(3,223,515)
23. In force December 31 of current year .....	631	235,314,290	(a)						631	235,314,290

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,294	4,299			(294)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,294	4,299			(294)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,294	4,299			(294)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4
		Ordinary	Credit Life (Group and Individual)	Group	Industrial
					Total
1.	Life insurance	1,617,354			1,617,354
2.	Annuity considerations	50,300			50,300
3.	Deposit-type contract funds		XXX		XXX
4.	Other considerations				
5.	Totals (Sum of Lines 1 to 4)	1,667,654			1,667,654
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1	Paid in cash or left on deposit				
6.2	Applied to pay renewal premiums				
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period				
6.4	Other				
6.5	Totals (Sum of Lines 6.1 to 6.4)				
Annuities:					
7.1	Paid in cash or left on deposit				
7.2	Applied to provide paid-up annuities				
7.3	Other				
7.4	Totals (Sum of Lines 7.1 to 7.3)				
8.	Grand Totals (Lines 6.5 plus 7.4)				
DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	410,000			410,000
10.	Matured endowments				
11.	Annuity benefits	172,010			172,010
12.	Surrender values and withdrawals for life contracts	11,874			11,874
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				
14.	All other benefits, except accident and health				
15.	Totals	593,884			593,884
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398.	Summary of Line 13 from overflow page				
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)				

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	7	410,000						7	410,000
Settled during current year:										
18.1	By payment in full	7	410,000						7	410,000
18.2	By payment on compromised claims									
18.3	Totals paid	7	410,000						7	410,000
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	7	410,000						7	410,000
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	1,156	474,868,265	(a)			27	32,778	1,183	474,901,043
21.	Issued during year	224	105,095,424						224	105,095,424
22.	Other changes to in force (Net)	(72)	(20,630,760)						(72)	(20,630,760)
23.	In force December 31 of current year	1,308	559,332,929	(a)			27	32,778	1,335	559,365,707

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)	32	32		11
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	60	64		12
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only				
25.5	All other (b)				
25.6	Totals (sum of Lines 25.1 to 25.5)	60	64		12
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	92	96		23

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	605,741				605,741
2. Annuity considerations .....	76,385				76,385
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	682,126				682,126
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	150,000			1,000	151,000
10. Matured endowments .....					
11. Annuity benefits .....	369,904				369,904
12. Surrender values and withdrawals for life contracts .....	6,075				6,075
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	525,980			1,000	526,980
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	4	150,000					2	1,000	6	151,000
Settled during current year:										
18.1 By payment in full .....	4	150,000					2	1,000	6	151,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	4	150,000					2	1,000	6	151,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	4	150,000					2	1,000	6	151,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	527	144,446,193	(a)				3	2,501	530	144,448,693
21. Issued during year .....	30	11,215,005							30	11,215,005
22. Other changes to in force (Net) .....	(22)	(2,654,790)					(2)	(1,500)	(24)	(2,656,290)
23. In force December 31 of current year .....	535	153,006,408	(a)				1	1,001	536	153,007,408

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	10,312	10,343			(1,744)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	10,312	10,343			(1,744)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	10,312	10,343			(1,744)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	452,148				452,148
2. Annuity considerations	12,000				12,000
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	464,148				464,148
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	774,404			1,000	775,404
10. Matured endowments				593	593
11. Annuity benefits	136,939				136,939
12. Surrender values and withdrawals for life contracts	11,102				11,102
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	922,446			1,593	924,039
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	5	774,404					2	1,593	7	775,997
Settled during current year:										
18.1 By payment in full	5	774,404					2	1,593	7	775,997
18.2 By payment on compromised claims										
18.3 Totals paid	5	774,404					2	1,593	7	775,997
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	5	774,404					2	1,593	7	775,997
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	480	195,380,010	(a)				39	35,573	519	195,415,583
21. Issued during year										
22. Other changes to in force (Net)	(16)	(5,729,274)					(3)	(3,500)	(19)	(5,732,774)
23. In force December 31 of current year	464	189,650,736	(a)				36	32,073	500	189,682,809

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	(911)	(840)		155,486	366,297
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	(911)	(840)		155,486	366,297
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	(911)	(840)		155,486	366,297

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	15,376,442			123	15,376,565
2. Annuity considerations .....	306,362				306,362
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	15,682,804			123	15,682,927
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	5,652,620		639,037	2,000	6,293,657
10. Matured endowments .....					
11. Annuity benefits .....	739,534		1,246		740,779
12. Surrender values and withdrawals for life contracts .....	1,181,947				1,181,947
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	7,574,100		640,283	2,000	8,216,383
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	106	5,652,620			2	639,037	2	2,000	110	6,293,657
Settled during current year:										
18.1 By payment in full .....	106	5,652,620			2	639,037	2	2,000	110	6,293,657
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	106	5,652,620			2	639,037	2	2,000	110	6,293,657
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	106	5,652,620			2	639,037	2	2,000	110	6,293,657
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	18,644	4,378,674,715	(a)				119	119,096	18,763	4,378,793,811
21. Issued during year .....	781	312,683,357							781	312,683,357
22. Other changes to in force (Net) .....	(1,056)	(201,370,649)					(3)	(2,500)	(1,059)	(201,373,149)
23. In force December 31 of current year .....	18,369	4,489,987,423	(a)				116	116,596	18,485	4,490,104,019

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	204,617	255,950		124,746	150,367
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	202	202			55
25.5 All other (b) .....	355	355			121
25.6 Totals (sum of Lines 25.1 to 25.5) .....	205,174	256,507		124,746	150,543
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	205,174	256,507		124,746	150,543

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,891,628				1,891,628
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	1,891,628				1,891,628
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	250,000				250,000
10. Matured endowments .....					
11. Annuity benefits .....	258,897				258,897
12. Surrender values and withdrawals for life contracts .....	12,990				12,990
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	521,887				521,887
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	1	250,000							1	250,000
Settled during current year:										
18.1 By payment in full .....	1	250,000							1	250,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1	250,000							1	250,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1	250,000							1	250,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,746	732,026,997	(a)						1,746	732,026,997
21. Issued during year .....	141	71,752,356							141	71,752,356
22. Other changes to in force (Net) .....	(78)	(19,384,518)							(78)	(19,384,518)
23. In force December 31 of current year .....	1,809	784,394,835	(a)						1,809	784,394,835

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,725	3,725		26,691	26,691
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	2,653	2,676			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	2,653	2,676			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	6,378	6,401		26,691	26,691

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	53,651,243		15,768	16,581	53,683,592
2. Annuity considerations	3,342,744				3,342,744
3. Deposit-type contract funds	19,919	XXX		XXX	19,919
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	57,013,906		15,768	16,581	57,046,254
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	35,002,243		5,322,696	55,081	40,380,020
10. Matured endowments	60,665			13,408	74,072
11. Annuity benefits	4,427,196		10,318		4,437,514
12. Surrender values and withdrawals for life contracts	5,152,739		3,216,076	28,796	8,397,611
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	44,642,843		8,549,091	97,284	53,289,217
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	518	35,062,907			11	5,322,696	83	68,489	612	40,454,092
Settled during current year:										
18.1 By payment in full	518	35,062,907			11	5,322,696	83	68,489	612	40,454,092
18.2 By payment on compromised claims										
18.3 Totals paid	518	35,062,907			11	5,322,696	83	68,489	612	40,454,092
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	518	35,062,907			11	5,322,696	83	68,489	612	40,454,092
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	76,361	15,973,249,593	(a)		5	2,289,842,384	10,583	10,315,830	86,949	18,273,407,807
21. Issued during year	3,875	1,064,749,823				18,832,778			3,875	1,083,582,601
22. Other changes to in force (Net)	(4,603)	(883,600,920)				28,120,508	(362)	(365,534)	(4,965)	(855,845,946)
23. In force December 31 of current year	75,633	16,154,398,497	(a)		5	2,336,795,670	10,221	9,950,296	85,859	18,501,144,462

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	5,212	5,160		1,447,540	11,399
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)	703	703		1,009	1,122
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					22
25.2 Guaranteed renewable (b)	911,048	1,153,832		911,435	865,391
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only	1,082	1,082			441
25.5 All other (b)	3,380	3,380			628
25.6 Totals (sum of Lines 25.1 to 25.5)	915,510	1,158,294		911,435	866,482
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	921,425	1,164,157		2,359,984	879,003

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,540,066				1,540,066
2. Annuity considerations .....	74,743				74,743
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	1,614,809				1,614,809
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	361,177				361,177
10. Matured endowments .....					
11. Annuity benefits .....	64,824				64,824
12. Surrender values and withdrawals for life contracts .....	23,228				23,228
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	449,229				449,229
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	16	361,177							16	361,177
Settled during current year:										
18.1 By payment in full .....	16	361,177							16	361,177
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	16	361,177							16	361,177
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	16	361,177							16	361,177
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,994	374,450,457	(a)				6	6,000	2,000	374,456,457
21. Issued during year .....	211	66,441,652							211	66,441,652
22. Other changes to in force (Net) .....	(189)	(15,850,443)							(189)	(15,850,443)
23. In force December 31 of current year .....	2,016	425,041,666	(a)				6	6,000	2,022	425,047,666

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					22
25.2 Guaranteed renewable (b) .....	7,460	7,525			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	7,460	7,525			22
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,460	7,525			22

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code 0244		LIFE INSURANCE			NAIC Company Code 76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance .....	2,914,897				2,914,897
2.	Annuity considerations .....	1,008				1,008
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	2,915,905				2,915,905
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1	Paid in cash or left on deposit .....					
6.2	Applied to pay renewal premiums .....					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4	Other .....					
6.5	Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:						
7.1	Paid in cash or left on deposit .....					
7.2	Applied to provide paid-up annuities .....					
7.3	Other .....					
7.4	Totals (Sum of Lines 7.1 to 7.3) .....					
8.	Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits .....	85,625				85,625
10.	Matured endowments .....					
11.	Annuity benefits .....	6,750				6,750
12.	Surrender values and withdrawals for life contracts .....					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14.	All other benefits, except accident and health .....					
15.	Totals .....	92,375				92,375
DETAILS OF WRITE-INS						
1301.	.....					
1302.	.....					
1303.	.....					
1398.	Summary of Line 13 from overflow page .....					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	3	85,625						3	85,625
Settled during current year:										
18.1	By payment in full	3	85,625						3	85,625
18.2	By payment on compromised claims									
18.3	Totals paid	3	85,625						3	85,625
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	3	85,625						3	85,625
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	2,052	878,637,807	(a)			3	6,000	2,055	878,643,807
21.	Issued during year	179	89,220,003						179	89,220,003
22.	Other changes to in force (Net)	(156)	(33,599,855)						(156)	(33,599,855)
23.	In force December 31 of current year	2,075	934,257,955	(a)			3	6,000	2,078	934,263,955

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	771	839		12
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only	4	4		11
25.5	All other (b)	25	25		11
25.6	Totals (sum of Lines 25.1 to 25.5)	799	867		34
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	799	867		34

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

NAIC Group Code      0244		LIFE INSURANCE			NAIC Company Code    76236	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance .....	24,032,461			5,166	24,037,627
2.	Annuity considerations .....	2,430,469				2,430,469
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	26,462,930			5,166	26,468,096
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1	Paid in cash or left on deposit .....					
6.2	Applied to pay renewal premiums .....					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4	Other .....					
6.5	Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:						
7.1	Paid in cash or left on deposit .....					
7.2	Applied to provide paid-up annuities .....					
7.3	Other .....					
7.4	Totals (Sum of Lines 7.1 to 7.3) .....					
8.	Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits .....	12,934,466			29,343	12,963,808
10.	Matured endowments .....	11,415			7,638	19,053
11.	Annuity benefits .....	6,660,219				6,660,219
12.	Surrender values and withdrawals for life contracts .....	1,066,459			2,924	1,069,383
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14.	All other benefits, except accident and health .....					
15.	Totals .....	20,672,558			39,905	20,712,463
DETAILS OF WRITE-INS						
1301.	.....					
1302.	.....					
1303.	.....					
1398.	Summary of Line 13 from overflow page .....					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	161	12,945,880				41	36,981	202	12,982,861
Settled during current year:										
18.1	By payment in full	161	12,945,880				41	36,981	202	12,982,861
18.2	By payment on compromised claims									
18.3	Totals paid	161	12,945,880				41	36,981	202	12,982,861
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	161	12,945,880				41	36,981	202	12,982,861
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	32,099	7,049,047,529	(a)			2,176	2,096,806	34,275	7,051,144,335
21.	Issued during year	1,962	563,688,266						1,962	563,688,266
22.	Other changes to in force (Net)	(1,643)	(365,368,908)				(73)	(74,431)	(1,716)	(365,443,338)
23.	In force December 31 of current year	32,418	7,247,366,887	(a)			2,103	2,022,376	34,521	7,249,389,263

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)	168	168		33
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:				
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	286,911	292,531	111,330	108,500
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only	47	47		33
25.5	All other (b)	497	497		143
25.6	Totals (sum of Lines 25.1 to 25.5)	287,455	293,075	111,330	108,676
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	287,622	293,242	111,330	108,709

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	145,132				145,132
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	145,132				145,132
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	141	53,044,720	(a)		1	12,500	1	1,000	143	53,058,220
21. Issued during year .....	10	2,440,000							10	2,440,000
22. Other changes to in force (Net) .....	(6)	(7,405,000)				(2,500)			(6)	(7,407,500)
23. In force December 31 of current year .....	145	48,079,720	(a)		1	10,000	1	1,000	147	48,090,720

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	5,552,747			158	5,552,905
2. Annuity considerations .....	3,425				3,425
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	5,556,172			158	5,556,330
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	818,344			2,000	820,344
10. Matured endowments .....					
11. Annuity benefits .....	1,577,792				1,577,792
12. Surrender values and withdrawals for life contracts .....	386,996			480	387,475
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	2,783,132			2,480	2,785,611
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	38	818,344					2	2,000	40	820,344
Settled during current year:										
18.1 By payment in full .....	38	818,344					2	2,000	40	820,344
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	38	818,344					2	2,000	40	820,344
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	38	818,344					2	2,000	40	820,344
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	7,378	1,475,787,342	(a)				43	34,528	7,421	1,475,821,870
21. Issued during year .....	570	119,209,420							570	119,209,420
22. Other changes to in force (Net) .....	(386)	(50,683,237)					(7)	(7,000)	(393)	(50,690,237)
23. In force December 31 of current year .....	7,562	1,544,313,526	(a)				36	27,528	7,598	1,544,341,054

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					22
25.2 Guaranteed renewable (b) .....	107,930	137,162		56,557	431,516
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	8	8			
25.5 All other (b) .....	148	148			77
25.6 Totals (sum of Lines 25.1 to 25.5) .....	108,086	137,318		56,557	431,615
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	108,086	137,318		56,557	431,615

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	5
		Ordinary	Credit Life (Group and Individual)	Group	Total
1.	Life insurance	1,920,591			1,920,591
2.	Annuity considerations	583,166			583,166
3.	Deposit-type contract funds		XXX		XXX
4.	Other considerations				
5.	Totals (Sum of Lines 1 to 4)	2,503,758			2,503,758
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1	Paid in cash or left on deposit				
6.2	Applied to pay renewal premiums				
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period				
6.4	Other				
6.5	Totals (Sum of Lines 6.1 to 6.4)				
Annuities:					
7.1	Paid in cash or left on deposit				
7.2	Applied to provide paid-up annuities				
7.3	Other				
7.4	Totals (Sum of Lines 7.1 to 7.3)				
8.	Grand Totals (Lines 6.5 plus 7.4)				
DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	700,000			700,000
10.	Matured endowments				
11.	Annuity benefits	214,877			214,877
12.	Surrender values and withdrawals for life contracts	41,858			41,858
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				
14.	All other benefits, except accident and health				
15.	Totals	956,735			956,735
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398.	Summary of Line 13 from overflow page				
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)				

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	3	700,000						3	700,000
Settled during current year:										
18.1	By payment in full	3	700,000						3	700,000
18.2	By payment on compromised claims									
18.3	Totals paid	3	700,000						3	700,000
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	3	700,000						3	700,000
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	1,934	684,536,217	(a)			4	3,000	1,938	684,539,217
21.	Issued during year	219	77,005,033						219	77,005,033
22.	Other changes to in force (Net)	(68)	(25,193,030)						(68)	(25,193,030)
23.	In force December 31 of current year	2,085	736,348,220	(a)			4	3,000	2,089	736,351,220

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)	1,007	1,007	4,764	4,764
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	4,164	4,243		12
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only	106	106		11
25.5	All other (b)				
25.6	Totals (sum of Lines 25.1 to 25.5)	4,270	4,349		23
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,277	5,356	4,764	4,786

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	11,595,396			1,235	11,596,631
2. Annuity considerations .....	5,675,448				5,675,448
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	17,270,844			1,235	17,272,078
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,708,417				6,708,417
10. Matured endowments .....				1,000	1,000
11. Annuity benefits .....	3,029,393				3,029,393
12. Surrender values and withdrawals for life contracts .....	920,218				920,218
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	10,658,028			1,000	10,659,028
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	63	6,708,417					1	1,000	64	6,709,417
Settled during current year:										
18.1 By payment in full .....	63	6,708,417					1	1,000	64	6,709,417
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	63	6,708,417					1	1,000	64	6,709,417
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	63	6,708,417					1	1,000	64	6,709,417
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	13,454	4,142,629,571	(a)				170	235,935	13,624	4,142,865,507
21. Issued during year .....	1,079	384,049,702							1,079	384,049,702
22. Other changes to in force (Net) .....	(1,003)	(258,721,758)					(13)	(13,750)	(1,016)	(258,735,508)
23. In force December 31 of current year .....	13,530	4,267,957,516	(a)				157	222,185	13,687	4,268,179,701

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	1,003	1,003			.66
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	144,308	144,978			(3,908)
25.3 Non-renewable for stated reasons only (b) .....					209
25.4 Other accident only .....	143	143			.55
25.5 All other (b) .....	844	844		648	980
25.6 Totals (sum of Lines 25.1 to 25.5) .....	145,295	145,965		648	(2,663)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	146,298	146,968		648	(2,597)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	12,718,603			382	12,718,986
2. Annuity considerations .....	274,040				274,040
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	12,992,643			382	12,993,026
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,153,148				7,153,148
10. Matured endowments .....					
11. Annuity benefits .....	967,890				967,890
12. Surrender values and withdrawals for life contracts .....	1,346,722			608	1,347,330
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	9,467,760			608	9,468,368
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	176	7,153,148							176	7,153,148
Settled during current year:										
18.1 By payment in full .....	176	7,153,148							176	7,153,148
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	176	7,153,148							176	7,153,148
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	176	7,153,148							176	7,153,148
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	21,491	3,041,755,138	(a)				78	77,778	21,569	3,041,832,916
21. Issued during year .....	1,782	517,604,793							1,782	517,604,793
22. Other changes to in force (Net) .....	(2,121)	(221,196,131)					(1)	250	(2,122)	(221,195,881)
23. In force December 31 of current year .....	21,152	3,338,163,801	(a)				77	78,028	21,229	3,338,241,829

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	28,150	32,459			580
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					11
25.5 All other (b) .....	84	84			22
25.6 Totals (sum of Lines 25.1 to 25.5) .....	28,234	32,543			614
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	28,234	32,543			614

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,073,458				2,073,458
2. Annuity considerations .....	240,620				240,620
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	2,314,078				2,314,078
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,820,000				1,820,000
10. Matured endowments .....					
11. Annuity benefits .....	196,685				196,685
12. Surrender values and withdrawals for life contracts .....	9,874				9,874
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	2,026,559				2,026,559
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	6	1,820,000							6	1,820,000
Settled during current year:										
18.1 By payment in full .....	6	1,820,000							6	1,820,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	6	1,820,000							6	1,820,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	6	1,820,000							6	1,820,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,816	905,226,322	(a)				1	500	1,817	905,226,822
21. Issued during year .....	167	90,147,975							167	90,147,975
22. Other changes to in force (Net) .....	(79)	(51,194,762)							(79)	(51,194,762)
23. In force December 31 of current year .....	1,904	944,179,535	(a)				1	500	1,905	944,180,035

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	22,106	22,299			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	22,106	22,299			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	22,106	22,299			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance .....	471,468				471,468
2.	Annuity considerations .....					
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	471,468				471,468
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1	Paid in cash or left on deposit .....					
6.2	Applied to pay renewal premiums .....					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4	Other .....					
6.5	Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:						
7.1	Paid in cash or left on deposit .....					
7.2	Applied to provide paid-up annuities .....					
7.3	Other .....					
7.4	Totals (Sum of Lines 7.1 to 7.3) .....					
8.	Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits .....	90,000				90,000
10.	Matured endowments .....					
11.	Annuity benefits .....					
12.	Surrender values and withdrawals for life contracts .....	13,094				13,094
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14.	All other benefits, except accident and health .....					
15.	Totals .....	103,094				103,094
DETAILS OF WRITE-INS						
1301.	.....					
1302.	.....					
1303.	.....					
1398.	Summary of Line 13 from overflow page .....					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	1	90,000						1	90,000
Settled during current year:										
18.1	By payment in full	1	90,000						1	90,000
18.2	By payment on compromised claims									
18.3	Totals paid	1	90,000						1	90,000
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	1	90,000						1	90,000
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	619	175,777,021	(a)					619	175,777,021
21.	Issued during year	12	5,060,000						12	5,060,000
22.	Other changes to in force (Net)	(40)	(11,716,229)						(40)	(11,716,229)
23.	In force December 31 of current year	591	169,120,792	(a)					591	169,120,792

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)				
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	1,726	1,773		6
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only				
25.5	All other (b)				
25.6	Totals (sum of Lines 25.1 to 25.5)	1,726	1,773		6
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,726	1,773		6

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	5,876,479			1,161	5,877,640
2. Annuity considerations .....	725,045				725,045
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	6,601,524			1,161	6,602,685
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,873,980			500	1,874,480
10. Matured endowments .....	5,112			1,185	6,297
11. Annuity benefits .....	998,163				998,163
12. Surrender values and withdrawals for life contracts .....	158,900				158,900
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	3,036,155			1,685	3,037,840
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	42	1,879,092					2	1,685	44	1,880,777
Settled during current year:										
18.1 By payment in full .....	42	1,879,092					2	1,685	44	1,880,777
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	42	1,879,092					2	1,685	44	1,880,777
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	42	1,879,092					2	1,685	44	1,880,777
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	6,983	1,677,359,380	(a)				167	203,406	7,150	1,677,562,786
21. Issued during year .....	556	152,566,194							556	152,566,194
22. Other changes to in force (Net) .....	(280)	(61,747,744)					(2)	(1,185)	(282)	(61,748,929)
23. In force December 31 of current year .....	7,259	1,768,177,830	(a)				165	202,221	7,424	1,768,380,052

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	50	50			11
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	78,600	84,981		72,764	78,506
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	166	166		87	175
25.6 Totals (sum of Lines 25.1 to 25.5) .....	78,766	85,147		72,850	78,681
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	78,816	85,198		72,850	78,692

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington  
NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020  
NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	3,692,794				3,692,794
2. Annuity considerations .....	343,331				343,331
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	4,036,125				4,036,125
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	335,435				335,435
10. Matured endowments .....					
11. Annuity benefits .....	451,992				451,992
12. Surrender values and withdrawals for life contracts .....	7,886				7,886
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	795,313				795,313
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	3	335,435							3	335,435
Settled during current year:										
18.1 By payment in full .....	3	335,435							3	335,435
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	3	335,435							3	335,435
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	3	335,435							3	335,435
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,788	1,405,351,957	(a)				6	5,593	2,794	1,405,357,550
21. Issued during year .....	272	157,415,202							272	157,415,202
22. Other changes to in force (Net) .....	(78)	(48,379,495)							(78)	(48,379,495)
23. In force December 31 of current year .....	2,982	1,514,387,664	(a)				6	5,593	2,988	1,514,393,257

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	10,964	11,002			(893)
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	21	21			11
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	10,985	11,023			(882)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	10,985	11,023			(882)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4
		Ordinary	Credit Life (Group and Individual)	Group	Industrial
					Total
1.	Life insurance	3,084,145			4,002
2.	Annuity considerations	96,965			
3.	Deposit-type contract funds		XXX		XXX
4.	Other considerations				
5.	Totals (Sum of Lines 1 to 4)	3,181,110			4,002
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1	Paid in cash or left on deposit				
6.2	Applied to pay renewal premiums				
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period				
6.4	Other				
6.5	Totals (Sum of Lines 6.1 to 6.4)				
Annuities:					
7.1	Paid in cash or left on deposit				
7.2	Applied to provide paid-up annuities				
7.3	Other				
7.4	Totals (Sum of Lines 7.1 to 7.3)				
8.	Grand Totals (Lines 6.5 plus 7.4)				
DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,176,168			12,984
10.	Matured endowments	5,220			3,370
11.	Annuity benefits	150,692			
12.	Surrender values and withdrawals for life contracts	145,794			1,874
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				
14.	All other benefits, except accident and health				
15.	Totals	1,477,873			18,228
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398.	Summary of Line 13 from overflow page				
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)				

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	39	1,181,388				14	16,354	53	1,197,742
Settled during current year:										
18.1	By payment in full	39	1,181,388				14	16,354	53	1,197,742
18.2	By payment on compromised claims									
18.3	Totals paid	39	1,181,388				14	16,354	53	1,197,742
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	Total settlements	39	1,181,388				14	16,354	53	1,197,742
19.	Unpaid Dec. 31, current year (16+17-18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	4,639	639,207,939	(a)			916	851,374	5,555	640,059,313
21.	Issued during year	275	53,033,467						275	53,033,467
22.	Other changes to in force (Net)	(295)	(30,910,114)				(32)	(31,169)	(327)	(30,941,283)
23.	In force December 31 of current year	4,619	661,331,292	(a)			884	820,205	5,503	662,151,497

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)				
24.1	Federal Employees Health Benefits Plan premium (b)				
24.2	Credit (Group and Individual)				
24.3	Collectively renewable policies/certificates (b)	10,262	10,262	680	2,269
24.4	Medicare Title XVIII exempt from state taxes or fees				
Other Individual Policies:					
25.1	Non-cancelable (b)				
25.2	Guaranteed renewable (b)	32,814	34,372	15,300	15,448
25.3	Non-renewable for stated reasons only (b)				
25.4	Other accident only	200	200		77
25.5	All other (b)	379	379		132
25.6	Totals (sum of Lines 25.1 to 25.5)	33,393	34,951	15,300	15,657
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	43,655	45,212	15,980	17,926

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	11,018,605				11,018,605
2. Annuity considerations .....	2,020,041				2,020,041
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	13,038,646				13,038,646
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	11,016,197			1,000	11,017,197
10. Matured endowments .....					
11. Annuity benefits .....	2,730,813				2,730,813
12. Surrender values and withdrawals for life contracts .....	332,400				332,400
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	14,079,410			1,000	14,080,410
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	50	11,016,197					1	1,000	51	11,017,197
Settled during current year:										
18.1 By payment in full .....	50	11,016,197					1	1,000	51	11,017,197
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	50	11,016,197					1	1,000	51	11,017,197
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	50	11,016,197					1	1,000	51	11,017,197
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	13,858	4,039,730,677	(a)				6	5,000	13,864	4,039,735,677
21. Issued during year .....	733	303,610,930							733	303,610,930
22. Other changes to in force (Net) .....	(746)	(221,867,373)					(1)	(1,000)	(747)	(221,868,373)
23. In force December 31 of current year .....	13,845	4,121,474,234	(a)				5	4,000	13,850	4,121,478,234

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	45	45			11
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	238,855	260,707		16,502	28,202
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....	696	696			88
25.5 All other (b) .....	174	174			110
25.6 Totals (sum of Lines 25.1 to 25.5) .....	239,726	261,577		16,502	28,401
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	239,771	261,622		16,502	28,412

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	513,796				513,796
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	513,796				513,796
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts	3,827				3,827
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	3,827				3,827
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	365	153,415,591	(a)				1	1,185	366	153,416,776
21. Issued during year	40	18,230,002							40	18,230,002
22. Other changes to in force (Net)	(20)	(5,994,065)							(20)	(5,994,065)
23. In force December 31 of current year	385	165,651,528	(a)				1	1,185	386	165,652,713

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	(472)	(476)			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	(472)	(476)			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	(472)	(476)			

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....				(a)						
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....				(a)						

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	885				885
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	885				885
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1	1,500,000	(a)						1	1,500,000
21. Issued during year .....										
22. Other changes to in force (Net) .....	(1)	(1,500,000)							(1)	(1,500,000)
23. In force December 31 of current year .....			(a)							

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	7,569				7,569
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	7,569				7,569
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	11	4,134,535	(a)						11	4,134,535
21. Issued during year .....										
22. Other changes to in force (Net) .....	(2)	(1,659,535)							(2)	(1,659,535)
23. In force December 31 of current year .....	9	2,475,000	(a)						9	2,475,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	11,158				11,158
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	11,158				11,158
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	10	3,736,957	(a)						10	3,736,957
21. Issued during year .....										
22. Other changes to in force (Net) .....		200,000								200,000
23. In force December 31 of current year .....	10	3,936,957	(a)						10	3,936,957

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2020

NAIC Group Code 0244

NAIC Company Code 76236

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Canada

NAIC Group Code 0244

LIFE INSURANCE

DURING THE YEAR 2020

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	35,823				35,823
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	35,823				35,823
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	44	23,394,858	(a)						44	23,394,858
21. Issued during year .....										
22. Other changes to in force (Net) .....	(1)	1,201,248							(1)	1,201,248
23. In force December 31 of current year .....	43	24,596,106	(a)						43	24,596,106

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	64,913				64,913
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	64,913				64,913
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,200,000				1,200,000
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	1,200,000				1,200,000
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	1	1,200,000							1	1,200,000
Settled during current year:										
18.1 By payment in full .....	1	1,200,000							1	1,200,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1	1,200,000							1	1,200,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1	1,200,000							1	1,200,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	76	45,432,558	(a)				1	1,000	77	45,433,558
21. Issued during year .....										
22. Other changes to in force (Net) .....	(10)	(1,304,491)							(10)	(1,304,491)
23. In force December 31 of current year .....	66	44,128,067	(a)				1	1,000	67	44,129,067

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2020

NAIC Group Code 0244

LIFE INSURANCE

NAIC Company Code 76236

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	342,080,439		15,768	40,291	342,136,498
2. Annuity considerations .....	45,046,771				45,046,771
3. Deposit-type contract funds .....	921,365	XXX		XXX	921,365
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	388,048,576		15,768	40,291	388,104,635
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	190,980,659		10,176,681	149,907	201,307,248
10. Matured endowments .....	159,883			34,774	194,657
11. Annuity benefits .....	63,328,213		20,829		63,349,042
12. Surrender values and withdrawals for life contracts .....	20,671,330		3,216,076	55,202	23,942,609
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	275,140,085		13,413,587	239,883	288,793,555
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....							5		5	
17. Incurred during current year .....	2,329	191,140,542			16	10,176,681	202	184,681	2,547	201,501,905
Settled during current year:										
18.1 By payment in full .....	2,328	190,890,542			16	10,176,681	207	184,681	2,551	201,251,905
18.2 By payment on compromised claims .....	1	250,000							1	250,000
18.3 Totals paid .....	2,329	191,140,542			16	10,176,681	207	184,681	2,552	201,501,905
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	2,329	191,140,542			16	10,176,681	207	184,681	2,552	201,501,905
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	435,611	105,801,219,525	(a)		8	2,310,304,735	18,212	18,206,678	453,831	108,129,730,938
21. Issued during year .....	28,957	9,145,056,514				18,832,778			28,957	9,163,889,292
22. Other changes to in force (Net) .....	(27,186)	(5,565,061,679)				28,142,379	(616)	(631,528)	(27,802)	(5,537,550,828)
23. In force December 31 of current year .....	437,382	109,381,214,360	(a)		8	2,357,279,892	17,596	17,575,149	454,986	111,756,069,401

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	30,947	30,895		1,503,192	117,052
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	14,155	14,155		2,562	4,807
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					143
25.2 Guaranteed renewable (b) .....	3,846,676	4,386,479		3,191,901	3,802,927
25.3 Non-renewable for stated reasons only (b) .....					496
25.4 Other accident only .....	12,461	12,461		700	2,144
25.5 All other (b) .....	10,257	10,257		1,769	4,538
25.6 Totals (sum of Lines 25.1 to 25.5) .....	3,869,394	4,409,197		3,194,370	3,810,248
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,914,496	4,454,247		4,700,124	3,932,106

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE		1
		Amount
1.	Reserve as of December 31, Prior Year .....	367,887
2.	Current year's realized pre-tax capital gains/(losses) of \$ .....2,026,164 transferred into the reserve net of taxes of \$ .....425,495	1,600,670
3.	Adjustment for current year's liability gains/(losses) released from the reserve .....	
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3) .....	1,968,557
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	732,027
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	1,236,530

AMORTIZATION				
	1	2	3	4
Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2020 .....	509,588	222,439		732,027
2. 2021 .....	319,779	125,340		445,120
3. 2022 .....	210,798	91,360		302,158
4. 2023 .....	189,922	84,174		274,096
5. 2024 .....	168,882	76,415		245,297
6. 2025 .....	134,022	65,903		199,926
7. 2026 .....	46,817	64,361		111,178
8. 2027 .....	(37,556)	65,580		28,024
9. 2028 .....	(64,234)	66,798		2,564
10. 2029 .....	(86,551)	69,264		(17,287)
11. 2030 .....	(105,231)	71,714		(33,517)
12. 2031 .....	(119,478)	72,816		(46,662)
13. 2032 .....	(118,762)	75,039		(43,723)
14. 2033 .....	(134,464)	77,248		(57,216)
15. 2034 .....	(155,968)	79,440		(76,528)
16. 2035 .....	(149,339)	81,633		(67,705)
17. 2036 .....	(119,143)	74,086		(45,057)
18. 2037 .....	(86,505)	59,269		(27,236)
19. 2038 .....	(49,043)	43,217		(5,826)
20. 2039 .....	(9,137)	25,930		16,793
21. 2040 .....	9,832	8,643		18,475
22. 2041 .....	6,599			6,599
23. 2042 .....	2,604			2,604
24. 2043 .....	939			939
25. 2044 .....	957			957
26. 2045 .....	902			902
27. 2046 .....	718			718
28. 2047 .....	515			515
29. 2048 .....	313			313
30. 2049 .....	110			110
31. 2050 and Later				
32. Total (Lines 1 to 31)	367,887	1,600,670		1,968,557

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1	2	3	4	5	6	
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year .....	34,741,518		34,741,518				34,741,518
2. Realized capital gains/(losses) net of taxes - General Account .....	(26,124,872)		(26,124,872)	39,269		39,269	(26,085,603)
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....	(596,374)		(596,374)				(596,374)
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....	(39,500)		(39,500)		(2,186,562)	(2,186,562)	(2,226,062)
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts .....							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....							
7. Basic contribution .....	11,560,152		11,560,152		50,216	50,216	11,610,368
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	19,540,923		19,540,923	39,269	(2,136,346)	(2,097,077)	17,443,846
9. Maximum reserve .....	50,896,404		50,896,404		1,456,926	1,456,926	52,353,330
10. Reserve objective .....	31,698,925		31,698,925		1,330,550	1,330,550	33,029,475
11. 20% of (Line 10 - Line 8) .....	2,431,600		2,431,600	(7,854)	693,379	685,525	3,117,126
12. Balance before transfers (Lines 8 + 11) .....	21,972,524		21,972,524	31,415	(1,442,967)	(1,411,551)	20,560,972
13. Transfers .....							
14. Voluntary contribution .....							
15. Adjustment down to maximum/up to zero .....				(31,415)	1,442,967	1,411,551	1,411,551
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	21,972,524		21,972,524				21,972,524

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations		XXX	XXX		0.0000		0.0000		0.0000	
2.1	1	NAIC Designation Category 1.A	36,203,568	XXX	XXX	36,203,568	0.0005	18,102	0.0016	57,926	0.0033	119,472
2.2	1	NAIC Designation Category 1.B	49,147,605	XXX	XXX	49,147,605	0.0005	24,574	0.0016	78,636	0.0033	162,187
2.3	1	NAIC Designation Category 1.C	150,630,353	XXX	XXX	150,630,353	0.0005	75,315	0.0016	241,009	0.0033	497,080
2.4	1	NAIC Designation Category 1.D	282,621,620	XXX	XXX	282,621,620	0.0005	141,311	0.0016	452,195	0.0033	932,651
2.5	1	NAIC Designation Category 1.E	105,374,444	XXX	XXX	105,374,444	0.0005	52,687	0.0016	168,599	0.0033	347,736
2.6	1	NAIC Designation Category 1.F	168,715,362	XXX	XXX	168,715,362	0.0005	84,358	0.0016	269,945	0.0033	556,761
2.7	1	NAIC Designation Category 1.G	261,353,680	XXX	XXX	261,353,680	0.0005	130,677	0.0016	418,166	0.0033	862,467
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	1,054,046,633	XXX	XXX	1,054,046,633	XXX	527,023	XXX	1,686,475	XXX	3,478,354
3.1	2	NAIC Designation Category 2.A	479,078,523	XXX	XXX	479,078,523	0.0021	1,006,065	0.0064	3,066,103	0.0106	5,078,232
3.2	2	NAIC Designation Category 2.B	847,891,119	XXX	XXX	847,891,119	0.0021	1,780,571	0.0064	5,426,503	0.0106	8,987,646
3.3	2	NAIC Designation Category 2.C	765,347,606	XXX	XXX	765,347,606	0.0021	1,607,230	0.0064	4,898,225	0.0106	8,112,685
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	2,092,317,248	XXX	XXX	2,092,317,248	XXX	4,393,866	XXX	13,390,830	XXX	22,178,563
4.1	3	NAIC Designation Category 3.A	162,013,383	XXX	XXX	162,013,383	0.0099	1,603,932	0.0263	4,260,952	0.0376	6,091,703
4.2	3	NAIC Designation Category 3.B	66,351,927	XXX	XXX	66,351,927	0.0099	656,884	0.0263	1,745,056	0.0376	2,494,832
4.3	3	NAIC Designation Category 3.C	73,439,100	XXX	XXX	73,439,100	0.0099	727,047	0.0263	1,931,448	0.0376	2,761,310
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	301,804,410	XXX	XXX	301,804,410	XXX	2,987,864	XXX	7,937,456	XXX	11,347,846
5.1	4	NAIC Designation Category 4.A	17,883,719	XXX	XXX	17,883,719	0.0245	438,151	0.0572	1,022,949	0.0817	1,461,100
5.2	4	NAIC Designation Category 4.B	4,762,187	XXX	XXX	4,762,187	0.0245	116,674	0.0572	272,397	0.0817	389,071
5.3	4	NAIC Designation Category 4.C	10,205,452	XXX	XXX	10,205,452	0.0245	250,034	0.0572	583,752	0.0817	833,785
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)	32,851,357	XXX	XXX	32,851,357	XXX	804,858	XXX	1,879,098	XXX	2,683,956
6.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128		0.1880	
6.2	5	NAIC Designation Category 5.B	15,000,000	XXX	XXX	15,000,000	0.0630	945,000	0.1128	1,692,000	0.1880	2,820,000
6.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0630		0.1128		0.1880	
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)	15,000,000	XXX	XXX	15,000,000	XXX	945,000	XXX	1,692,000	XXX	2,820,000
7.	6	NAIC 6	20,000	XXX	XXX	20,000	0.0000		0.2370	4,740	0.2370	4,740
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	3,496,039,648	XXX	XXX	3,496,039,648	XXX	9,658,611	XXX	26,590,599	XXX	42,513,458
PREFERRED STOCKS												
10.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
11.	2	High Quality	9,046,800	XXX	XXX	9,046,800	0.0021	18,998	0.0064	57,900	0.0106	95,896
12.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
13.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
14.	5	Lower Quality	2,450,000	XXX	XXX	2,450,000	0.0630	154,350	0.1128	276,360	0.1880	460,600
15.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
16.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)	11,496,800	XXX	XXX	11,496,800	XXX	173,348	XXX	334,260	XXX	556,496

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
SHORT-TERM BONDS												
18.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
19.1	1	NAIC Designation Category 1.A .....		XXX	XXX		0.0005		0.0016		0.0033	
19.2	1	NAIC Designation Category 1.B .....		XXX	XXX		0.0005		0.0016		0.0033	
19.3	1	NAIC Designation Category 1.C .....		XXX	XXX		0.0005		0.0016		0.0033	
19.4	1	NAIC Designation Category 1.D .....		XXX	XXX		0.0005		0.0016		0.0033	
19.5	1	NAIC Designation Category 1.E .....		XXX	XXX		0.0005		0.0016		0.0033	
19.6	1	NAIC Designation Category 1.F .....		XXX	XXX		0.0005		0.0016		0.0033	
19.7	1	NAIC Designation Category 1.G .....		XXX	XXX		0.0005		0.0016		0.0033	
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7) .....		XXX	XXX		XXX		XXX		XXX	
20.1	2	NAIC Designation Category 2.A .....		XXX	XXX		0.0021		0.0064		0.0106	
20.2	2	NAIC Designation Category 2.B .....		XXX	XXX		0.0021		0.0064		0.0106	
20.3	2	NAIC Designation Category 2.C .....		XXX	XXX		0.0021		0.0064		0.0106	
20.4		Subtotal NAIC 2 (20.1+20.2+20.3) .....		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A .....		XXX	XXX		0.0099		0.0263		0.0376	
21.2	3	NAIC Designation Category 3.B .....		XXX	XXX		0.0099		0.0263		0.0376	
21.3	3	NAIC Designation Category 3.C .....		XXX	XXX		0.0099		0.0263		0.0376	
21.4		Subtotal NAIC 3 (21.1+21.2+21.3) .....		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A .....		XXX	XXX		0.0245		0.0572		0.0817	
22.2	4	NAIC Designation Category 4.B .....		XXX	XXX		0.0245		0.0572		0.0817	
22.3	4	NAIC Designation Category 4.C .....		XXX	XXX		0.0245		0.0572		0.0817	
22.4		Subtotal NAIC 4 (22.1+22.2+22.3) .....		XXX	XXX		XXX		XXX		XXX	
23.1	5	NAIC Designation Category 5.A .....		XXX	XXX		0.0630		0.1128		0.1880	
23.2	5	NAIC Designation Category 5.B .....		XXX	XXX		0.0630		0.1128		0.1880	
23.3	5	NAIC Designation Category 5.C .....		XXX	XXX		0.0630		0.1128		0.1880	
23.4		Subtotal NAIC 5 (23.1+23.2+23.3) .....		XXX	XXX		XXX		XXX		XXX	
24.	6	NAIC 6 .....		XXX	XXX		0.0000		0.2370		0.2370	
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24) .....		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded .....		XXX	XXX		0.0005		0.0016		0.0033	
27.	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
28.	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
33.		Total Derivative Instruments .....		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33) .....	3,507,536,448	XXX	XXX	3,507,536,448	XXX	9,831,960	XXX	26,924,858	XXX	43,069,955

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

Line Num- ber	NAIC Desig- nation	Description	1  Book/Adjusted Carrying Value	2  Reclassify Related Party Encumbrances	3  Add Third Party Encumbrances	4  Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5  Factor	6  Amount (Cols.4 x 5)	7  Factor	8  Amount (Cols. 4 x 7)	9  Factor	10  Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
36.		Farm Mortgages - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
37.		Farm Mortgages - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
38.		Farm Mortgages - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
39.		Farm Mortgages - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
40.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
41.		Residential Mortgages - All Other .....			XXX		0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
44.		Commercial Mortgages - All Other - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
47.		Commercial Mortgages - All Other - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
		Overdue, Not in Process:										
48.		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
49.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50.		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
51.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
52.		Commercial Mortgages - All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure:										
53.		Farm Mortgages .....			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
55.		Residential Mortgages - All Other .....			XXX		0.0000		0.0149		0.0149	
56.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
57.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1942		0.1942	
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)			XXX		XXX		XXX		XXX	
59.		Schedule DA Mortgages			XXX		0.0034		0.0114		0.0149	
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)			XXX		XXX		XXX		XXX	

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - Public .....		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
2.		Unaffiliated - Private .....		XXX	XXX		0.0000		0.1945		0.1945	
3.		Federal Home Loan Bank .....		XXX	XXX		0.0000		0.0061		0.0097	
4.		Affiliated - Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
Affiliated - Investment Subsidiary:												
5.		Fixed Income - Exempt Obligations .....					XXX		XXX		XXX	
6.		Fixed Income - Highest Quality .....					XXX		XXX		XXX	
7.		Fixed Income - High Quality .....					XXX		XXX		XXX	
8.		Fixed Income - Medium Quality .....					XXX		XXX		XXX	
9.		Fixed Income - Low Quality .....					XXX		XXX		XXX	
10.		Fixed Income - Lower Quality .....					XXX		XXX		XXX	
11.		Fixed Income - In/Near Default .....					XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public .....					0.0000		0.1580 (a)		0.1580 (a)	
13.		Unaffiliated Common Stock - Private .....					0.0000		0.1945		0.1945	
14.		Real Estate .....					(b)		(b)		(b)	
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX		0.0000		0.1580		0.1580	
16.		Affiliated - All Other .....		XXX	XXX		0.0000		0.1945		0.1945	
17.		Total Common Stock (Sum of Lines 1 through 16)					XXX		XXX		XXX	
REAL ESTATE												
18.		Home Office Property (General Account only) .....					0.0000		0.0912		0.0912	
19.		Investment Properties .....					0.0000		0.0912		0.0912	
20.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1337		0.1337	
21.		Total Real Estate (Sum of Lines 18 through 20)					XXX		XXX		XXX	
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
23.	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
24.	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
25.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
26.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
28.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)		XXX	XXX		XXX		XXX		XXX	

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest Quality .....	37,062,034	XXX	XXX	37,062,034	0.0005	18,531	0.0016	59,299	0.0033	122,305
31.	2	High Quality .....	15,088,172	XXX	XXX	15,088,172	0.0021	31,685	0.0064	96,564	0.0106	159,935
32.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
33.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
34.	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
35.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
36.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)	52,150,207	XXX	XXX	52,150,207	XXX	50,216	XXX	155,864	XXX	282,239
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
39.		Mortgages - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
40.		Mortgages - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
41.		Mortgages - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
42.		Mortgages - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
43.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
44.		Residential Mortgages - All Other .....		XXX	XXX		0.0015		0.0034		0.0046	
45.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
		Overdue, Not in Process Affiliated:										
46.		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
47.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
48.		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
49.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50.		Commercial Mortgages - All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages .....			XXX		0.0000		0.1942		0.1942	
52.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
53.		Residential Mortgages - All Other .....			XXX		0.0000		0.0149		0.0149	
54.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
55.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1942		0.1942	
56.		Total Affiliated (Sum of Lines 38 through 55) .....			XXX		XXX		XXX		XXX	
57.		Unaffiliated - In Good Standing With Covenants .....			XXX		(c)		(c)		(c)	
58.		Unaffiliated - In Good Standing Defeased With Government Securities .....			XXX		0.0011		0.0057		0.0074	
59.		Unaffiliated - In Good Standing Primarily Senior .....			XXX		0.0040		0.0114		0.0149	
60.		Unaffiliated - In Good Standing All Other .....			XXX		0.0069		0.0200		0.0257	
61.		Unaffiliated - Overdue, Not in Process .....			XXX		0.0480		0.0868		0.1371	
62.		Unaffiliated - In Process of Foreclosure .....			XXX		0.0000		0.1942		0.1942	
63.		Total Unaffiliated (Sum of Lines 57 through 62) .....			XXX		XXX		XXX		XXX	
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)			XXX		XXX		XXX		XXX	

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65.		Unaffiliated Public .....		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated Private .....		XXX	XXX		0.0000		0.1945		0.1945	
67.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX		0.0000		0.1580		0.1580	
69.		Affiliated Other - All Other .....		XXX	XXX		0.0000		0.1945		0.1945	
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71.		Home Office Property (General Account only) .....					0.0000		0.0912		0.0912	
72.		Investment Properties .....	12,880,335			12,880,335	0.0000		0.0912	1,174,687	0.0912	1,174,687
73.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1337		0.1337	
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	12,880,335			12,880,335	XXX		XXX	1,174,687	XXX	1,174,687
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
75.		Guaranteed Federal Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit .....					0.0063		0.0120		0.0190	
77.		Guaranteed State Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit .....					0.0063		0.0120		0.0190	
79.		All Other Low Income Housing Tax Credit .....					0.0273		0.0600		0.0975	
80.		Total LIHTC (Sum of Lines 75 through 79)					XXX		XXX		XXX	
ALL OTHER INVESTMENTS												
81.		NAIC 1 Working Capital Finance Investments .....		XXX			0.0000		0.0042		0.0042	
82.		NAIC 2 Working Capital Finance Investments .....		XXX			0.0000		0.0137		0.0137	
83.		Other Invested Assets - Schedule BA .....		XXX			0.0000		0.1580		0.1580	
84.		Other Short-Term Invested Assets - Schedule DA .....		XXX			0.0000		0.1580		0.1580	
85.		Total All Other (Sum of Lines 81, 82, 83 and 84) .....		XXX			XXX		XXX		XXX	
86.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	65,030,541			65,030,541	XXX	50,216	XXX	1,330,550	XXX	1,456,926

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).  
(b) Determined using the same factors and breakdowns used for directly owned real estate.  
(c) This will be the factor associated with the risk category determined in the company generated worksheet.



## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

## ASSET VALUATION RESERVE

## BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS REPLICATIONS (SYNTHETIC) ASSETS

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve
NONE								
0599999 - Total								

## SCHEDULE F

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written .....	2,193,506	XXX	1,033,701	XXX		XXX		XXX		XXX	1,149,715	XXX		XXX	6,597	XXX	3,493	XXX
2. Premiums earned .....	2,274,917	XXX	1,033,728	XXX		XXX		XXX		XXX	1,231,079	XXX		XXX	6,615	XXX	3,495	XXX
3. Incurred claims .....	479,938	21.1	(6,890)	(0.7)							487,062	39.6			(171)	(2.6)	(63)	(1.8)
4. Cost containment expenses .....	(3,424)	(0.2)	(3,424)	(0.3)														
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	476,514	20.9	(10,314)	(1.0)							487,062	39.6			(171)	(2.6)	(63)	(1.8)
6. Increase in contract reserves .....	12,352	0.5									12,352	1.0						
7. Commissions (a) .....	(87,774)	(3.9)	(50,155)	(4.9)							(37,677)	(3.1)			38	0.6	20	0.6
8. Other general insurance expenses .....	1,161,602	51.1	167,732	16.2			3,623				984,433	80.0			3,189	48.2	2,625	75.1
9. Taxes, licenses and fees .....	163,707	7.2	52,708	5.1			7				110,981	9.0			6	0.1	5	0.1
10. Total other expenses incurred .....	1,237,535	54.4	170,285	16.5			3,630				1,057,737	85.9			3,233	48.9	2,650	75.8
11. Aggregate write-ins for deductions .....																		
12. Gain from underwriting before dividends or refunds .....	548,516	24.1	873,757	84.5			(3,630)				(326,072)	(26.5)			3,553	53.7	908	26.0
13. Dividends or refunds .....																		
14. Gain from underwriting after dividends or refunds .....	548,516	24.1	873,757	84.5			(3,630)				(326,072)	(26.5)			3,553	53.7	908	26.0
DETAILS OF WRITE-INS																		
1101. ....																		
1102. ....																		
1103. ....																		
1198. Summary of remaining write-ins for Line 11 from overflow page .....																		
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)																		

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
<b>PART 2. - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums .....	242,531	742				241,700		58	31
2. Advance premiums .....	25,554					25,542		8	4
3. Reserve for rate credits .....									
4. Total premium reserves, current year .....	268,085	742				267,242		66	35
5. Total premium reserves, prior year .....	349,494	768				348,606		84	36
6. Increase in total premium reserves .....	(81,409)	(26)				(81,364)		(18)	(1)
B. Contract Reserves:									
1. Additional reserves (a) .....	7,014,581					7,014,581			
2. Reserve for future contingent benefits .....									
3. Total contract reserves, current year .....	7,014,581					7,014,581			
4. Total contract reserves, prior year .....	7,002,229					7,002,229			
5. Increase in contract reserves .....	12,352					12,352			
C. Claim Reserves and Liabilities:									
1. Total current year .....	9,027,691	5,823,229				3,203,326		322	814
2. Total prior year .....	10,056,790	6,730,925				3,322,579		1,194	2,092
3. Increase .....	(1,029,099)	(907,696)				(119,253)		(872)	(1,278)

<b>PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES</b>									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year .....	914,233	744,172				168,089		717	1,255
1.2 On claims incurred during current year .....	594,804	156,634				438,226		(16)	(40)
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year .....	7,508,127	5,225,104				2,282,970		15	38
2.2 On claims incurred during current year .....	1,519,564	598,125				920,356		307	776
3. Test:									
3.1 Lines 1.1 and 2.1 .....	8,422,360	5,969,276				2,451,059		732	1,293
3.2 Claim reserves and liabilities, December 31, prior year .....	10,056,790	6,730,925				3,322,579		1,194	2,092
3.3 Line 3.1 minus Line 3.2 .....	(1,634,430)	(761,649)				(871,520)		(462)	(799)

<b>PART 4. - REINSURANCE</b>									
A. Reinsurance Assumed:									
1. Premiums written .....									
2. Premiums earned .....									
3. Incurred claims .....									
4. Commissions .....									
B. Reinsurance Ceded:									
1. Premiums written .....	4,074,394	1,003,101		23		3,071,234		20	16
2. Premiums earned .....	4,185,265	1,003,101		23		3,182,105		20	16
3. Incurred claims .....	3,452,166	123,942				3,327,896		93	235
4. Commissions .....	475,105	50,155				424,950			

(a) Includes \$ ..... premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims .....	3,342,290		589,816	3,932,106
2. Beginning Claim Reserves and Liabilities .....	21,864,884		3,858,509	25,723,394
3. Ending Claim Reserves and Liabilities .....	21,212,069		3,743,306	24,955,376
4. Claims Paid	3,995,106		705,019	4,700,124
B. Assumed Reinsurance:				
5. Incurred Claims.....				
6. Beginning Claim Reserves and Liabilities .....				
7. Ending Claim Reserves and Liabilities .....				
8. Claims Paid				
C. Ceded Reinsurance:				
9. Incurred Claims.....	2,934,342		517,825	3,452,167
10. Beginning Claim Reserves and Liabilities .....	13,403,158		2,365,263	15,768,421
11. Ending Claim Reserves and Liabilities .....	13,615,870		2,402,801	16,018,671
12. Claims Paid	2,721,629		480,288	3,201,917
D. Net:				
13. Incurred Claims.....	407,948		71,991	479,939
14. Beginning Claim Reserves and Liabilities .....	8,461,727		1,493,246	9,954,973
15. Ending Claim Reserves and Liabilities .....	7,596,199		1,340,506	8,936,705
16. Claims Paid	1,273,476		224,731	1,498,208
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses .....	404,525		71,991	476,516
18. Beginning Reserves and Liabilities .....	8,461,727		1,493,246	9,954,973
19. Ending Reserves and Liabilities .....	7,596,199		1,340,506	8,936,705
20. Paid Claims and Cost Containment Expenses	1,270,053		224,731	1,494,784

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Amount of In Force at End of Year	9 Reserve	10 Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
0399999. Total General Account - U.S. Affiliates												
0699999. Total General Account - Non-U.S. Affiliates												
0799999. Total General Account - Affiliates												
88064	35-1452221	08/18/1982	CINCINNATI EQUITABLE LIFE INSURANCE CO	OH	YRT/I	OL	15,000	332	358			
68276	48-1024691	01/01/1981	EMPLOYERS REASSURANCE CORPORATION	KS	YRT/I	OL	71,471	5,096	4,633			
0899999. General Account - U.S. Non-Affiliates							86,471	5,428	4,991			
1099999. Total General Account - Non-Affiliates							86,471	5,428	4,991			
1199999. Total General Account							86,471	5,428	4,991			
1499999. Total Separate Accounts - U.S. Affiliates												
1799999. Total Separate Accounts - Non-U.S. Affiliates												
1899999. Total Separate Accounts - Affiliates												
2199999. Total Separate Accounts - Non-Affiliates												
2299999. Total Separate Accounts												
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)							86,471	5,428	4,991			
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)												
9999999 - Totals							86,471	5,428	4,991			

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

## SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Premiums	9 Unearned Premiums	10 Reserve Liability Other Than for Unearned Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
NONE												
9999999 - Totals												

## SCHEDULE S - PART 2

[illegible]



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9	10		12	13		
								Current Year	Prior Year		Current Year	Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates														
0699999. Total General Account - Authorized Non-U.S. Affiliates														
0799999. Total General Account - Authorized Affiliates														
68276	48-1024691	01/01/1990	EMPLOYERS REASSURANCE CORPORATION	KS	CO / I	OL	50,427,232	19,494,356	18,835,670	355,461				
68276	48-1024691	01/01/1990	EMPLOYERS REASSURANCE CORPORATION	KS	YRT / I	AXXX	1,440,992	12,616	12,304	26,613				
68276	48-1024691	01/01/1990	EMPLOYERS REASSURANCE CORPORATION	KS	YRT / I	XXXL	925,273	6,588	6,247	13,855				
68276	48-1024691	01/01/1990	EMPLOYERS REASSURANCE CORPORATION	KS	YRT / I	OL	2,434,264	10,655	10,477	28,379				
68276	48-1024691	01/01/1990	EMPLOYERS REASSURANCE CORPORATION	KS	DIS / I	OL		435,560	393,684	4,399				
86258	13-2572994	08/01/2001	GENERAL RE LIFE CORPORATION	CT	CO / I	XXXL	53,620,736	3,158,755	3,172,032	84,431				
86258	13-2572994	08/01/2001	GENERAL RE LIFE CORPORATION	CT	YRT / I	AXXX	98,054	108	98	132				
86258	13-2572994	08/01/2001	GENERAL RE LIFE CORPORATION	CT	YRT / I	XXXL	155,299	397	339	738				
86258	13-2572994	08/01/2001	GENERAL RE LIFE CORPORATION	CT	YRT / I	OL	22,500	65		111				
86258	13-2572994	08/01/2001	GENERAL RE LIFE CORPORATION	CT	DIS / I	OL		25,263	24,581	811				
97071	13-3126819	03/01/1981	SCOR GLOBAL LIFE USA REINSURANCE COMPANY	DE	CO / I	OL	2,102,636	23,153	32,258	52,210				
97071	13-3126819	08/13/1969	SCOR GLOBAL LIFE USA REINSURANCE COMPANY	DE	YRT / I	OL	1,466,509,348	662,205	366,635	889,596				
97071	13-3126819	08/13/1969	SCOR GLOBAL LIFE USA REINSURANCE COMPANY	DE	YRT / I	XXXL	19,976,406	8,112	6,980	3,664				
97071	13-3126819	08/13/1969	SCOR GLOBAL LIFE USA REINSURANCE COMPANY	DE	OTH / G	OL	535,019,500			967,196				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSURANCE COMPANY	FL	CO / I	XXXL	362,451,349	10,706,475	12,033,968	555,191				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSURANCE COMPANY	FL	YRT / I	AXXX	13,290,836	28,332	24,567	45,210				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSURANCE COMPANY	FL	YRT / I	XXXL	2,596,076,190	3,937,978	3,580,800	3,211,093				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSURANCE COMPANY	FL	YRT / I	OL	1,088,858,829	831,032	561,047	1,004,696				
88340	59-2859797	04/01/2002	HANNOVER LIFE REASSURANCE COMPANY	FL	DIS / I	OL		49,824	56,308	16,118				
65056	38-1659835	01/01/1999	JACKSON NATIONAL LIFE INSURANCE COMPANY	MI	CO / I	OL	6,229,111	4,046,675	4,277,294	35,378				
65676	35-0472300	09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	CO / I	XXXL	1,221,801,794	12,653,971	15,456,295	2,142,351				
65676	35-0472300	09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	CO / I	OL	1,348,921,289	6,463,690	7,914,663	2,379,449				
65676	35-0472300	09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	YRT / I	AXXX	14,293,241	150,464	146,210	202,405				
65676	35-0472300	09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	YRT / I	XXXL	19,988,279	159,890	152,850	221,339				
65676	35-0472300	09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	YRT / I	OL	128,993,145	496,313	449,386	819,719				
65676	35-0472300	09/15/1997	LINCOLN NATIONAL LIFE INSURANCE COMPANY	IN	DIS / I	OL		1,033,598	1,094,770	89,634				
66346	58-0828824	02/01/1988	MUNICH AMERICAN REASSURANCE COMPANY	GA	CO / I	XXXL	54,100,739	3,161,106	3,174,080	87,028				
66346	58-0828824	02/01/1988	MUNICH AMERICAN REASSURANCE COMPANY	GA	CO / I	OL	1,520,000	7,973	7,195	3,015				
66346	58-0828824	10/01/1994	MUNICH AMERICAN REASSURANCE COMPANY	GA	YRT / I	AXXX	141,483,857	570,715	489,558	641,955				
66346	58-0828824	10/01/1994	MUNICH AMERICAN REASSURANCE COMPANY	GA	YRT / I	XXXL	1,945,921,044	4,975,680	4,831,762	5,097,085				
66346	58-0828824	10/01/1994	MUNICH AMERICAN REASSURANCE COMPANY	GA	YRT / I	OL	2,480,947,414	1,129,335	729,138	1,359,398				
66346	58-0828824	02/01/1988	MUNICH AMERICAN REASSURANCE COMPANY	GA	DIS / I	OL		79,751	78,131	12,302				
66346	58-0828824	02/01/1988	MUNICH AMERICAN REASSURANCE COMPANY	GA	ADB / I	OL		484,936	448,694	206,778				
67466	95-1079000	04/01/2002	PACIFIC LIFE INSURANCE COMPANY	NE	CO / I	XXXL	1,276,159,872	41,086,841	44,274,662	1,912,921				
67466	95-1079000	04/01/2002	PACIFIC LIFE INSURANCE COMPANY	NE	YRT / I	AXXX	2,771,955	28,354	28,151	35,397				
67466	95-1079000	04/01/2002	PACIFIC LIFE INSURANCE COMPANY	NE	YRT / I	XXXL	3,418,391	28,081	29,167	39,922				
67466	95-1079000	04/01/2002	PACIFIC LIFE INSURANCE COMPANY	NE	YRT / I	OL	9,312,596	55,413	52,018	81,778				
67466	95-1079000	04/01/2002	PACIFIC LIFE INSURANCE COMPANY	NE	DIS / I	OL		172,349	188,609	14,363				
93572	43-1235868	09/01/1995	RGA REINSURANCE COMPANY	MO	YRT / I	AXXX	193,978,670	894,945	803,450	1,095,361				
93572	43-1235868	09/01/1995	RGA REINSURANCE COMPANY	MO	YRT / I	XXXL	6,330,057,313	15,137,857	14,880,805	14,898,874				
93572	43-1235868	09/01/1995	RGA REINSURANCE COMPANY	MO	YRT / I	OL	76,865,921	341,317	302,849	851,697				
93572	43-1235868	09/01/1995	RGA REINSURANCE COMPANY	MO	DIS / I	OL		92,915	92,035	33,993				
93572	43-1235868	02/01/2004	RGA REINSURANCE COMPANY	MO	OTH / G	OL				16,146				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER	CO	CO / I	XXXL	2,501,355,775	77,045,506	84,332,933	3,715,394				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER	CO	CO / I	OL	6,442,955	36,930	46,121	69,300				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER	CO	YRT / I	AXXX	6,750,225	57,547	72,491	89,478				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER	CO	YRT / I	XXXL	6,229,317	41,063	104,156	68,405				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER	CO	YRT / I	OL	17,318,806	97,123	95,683	162,430				
68713	84-0499703	09/15/1997	SECURITY LIFE OF DENVER	CO	DIS / I	OL		341,058	378,417	29,708				
71706	57-0290111	07/01/1970	STANDARD LIFE & CASUALTY	UT	CO / I	OL	1,160,704	768,112	801,084	14,013				
82627	06-0839705	05/01/1981	SWISS RE LIFE & HEALTH AMERICA INC	MO	CO / I	XXXL	3,999,640,455	95,699,737	107,723,214	7,145,998				
82627	06-0839705	05/01/1981	SWISS RE LIFE & HEALTH AMERICA INC	MO	CO / I	OL	1,412,199,633	22,784,795	23,887,496	2,673,453				
82627	06-0839705	08/01/1978	SWISS RE LIFE & HEALTH AMERICA INC	MO	YRT / I	AXXX	42,012,688	398,946	373,041	629,873				

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9	10		12	13		
								Current Year	Prior Year		Current Year	Prior Year		
82627	06-0839705	08/01/1978	SWISS RE LIFE & HEALTH AMERICA INC	MO	YRT / I	XXXL	4,926,010,934	9,363,585	8,977,282	8,261,896				
82627	06-0839705	08/01/1978	SWISS RE LIFE & HEALTH AMERICA INC	MO	YRT / I	OL	2,215,252,537	1,705,515	1,143,166	2,295,019				
82627	06-0839705	08/01/1978	SWISS RE LIFE & HEALTH AMERICA INC	MO	DIS / I	OL		1,291,683	1,399,195	134,332				
82627	06-0839705	06/01/1974	SWISS RE LIFE & HEALTH AMERICA INC	MO	OTH / G	OL	117,521,776	12,272	11,573	799,973				
86231	39-0989781	04/01/2008	TRANSAMERICA LIFE INS CO	IA	YRT / I	AXXX	5,529,357	54,049	46,391	82,019				
86231	39-0989781	04/01/2008	TRANSAMERICA LIFE INS CO	IA	YRT / I	XXXL	1,561,973,689	3,679,767	3,891,917	3,265,462				
86231	39-0989781	04/01/2008	TRANSAMERICA LIFE INS CO	IA	YRT / I	OL	8,778,390	43,996	25,965	77,568				
86231	39-0989781	04/01/2008	TRANSAMERICA LIFE INS CO	IA	DIS / I	OL		4,355	4,750	7,128				
0899999. General Account - Authorized U.S. Non-Affiliates							38,278,351,316	346,069,682	372,334,642	69,059,641				
1099999. Total General Account - Authorized Non-Affiliates							38,278,351,316	346,069,682	372,334,642	69,059,641				
1199999. Total General Account Authorized							38,278,351,316	346,069,682	372,334,642	69,059,641				
1499999. Total General Account - Unauthorized U.S. Affiliates														
1799999. Total General Account - Unauthorized Non-U.S. Affiliates														
1899999. Total General Account - Unauthorized Affiliates														
00000	AA-1440076	10/01/2000	SIRIUS INTERNATIONAL INSURANCE COMPANY LTD	SWE	YRT / I	OL	2,643,881	17,756	16,158	24,231				
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates							2,643,881	17,756	16,158	24,231				
2199999. Total General Account - Unauthorized Non-Affiliates							2,643,881	17,756	16,158	24,231				
2299999. Total General Account Unauthorized							2,643,881	17,756	16,158	24,231				
2599999. Total General Account - Certified U.S. Affiliates														
2899999. Total General Account - Certified Non-U.S. Affiliates														
2999999. Total General Account - Certified Affiliates														
3299999. Total General Account - Certified Non-Affiliates														
3399999. Total General Account Certified														
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates														
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates														
4099999. Total General Account - Reciprocal Jurisdiction Affiliates														
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates														
4499999. Total General Account Reciprocal Jurisdiction														
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction, and Certified							38,280,995,197	346,087,438	372,350,800	69,083,872				
4899999. Total Separate Accounts - Authorized U.S. Affiliates														
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates														
5299999. Total Separate Accounts - Authorized Affiliates														
5599999. Total Separate Accounts - Authorized Non-Affiliates														
5699999. Total Separate Accounts Authorized														
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates														
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates														
6399999. Total Separate Accounts - Unauthorized Affiliates														
6699999. Total Separate Accounts - Unauthorized Non-Affiliates														
6799999. Total Separate Accounts Unauthorized														
7099999. Total Separate Accounts - Certified U.S. Affiliates														
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates														
7499999. Total Separate Accounts - Certified Affiliates														
7799999. Total Separate Accounts - Certified Non-Affiliates														
7899999. Total Separate Accounts Certified														
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates														
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates														
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates														
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates														
8999999. Total Separate Accounts Reciprocal Jurisdiction														
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified														

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
NAIC Company Code	ID Number	Effective Date	Name of Company	Domi- ciliary Juris- diction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	9	10	Premiums	12	13	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
								Current Year	Prior Year		Current Year	Prior Year		
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							38,278,351,316	346,069,682	372,334,642	69,059,641				
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							2,643,881	17,756	16,158	24,231				
9999999 - Totals							38,280,995,197	346,087,438	372,350,800	69,083,872				

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11	12		
										Current Year	Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates													
0699999. Total General Account - Authorized Non-U.S. Affiliates													
0799999. Total General Account - Authorized Affiliates													
86258	13-2572994	07/01/1999	GENERAL RE LIFE CORP	CT	CAT/I	LTC	1,963,287	574,621	38,122,943				
66346	58-0828824	02/01/1988	MUNICH AMER REASSUR CORP	GA	CAT/I	OH	1,101,832	317,881	6,604,890				
82627	06-0839705	08/01/1997	SWISS RE LIFE & HLTH AMER INC	MO	OTH/I	OH	6,174	2,921	22,514				
93572	43-1235868	09/01/1995	RGA REINS CO	MO	CAT/G	LTC	1,003,101		3,268,622				
0899999. General Account - Authorized U.S. Non-Affiliates							4,074,394	895,424	48,018,968				
1099999. Total General Account - Authorized Non-Affiliates							4,074,394	895,424	48,018,968				
1199999. Total General Account Authorized							4,074,394	895,424	48,018,968				
1499999. Total General Account - Unauthorized U.S. Affiliates													
1799999. Total General Account - Unauthorized Non-U.S. Affiliates													
1899999. Total General Account - Unauthorized Affiliates													
2199999. Total General Account - Unauthorized Non-Affiliates													
2299999. Total General Account Unauthorized													
2599999. Total General Account - Certified U.S. Affiliates													
2899999. Total General Account - Certified Non-U.S. Affiliates													
2999999. Total General Account - Certified Affiliates													
3299999. Total General Account - Certified Non-Affiliates													
3399999. Total General Account Certified													
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates													
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates													
4099999. Total General Account - Reciprocal Jurisdiction Affiliates													
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates													
4499999. Total General Account Reciprocal Jurisdiction													
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							4,074,394	895,424	48,018,968				
4899999. Total Separate Accounts - Authorized U.S. Affiliates													
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates													
5299999. Total Separate Accounts - Authorized Affiliates													
5599999. Total Separate Accounts - Authorized Non-Affiliates													
5699999. Total Separate Accounts Authorized													
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates													
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates													
6399999. Total Separate Accounts - Unauthorized Affiliates													
6699999. Total Separate Accounts - Unauthorized Non-Affiliates													
6799999. Total Separate Accounts Unauthorized													
7099999. Total Separate Accounts - Certified U.S. Affiliates													
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates													
7499999. Total Separate Accounts - Certified Affiliates													
7799999. Total Separate Accounts - Certified Non-Affiliates													
7899999. Total Separate Accounts Certified													
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates													
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates													
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates													
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates													
8999999. Total Separate Accounts Reciprocal Jurisdiction													
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified													
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							4,074,394	895,424	48,018,968				
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)													
9999999 - Totals							4,074,394	895,424	48,018,968				

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE S - PART 4**

Reinsurance Ceded to Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols.5+6+7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8
0399999. Total General Account - Life and Annuity U.S. Affiliates									XXX					
0699999. Total General Account - Life and Annuity Non-U.S. Affiliates									XXX					
0799999. Total General Account - Life and Annuity Affiliates									XXX					
...00000 ...	AA-1440076 ...	10/01/2000 ...	SIRIUS INTL INS CORP .....	17,756 .....			17,756 .....	17,756 .....	8282 .....					17,756 .....
0999999. General Account - Life and Annuity Non-U.S. Non-Affiliates				17,756			17,756	17,756	XXX					17,756
1099999. Total General Account - Life and Annuity Non-Affiliates				17,756			17,756	17,756	XXX					17,756
1199999. Total General Account Life and Annuity				17,756			17,756	17,756	XXX					17,756
1499999. Total General Account - Accident and Health U.S. Affiliates									XXX					
1799999. Total General Account - Accident and Health Non-U.S. Affiliates									XXX					
1899999. Total General Account - Accident and Health Affiliates									XXX					
2199999. Total General Account - Accident and Health Non-Affiliates									XXX					
2299999. Total General Account Accident and Health									XXX					
2399999. Total General Account				17,756			17,756	17,756	XXX					17,756
2699999. Total Separate Accounts - U.S. Affiliates									XXX					
2999999. Total Separate Accounts - Non-U.S. Affiliates									XXX					
3099999. Total Separate Accounts - Affiliates									XXX					
3399999. Total Separate Accounts - Non-Affiliates									XXX					
3499999. Total Separate Accounts									XXX					
3599999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)									XXX					
3699999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)				17,756			17,756	17,756	XXX					17,756
9999999 - Totals				17,756			17,756	17,756	XXX					17,756

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
	8282 .....	1.....	021000089 .....	CITIBANK, N.A. ....	.....17,756

Schedule S - Part 5  
**N O N E**

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

**SCHEDULE S - PART 6**  
Five Year Exhibit of Reinsurance Ceded Business  
(\$000 Omitted)

	1 2020	2 2019	3 2018	4 2017	5 2016
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts .....	73,158	71,385	69,819	68,174	62,622
2. Commissions and reinsurance expense allowances .....	4,414	4,733	4,907	5,310	5,133
3. Contract claims .....	68,138	76,275	65,841	68,999	58,040
4. Surrender benefits and withdrawals for life contracts .....	208	462	329	297	3,889
5. Dividends to policyholders and refunds to members .....					
6. Reserve adjustments on reinsurance ceded .....					
7. Increase in aggregate reserve for life and accident and health contracts .....	(24,545)	(14,398)	(8,347)	(772)	(1,570)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	16,727	17,054	16,596	16,339	15,404
9. Aggregate reserves for life and accident and health contracts .....	395,002	419,547	433,945	442,293	443,065
10. Liability for deposit-type contracts .....					
11. Contract claims unpaid .....	10,448	8,780	11,623	9,383	8,131
12. Amounts recoverable on reinsurance .....	6,742	13,022	13,746	6,848	6,967
13. Experience rating refunds due or unpaid .....					
14. Policyholders' dividends and refunds to members (not included in Line 10) .....					
15. Commissions and reinsurance expense allowances due .....	1,074	1,182	1,218	1,317	1,300
16. Unauthorized reinsurance offset .....					
17. Offset for reinsurance with Certified Reinsurers .....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F) .....					
19. Letters of credit (L) .....	18	16	15	25	23
20. Trust agreements (T) .....					
21. Other (O) .....					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust .....					
23. Funds deposited by and withheld from (F) .....					
24. Letters of credit (L) .....					
25. Trust agreements (T) .....					
26. Other (O) .....					

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	3,742,738,255		3,742,738,255
2. Reinsurance (Line 16) .....	7,816,033	(7,816,033)	
3. Premiums and considerations (Line 15) .....	149,427,530	16,727,435	166,154,965
4. Net credit for ceded reinsurance .....	XXX	396,538,326	396,538,326
5. All other admitted assets (balance) .....	64,255,267		64,255,267
6. Total assets excluding Separate Accounts (Line 26) .....	3,964,237,085	405,449,729	4,369,686,814
7. Separate Account assets (Line 27) .....	845,414,818		845,414,818
8. Total assets (Line 28)	4,809,651,904	405,449,729	5,215,101,633
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	3,453,240,939	395,001,833	3,848,242,773
10. Liability for deposit-type contracts (Line 3) .....	147,274,321		147,274,321
11. Claim reserves (Line 4) .....	34,500,753	10,447,896	44,948,649
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7) .....	74		74
13. Premium & annuity considerations received in advance (Line 8) .....	2,485,192		2,485,192
14. Other contract liabilities (Line 9) .....	17,963,965		17,963,965
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....			
19. All other liabilities (balance) .....	67,315,509		67,315,509
20. Total liabilities excluding Separate Accounts (Line 26) .....	3,722,780,754	405,449,729	4,128,230,483
21. Separate Account liabilities (Line 27) .....	845,414,818		845,414,818
22. Total liabilities (Line 28) .....	4,568,195,573	405,449,729	4,973,645,302
23. Capital & surplus (Line 38) .....	241,456,331	XXX	241,456,331
24. Total liabilities, capital & surplus (Line 39)	4,809,651,904	405,449,729	5,215,101,633
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	395,001,833		
26. Claim reserves .....	10,447,896		
27. Policyholder dividends/reserves .....			
28. Premium & annuity considerations received in advance .....			
29. Liability for deposit-type contracts .....			
30. Other contract liabilities .....			
31. Reinsurance ceded assets .....	7,816,033		
32. Other ceded reinsurance recoverables .....			
33. Total ceded reinsurance recoverables .....	413,265,762		
34. Premiums and considerations .....	16,727,435		
35. Reinsurance in unauthorized companies .....			
36. Funds held under reinsurance treaties with unauthorized reinsurers .....			
37. Reinsurance with Certified Reinsurers .....			
38. Funds held under reinsurance treaties with Certified Reinsurers .....			
39. Other ceded reinsurance payables/offsets .....			
40. Total ceded reinsurance payable/offsets .....	16,727,435		
41. Total net credit for ceded reinsurance	396,538,326		



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

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

Allocated by States and Territories

			Direct Business Only				
			1	2	3	4	6
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Totals
1.	Alabama .....	AL	6,373,265	300,524	19,302	26,276	6,719,366
2.	Alaska .....	AK	96,727				96,727
3.	Arizona .....	AZ	3,330,298		14,369	2,328	3,346,995
4.	Arkansas .....	AR	3,615,562	114,720	15,302		3,745,584
5.	California .....	CA	8,499,398	56,717	3,502	5,408	8,565,024
6.	Colorado .....	CO	3,284,745	152,500	9,417	4,426	3,451,088
7.	Connecticut .....	CT	1,450,421	300	2,234		1,452,955
8.	Delaware .....	DE	591,846	17,600	1,220	1,446	612,112
9.	District of Columbia .....	DC	226,895			4,245	231,141
10.	Florida .....	FL	8,768,807	379,797	15,852	120,018	9,284,474
11.	Georgia .....	GA	17,666,470	69,130	57,559	226,880	18,020,039
12.	Hawaii .....	HI	113,126				113,126
13.	Idaho .....	ID	1,358,646	167,995	3,363		1,530,004
14.	Illinois .....	IL	20,726,735	5,520,683	205,844	102,529	27,080,881
15.	Indiana .....	IN	20,006,502	2,741,860	137,409	38,555	22,924,326
16.	Iowa .....	IA	13,638,070	9,979,094	47,217	36,760	24,077,497
17.	Kansas .....	KS	4,586,715	303,521	8,146	8,751	4,907,134
18.	Kentucky .....	KY	11,829,298	626,609	62,950	118,388	12,637,245
19.	Louisiana .....	LA	1,534,900		1,166		1,536,066
20.	Maine .....	ME	286,427				286,427
21.	Maryland .....	MD	4,339,934	87,171	25,333	11,823	4,464,261
22.	Massachusetts .....	MA	1,456,378		501	13,636	1,470,516
23.	Michigan .....	MI	16,458,777	1,527,298	181,051	60,247	18,227,373
24.	Minnesota .....	MN	11,596,287	5,536,983	48,160	15,717	17,197,147
25.	Mississippi .....	MS	2,027,920	300	1,009		2,029,229
26.	Missouri .....	MO	10,457,412	1,118,325	19,216	22,648	11,617,600
27.	Montana .....	MT	2,569,156	680	4,798		2,574,633
28.	Nebraska .....	NE	3,058,092	77,485	16,744		3,152,320
29.	Nevada .....	NV	606,695	3,890	4,571		615,156
30.	New Hampshire .....	NH	670,875	7,500	2,675	1,618	682,669
31.	New Jersey .....	NJ	1,617,354	50,300			1,667,654
32.	New Mexico .....	NM	605,741	76,385	517	9,795	692,438
33.	New York .....	NY	452,148	12,000	804	(1,715)	463,237
34.	North Carolina .....	NC	15,376,565	306,362	103,738	100,834	15,887,499
35.	North Dakota .....	ND	1,891,628		2,653		1,894,280
36.	Ohio .....	OH	53,683,592	3,342,744	373,427	523,963	57,943,645
37.	Oklahoma .....	OK	1,540,066	74,743	7,460		1,622,269
38.	Oregon .....	OR	2,914,897	1,008	765		2,916,670
39.	Pennsylvania .....	PA	24,037,627	2,430,469	180,884	104,845	26,753,825
40.	Rhode Island .....	RI	145,132				145,132
41.	South Carolina .....	SC	5,552,905	3,425	28,899	79,005	5,664,234
42.	South Dakota .....	SD	1,920,591	583,166	4,164		2,507,922
43.	Tennessee .....	TN	11,596,631	5,675,448	99,456	43,773	17,415,307
44.	Texas .....	TX	12,718,986	274,040	17,850	10,230	13,021,105
45.	Utah .....	UT	2,073,458	240,620	22,106		2,336,185
46.	Vermont .....	VT	471,468		1,726		473,194
47.	Virginia .....	VA	5,877,640	725,045	43,772	34,563	6,681,020
48.	Washington .....	WA	3,692,794	343,331	5,815	5,143	4,047,084
49.	West Virginia .....	WV	3,088,148	96,965	23,796	8,136	3,217,044
50.	Wisconsin .....	WI	11,018,605	2,020,041	105,664	132,673	13,276,983
51.	Wyoming .....	WY	513,796		(472)		513,325
52.	American Samoa .....	AS					
53.	Guam .....	GU	885				885
54.	Puerto Rico .....	PR	7,569				7,569
55.	U.S. Virgin Islands .....	VI	11,158				11,158
56.	Northern Mariana Islands .....	MP					
57.	Canada .....	CAN	35,823				35,823
58.	Aggregate Other Alien .....	OT	64,913				64,913
59.	Total		342,136,498	45,046,771	1,931,933	1,872,946	391,909,514

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0244	CINCINNATI INS GRP	.00000	31-0746871		0000020286	NASDAQ	CINCINNATI FINANCIAL CORPORATION	.OH	UIP	CINCINNATI FINANCIAL CORPORATION	Board of Directors		BOARD	.N	
.0244	CINCINNATI INS GRP	.10677	31-0542366		0001279885		THE CINCINNATI INSURANCE COMPANY	.OH	UDP	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.76236	31-1213778		0001279887		THE CINCINNATI LIFE INSURANCE COMPANY	.OH	RE	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.28665	31-0826946		0001279888		THE CINCINNATI CASUALTY COMPANY	.OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.23280	31-1241230		0001279886		THE CINCINNATI INDEMNITY COMPANY	.OH	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.13037	65-1316588		0001426763		THE CINCINNATI SPECIALTY UNDERWRITERS INSURANCE COMPANY	.DE	IA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	31-0790388				CFC INVESTMENT COMPANY	.OH	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	11-3823180		0001534469		CSU PRODUCER RESOURCES, INC	.OH	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	81-1908205				CLIC BP INVESTMENTS B, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	81-4633687				CLIC BP INVESTMENTS H, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	81-3640769				CLIC DS INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	82-1587731				CLIC WSD INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	82-3254447				CLIC UPTOWN INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	82-5173506				CLIC DISTRICT INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI LIFE INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	83-1627569				CIC UPTOWN INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	61-1936938				CIC DANAMONT INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	32-0613415				CIC ICON INVESTMENTS I, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	35-2698966				CIC BP INVESTMENTS G, LLC	.OH	NIA	THE CINCINNATI INSURANCE COMPANY	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000	98-1489371				CINCINNATI GLOBAL UNDERWRITING LTD.	.GBR	NIA	CINCINNATI FINANCIAL CORPORATION	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 1 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 2 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 3 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 4 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 5 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL DEDICATED NO 6 LIMITED	.GBR	IA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL UNDERWRITING AGENCY LIMITED								
.0244	CINCINNATI INS GRP	.00000					CINCINNATI GLOBAL UNDERWRITING SERVICES LIMITED	.GBR	NIA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	
.0244	CINCINNATI INS GRP	.00000						.GBR	NIA	CINCINNATI GLOBAL UNDERWRITING LTD.	Ownership	100.000	CINCINNATI FINANCIAL CORPORATION	.N	

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	31-0746871	CINCINNATI FINANCIAL CORPORATION	550,000,000								550,000,000	
00000	31-0790388	CFC INVESTMENT COMPANY										
10677	31-0542366	THE CINCINNATI INSURANCE COMPANY	(483,000,000)	(3,538,803)							(486,538,803)	(953,836,197)
28665	31-0826946	THE CINCINNATI CASUALTY COMPANY										534,729,362
23280	31-1241230	THE CINCINNATI INDEMNITY COMPANY										414,838,766
76236	31-1213778	THE CINCINNATI LIFE INSURANCE COMPANY										
00000	82-5173506	CLIC DISTRICT INVESTMENTS I, LLC										
00000	81-1908205	CLIC BP INVESTMENTS B, LLC										
00000	81-4633687	CLIC BP INVESTMENTS H, LLC										
00000	82-1587731	CLIC WSD INVESTMENTS I, LLC										
00000	82-3254447	CLIC UPTOWN INVESTMENTS I, LLC										
00000	81-3640769	CLIC DS INVESTMENTS I, LLC										
13037	65-1316588	THE CINCINNATI SPECIALTY UNDERWRITERS INSURANCE COMPANY	(67,000,000)				(92,024,776)				(159,024,776)	4,268,069
00000	83-1627569	CIC UPTOWN INVESTMENTS I, LLC		3,538,803							3,538,803	
00000	61-1936938	CIC DANAMONT INVESTMENTS I, LLC										
00000	32-0613415	CIC ICON INVESTMENTS I, LLC										
00000	35-2698966	CIC BP INVESTMENTS G, LLC										
00000	11-3823180	CSU PRODUCER RESOURCES, INC					92,024,776				92,024,776	
00000	98-1489371	CINCINNATI GLOBAL UNDERWRITING LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 1 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 2 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 3 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 4 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 5 LIMITED										
00000		CINCINNATI GLOBAL DEDICATED NO 6 LIMITED										
00000		CINCINNATI GLOBAL UNDERWRITING AGENCY LIMITED										
00000		CINCINNATI GLOBAL UNDERWRITING SERVICES LIMITED										
9999999 Control Totals									XXX			

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Responses
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? .....	YES
4. Will an actuarial opinion be filed by March 1? .....	YES
APRIL FILING	
5. Will Management’s Discussion and Analysis be filed by April 1? .....	YES
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) .....	YES
7. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) .....	YES
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
JUNE FILING	
9. Will an audited financial report be filed by June 1? .....	YES
10. Will Accountant’s Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES
AUGUST FILING	
11. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? .....	YES

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

MARCH FILING	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ...	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	YES
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO


ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
29.	<del>Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....</del>	
30.	<del>Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....</del>	
31.	<del>Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....</del>	
32.	<del>Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....</del>	
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
34.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) .....	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? .....	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....	NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? .....	NO
40.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? .....	YES
APRIL FILING		
41.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1? .....	YES
42.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	YES
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) ...	NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	YES
45.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	SEE EXPLANATION
46.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....	SEE EXPLANATION
47.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? .....	NO
48.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	YES
49.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
50.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	YES
51.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	YES
52.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	NO
AUGUST FILING		
53.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES
Explanations:		
12.		
14.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		
26.		
27.		
28.		
33.		
34.		
36.		
37.		
38.		
39.		
43.		
45.	EXEMPTION WAIVER RECEIVED FROM THE STATE OF OHIO DUE TO THE LIMITED NUMBER OFF POLICIES COVERED BY THE EXHIBIT	
46.	EXEMPTION WAIVER RECEIVED FROM THE STATE OF OHIO DUE TO THE LIMITED NUMBER OFF POLICIES COVERED BY THE EXHIBIT	
47.		
49.		
52.		
Bar Codes:		
12.	SIS Stockholder Information Supplement [Document Identifier 420]	
14.	Trusteed Surplus Statement [Document Identifier 490]	
18.	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]	
19.	Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]	
20.	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]	
21.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]	
22.	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]	
23.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

24.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]	 <div>7 6 2 3 6 2 0 2 0 4 4 9 0 0 0 0 0</div>
26.	C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]	 <div>7 6 2 3 6 2 0 2 0 4 5 1 0 0 0 0 0</div>
27.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	 <div>7 6 2 3 6 2 0 2 0 4 5 2 0 0 0 0 0</div>
28.	Modified Guaranteed Annuity Model Regulation [Document Identifier 453]	 <div>7 6 2 3 6 2 0 2 0 4 5 3 0 0 0 0 0</div>
33.	Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]	 <div>7 6 2 3 6 2 0 2 0 4 5 4 0 0 0 0 0</div>
34.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]	 <div>7 6 2 3 6 2 0 2 0 4 9 5 0 0 0 0 0</div>
36.	Medicare Part D Coverage Supplement [Document Identifier 365]	 <div>7 6 2 3 6 2 0 2 0 3 6 5 0 0 0 0 0</div>
37.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 <div>7 6 2 3 6 2 0 2 0 2 2 4 0 0 0 0 0</div>
38.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 <div>7 6 2 3 6 2 0 2 0 2 2 5 0 0 0 0 0</div>
39.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 <div>7 6 2 3 6 2 0 2 0 2 2 6 0 0 0 0 0</div>
43.	Credit Insurance Experience Exhibit [Document Identifier 230]	 <div>7 6 2 3 6 2 0 2 0 2 3 0 0 0 0 0 0</div>
47.	Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]	 <div>7 6 2 3 6 2 0 2 0 4 3 5 0 0 0 0 0</div>
49.	Variable Annuities Supplement [Document Identifier 286]	 <div>7 6 2 3 6 2 0 2 0 2 8 6 0 0 0 0 0</div>
52.	Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]	 <div>7 6 2 3 6 2 0 2 0 4 5 9 0 0 0 0 0</div>

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504. AGENTS' BALANCES .....	77,441	77,441		
2505. SEPARATE ACCOUNTS CLAIMS RECEIVABLE .....	2,275,465		2,275,465	
2506. RECEIVABLES CLEARING .....	54,678	12,938	41,739	58,915
2597. Summary of remaining write-ins for Line 25 from overflow page	2,407,584	90,379	2,317,204	58,915

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. LLC GUARANTEE .....	42,750	64,625
2597. Summary of remaining write-ins for Line 25 from overflow page	42,750	64,625

Additional Write-ins for Schedule T Line 58

	1  Active Status	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5 (b)	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
States, Etc.							
58004. CHN China .....	XXX	787				787	
58005. FIN Finland .....	XXX	736				736	
58006. FRA France .....	XXX	11,700				11,700	
58007. DEU Germany .....	XXX	722				722	
58008. GRC Greece .....	XXX	9,178				9,178	
58009. IRL Ireland .....	XXX	728				728	
58010. ISR Israel .....	XXX	2,008				2,008	
58011. ITA Italy .....	XXX	576				576	
58012. JPN Japan .....	XXX	4,491				4,491	
58013. MEX Mexico .....	XXX	2,709				2,709	
58014. PHL Philippines .....	XXX						
58015. POL Poland .....	XXX						
58016. ESP Spain .....	XXX	1,232				1,232	
58017. CHE Switzerland .....	XXX	2,308				2,308	
58018. TWN Taiwan, Republic of China .....	XXX	532				532	
58019. GBR United Kingdom .....	XXX	12,416				12,416	
58997. Summary of remaining write-ins for Line 58 from overflow page	XXX	50,121				50,121	



SUPPLEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2020  
(To Be Filed by March 1)

FOR THE STATE OF Florida.....  
NAIC Group Code 0244 ..... NAIC Company Code 76236 .....  
ADDRESS (City, State and Zip Code) FAIRFIELD , OH 45014-5141 .....  
Person Completing This Exhibit ELAINE MACKEY .....  
Title SECRETARY & ACTUARY ..... Telephone Number 513-870-2000 .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2017				Policies Issued in 2018; 2019; 2020			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	1588/1590	P.....	YES.....	0034000				01/01/1989	MEDICARE SUPPLEMENT POLICY	253	1	0.4	1				
0199999. Total Experience on Individual Policies										253	1	0.4	1				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address: P.O. BOX 145496 CINCINNATI , OH 45250-5496

2.2 Contact Person and Phone Number: ANN BINZER 513-870-2282
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address: P.O. BOX 145496 CINCINNATI , OH 45250-5496

3.2 Contact Person and Phone Number: ANN BINZER 513-870-2282
4. Explain any policies identified above as policy type "O".





SUPPLEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2020  
(To Be Filed by March 1)

FOR THE STATE OF Ohio.....  
NAIC Group Code 0244 ..... NAIC Company Code 76236 .....  
ADDRESS (City, State and Zip Code) FAIRFIELD , OH 45014-5141 .....  
Person Completing This Exhibit ELAINE MACKEY .....  
Title SECRETARY & ACTUARY ..... Telephone Number 513-870-2000 .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2017				Policies Issued in 2018; 2019; 2020			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	6655.....	P.....	YES.....	0034000.....	02/27/1987.....			01/01/1989.....	MEDICARE SUPPLEMENT POLICY.....	359.....			1.....				
0199999. Total Experience on Individual Policies										359.....			1.....				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address: P.O. BOX 145496 CINCINNATI , OH 45250-5496

2.2 Contact Person and Phone Number: ANN BINZER 513-870-2282
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address: P.O. BOX 145496 CINCINNATI , OH 45250-5496

3.2 Contact Person and Phone Number: ANN BINZER 513-870-2282
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

VM-20 RESERVES SUPPLEMENT – PART 1A

Life Insurance Reserves Valued According to VM-20 by Product Type  
For The Year Ended December 31, 2020  
(To Be Filed by March 1)

NAIC Group Code 0244

NAIC Company Code 76236

	Prior Year	Current Year	
	1	2	3
	Reported Reserve	Reported Reserve	Due and Deferred Premium Asset
1. Post-Reinsurance-Ceded Reserve			
1.1. Term Life Insurance.....	31,689,320	48,974	23,862
1.2. Universal Life With Secondary Guarantee .....	158,940	1,399	
1.3. Non-Participating Whole Life .....	4,335,390	12,282	2,236
1.4. Participating Whole Life .....			
1.5. Universal Life Without Secondary Guarantee .....			
1.6. Variable Universal Life Without Secondary Guarantee .....			
1.7. Variable Life Without Secondary Guarantee .....			
1.8. Indexed Life Without Secondary Guarantee .....			
1.9. Aggregate Write-Ins for Other Products			
2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)	36,183,650	62,655	XXX
3. Pre-Reinsurance-Ceded Reserve			
3.1. Term Life Insurance.....	33,937,040	52,431	23,862
3.2. Universal Life With Secondary Guarantee .....	159,170	1,402	
3.3. Non-Participating Whole Life .....	4,408,600	12,390	2,236
3.4. Participating Whole Life .....			
3.5. Universal Life Without Secondary Guarantee .....			
3.6. Variable Universal Life Without Secondary Guarantee .....			
3.7. Variable Life Without Secondary Guarantee .....			
3.8. Indexed Life Without Secondary Guarantee .....			
3.9. Aggregate Write-Ins for Other Products			
4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)	38,504,810	66,223	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	2,321,160	3,568	XXX
DETAILS OF WRITE-INS			
1.901. ....			
1.902. ....			
1.903. ....			
1.998. Summary of remaining write-ins for Line 1.9 from overflow page .....			
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)			
3.901. ....			
3.902. ....			
3.903. ....			
3.998. Summary of remaining write-ins for Line 3.9 from overflow page .....			
3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)			

## VM-20 RESERVES SUPPLEMENT – PART 1B

(\$000 Omitted for Face Amounts)

[illegible]

VM-20 RESERVES SUPPLEMENT – PART 2

Life PBR Exemption  
For The Year Ended December 31, 2020  
(To Be Filed by March 1)

Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)	
1. Has the company filed and been granted a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? .....	Yes [   ] No [ X ]
2. If the response to Question 1 is "Yes", then check the source of the granted "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)	
2.1 NAIC Adopted VM   [   ]	
2.2 State Statute (SVL) [   ] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? .....	Yes [   ] No [   ]
b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM): .....	
2.3 State Regulation        [   ] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Regulation different from the NAIC adopted VM? .....	Yes [   ] No [   ]
b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM): .....	

VM-20 RESERVES SUPPLEMENT – PART 3

Other Exclusions from Life PBR  
For The Year Ended December 31, 2020  
(To Be Filed by March 1)

1A. Has the company filed and been granted a Single State Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? .....	Yes [   ] No [ X ]	
1B. If the answer to question 1A is "Yes" please discuss any business not covered under the Single State Exemption. .....		
2A. If the answer to question 1A is "Yes", does the company have risks for policies issued outside its state of domicile? .....		Yes [   ] No [   ]
2B. If the answer to question 2A is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks. .....		
3. Is all of the company's individual ordinary life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? .....		Yes [   ] No [ X ]



SUPPLEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

**SCHEDULE O SUPPLEMENT**

For The Year Ended December 31, 2020  
(To Be Filed by March 1)

Of The Cincinnati Life Insurance Company  
ADDRESS (City, State and Zip Code) FAIRFIELD , OH 45014-5141  
NAIC Group Code 0244 NAIC Company Code 76236 Employer's Identification Number (FEIN) 31-1213778

**SUPPLEMENTAL SCHEDULE O - PART 1**

**Development of Incurred Losses**  
**(\$000 Omitted)**

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred		Cumulative Net Amounts Paid Policyholders				
		1 2016	2 2017	3 2018	4 2019	5 2020(a)
1.	Prior	897	743	443	410	308
2.	2016	186	154	92	85	64
3.	2017	XXX	322	192	178	133
4.	2018	XXX	XXX	137	127	95
5.	2019	XXX	XXX	XXX	192	144
6.	2020	XXX	XXX	XXX	XXX	157

**Section B - Other Accident and Health**

1.	Prior	274	192	201	137	106
2.	2016	546	44	3	3	(1)
3.	2017	XXX	451	111	2	3
4.	2018	XXX	XXX	487	78	2
5.	2019	XXX	XXX	XXX	394	60
6.	2020	XXX	XXX	XXX	XXX	438

**Section C - Credit Accident and Health**

1.	Prior	NONE				
2.	2016					
3.	2017					
4.	2018					
5.	2019					
6.	2020					

**Section D -**

1.	Prior	NONE				
2.	2016					
3.	2017					
4.	2018					
5.	2019					
6.	2020					

**Section E -**

1.	Prior	NONE				
2.	2016					
3.	2017					
4.	2018					
5.	2019					
6.	2020					

**Section F -**

1.	Prior	NONE				
2.	2016					
3.	2017					
4.	2018					
5.	2019					
6.	2020					

**Section G -**

1.	Prior	NONE				
2.	2016					
3.	2017					
4.	2018					
5.	2019					
6.	2020					

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

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

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

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

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

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

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

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

SUPPLEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses  
(\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred		Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
		1 2016	2 2017	3 2018	4 2019	5 2020
1.	2016 .....	1,111	1,475	1,065	XXX	XXX
2.	2017 .....	XXX	1,106	741	946	XXX
3.	2018 .....	XXX	XXX	867	1,325	859
4.	2019 .....	XXX	XXX	XXX	902	535
5.	2020 .....	XXX	XXX	XXX	XXX	755

Section B - Other Accident and Health

1.	2016 .....	1,327	1,402	1,226	XXX	XXX
2.	2017 .....	XXX	1,218	964	514	XXX
3.	2018 .....	XXX	XXX	1,379	1,008	817
4.	2019 .....	XXX	XXX	XXX	1,289	890
5.	2020 .....	XXX	XXX	XXX	XXX	1,360

Section C - Credit Accident and Health

1.	2016 .....				XXX	XXX
2.	2017 .....	XXX				XXX
3.	2018 .....	XXX				
4.	2019 .....	XXX	XX	XXX		
5.	2020 .....	XXX	XX	XXX	XXX	

Section D -

1.	2016 .....				XXX	XXX
2.	2017 .....	XXX				XXX
3.	2018 .....	XXX				
4.	2019 .....	XX	XX	XXX		
5.	2020 .....	XXX	XX	XXX	XXX	

Section E -

1.	2016 .....				XXX	XXX
2.	2017 .....	XXX				XXX
3.	2018 .....	XXX				
4.	2019 .....	XX	XX	XXX		
5.	2020 .....	XXX	XX	XXX	XXX	

Section F -

1.	2016 .....				XXX	XXX
2.	2017 .....	XXX				XXX
3.	2018 .....	XXX				
4.	2019 .....	XX	XX	XXX		
5.	2020 .....	XXX	XX	XXX	XXX	

Section G -

1.	2016 .....				XXX	XXX
2.	2017 .....	XXX				XXX
3.	2018 .....	XXX				
4.	2019 .....	XX	XX	XXX		
5.	2020 .....	XXX	XX	XXX	XXX	

SUPPLEMENT FOR THE YEAR 2020 OF THE CINCINNATI LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses  
(\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2016	2 2017	3	4 2019	5 2020
1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX	XX			
4. 2019 .....	XXX	XXX	XXX		
5. 2020	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX				
4. 2019 .....	XX	XX	XX		
5. 2020	XXX	XX	XXX	XXX	

Section C - Credit Accident and Health

1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX				
4. 2019 .....	XX	XX	XX		
5. 2020	XXX	XX	XXX	XXX	

Section D -

1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX				
4. 2019 .....	XX	XX	XX		
5. 2020	XXX	XX	XXX	XXX	

Section E -

1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX				
4. 2019 .....	XX	XX	XX		
5. 2020	XXX	XX	XXX	XXX	

Section F -

1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX				
4. 2019 .....	XX	XX	XX		
5. 2020	XXX	XX	XXX	XXX	

Section G -

1. 2016 .....					
2. 2017 .....	XXX				
3. 2018 .....	XXX				
4. 2019 .....	XX	XX	XX		
5. 2020	XXX	XX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business		1 Methodology	2 Amount
1. Industrial Life .....		OTHER .....	199
2. Ordinary Life .....		OTHER .....	28,578
3. Individual Annuity .....		OTHER .....	4,395
4. Supplementary Contracts .....			
5. Credit Life .....			
6. Group Life .....		DEVELOPMENT .....	202
7. Group Annuities .....			
8. Group Accident and Health .....		DEVELOPMENT .....	5,823
9. Credit Accident and Health .....			
10. Other Accident and Health .....		DEVELOPMENT .....	3,204
11. Total			42,401