

Ohio**Department
of Insurance**Mike DeWine, Governor
Jon Husted, Lt Governor

Jillian Froment, Director

Electronic Filing Authenticity AffidavitOffice of Risk Assessment, 50 W Town Street, 3rd Floor - Suite 300, Columbus OH 43215
614-644-2658 | 614-644-3256 (Fax) | insurance.ohio.gov**Ohio Domestic Insurers Only**Company Name: Unity Financial Life Insurance CompanyNAIC No. 63819

We, the undersigned executive officers of Unity Financial Life Insurance Company (herein referred to as the "Company"), an insurance company organized under the laws of Ohio, hereby certify that the documents indicated below by an "X" were filed electronically with the National Association of Insurance Commissioners ("NAIC") and that the electronic filing or filings, including ".PDF" filings, are exact copies of the original documents, except for formatting differences due to electronic filing. The original documents are maintained in this Company's office and are available for inspection upon request by the Ohio Department of Insurance for at least five years following the date of filing. An executed, notarized NAIC Annual Statement or Quarterly Statement jurat page or an original, notarized signature page (if this filing relates to a supplemental filing without a jurat page) attesting to the accuracy and authenticity of the corresponding NAIC Annual Statement or Quarterly Statement or supplemental schedule is attached to this Affidavit.

Company Type: Fraternal Title Property & Casualty Life & Health Health Other _____

Applicable documents:

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Annual Statement Electronic Filing[s]," which include "the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail."

Date of filing with the NAIC: _____ An original jurat page is attached.

Original filing. Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Risk-Based Capital Electronic Filing," which "includes all risk-based capital data" due March 1.

Date of filing with the NAIC: _____ An original, notarized signature page is attached.

Original filing. Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Supplemental Electronic Filing," which "includes all supplements due April 1, per the *Annual Statement Instructions*."

Date of filing with the NAIC: _____

List of supplemental documents included in this Affidavit: _____

All original notarized signature pages are attached, as applicable.

Original filing. Amended filing.

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Quarterly Statement Electronic Filing," which "includes the complete quarterly statement data" due May 15, August 15, and November 15.

Date of filing with the NAIC: 09/15/2021

Original filing. Amended filing.

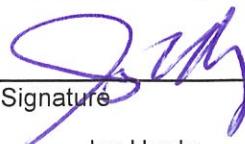
The documents referred to in the *General Instructions* to the *NAIC Checklist* as "Combined Annual Statement Electronic Filing," which "includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit" due May 1.

Date of filing with the NAIC: _____

The documents referred to in the *General Instructions* to the *NAIC Checklist* as "June. PDF Filing," which includes "the Audited Financial Statements" due June 1.

Date of filing with the NAIC: _____

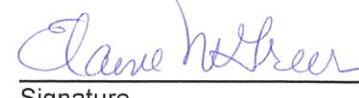
Original filing. Amended filing.


Signature

111521

(Name) Jay Hardy
(Title)* President & CEO
Signature

111521

(Name) Kevin Losekamp
(Title)* Treasurer
Signature

111521

(Name) Elaine Greer
(Title)* Secretary

*Signers must be principal executive officers of the Company (Chairman, President, CEO, CFO, Treasurer, Secretary)

INS7240 (12/2019)



MICHAEL O'BRIEN

Notary Public State of Ohio

My Commission Expires 06-18-2022

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

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021
OF THE CONDITION AND AFFAIRS OF THE

UNITY FINANCIAL LIFE INSURANCE COMPANY

NAIC Group Code 0000 0000 NAIC Company Code 63819 Employer's ID Number 23-1640528

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH

Country of Domicile United States of America

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

Incorporated/Organized 05/06/1964 Commenced Business 05/06/1964

Statutory Home Office 4675 Cornell Road, Suite 160, Cincinnati, OH, US 45241
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 4675 Cornell Road, Suite 160, Cincinnati, OH, US 45241
(Street and Number) (City or Town, State, Country and Zip Code)

513-247-0711

(Area Code) (Telephone Number)

Mail Address P.O. Box 625700, Cincinnati, OH, US 45262-5700
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 4675 Cornell Road, Suite 160, Cincinnati, OH, US 45241
(Street and Number) (City or Town, State, Country and Zip Code)

513-247-0711

(Area Code) (Telephone Number)

Internet Website Address www.ulife.com

Statutory Statement Contact Kevin Losekamp, 513-247-5665
(Name) klosekamp@ulife.com, 513-247-5040
(E-mail Address) (Area Code) (Telephone Number)

OFFICERS

President Jay Cresson Hardy Treasurer Kevin James Losekamp #
Secretary Elaine Marie Greer

OTHER

Cynthia Lee English, Vice President Adam Michael Goller, Vice President Ryan Michael Walsman #, Vice President

DIRECTORS OR TRUSTEES

David Benjamin Abraham Thomas Cresson Hardy - Chairman David Kevin Mullen
David Michael Davis John Bernard Yanko Jay Cresson Hardy

State of Ohio
County of Hamilton SS:

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

Jay Hardy
President

Elaine Greer
Secretary

Kevin Losekamp
Treasurer

Subscribed and sworn to before me this

15th day of November

Yes [X] No []

Michael O'Brien
Notary
June 18, 2022

a. Is this an original filing?
b. If no,
1. State the amendment number
2. Date filed
3. Number of pages attached



MICHAEL O'BRIEN
Notary Public State of Ohio
My Commission Expires 06-18-2022