



QUARTERLY STATEMENT

As of September 30, 2019
of the Condition and Affairs of the

IOWA AMERICAN INSURANCE COMPANY

NAIC Group Code.....291, 291 (Current Period) (Prior Period)	NAIC Company Code..... 31577	Employer's ID Number..... 42-1019089
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... November 15, 1973	Commenced Business..... February 1, 1974	
Statutory Home Office	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	614-225-8211 (Area Code) (Telephone Number)
Mail Address	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	614-225-8211 (Area Code) (Telephone Number)
Internet Web Site Address	ENCOVA.COM	
Statutory Statement Contact	AMY E KUHLMAN (Name) ACCOUNTING@ENCOVA.COM (E-Mail Address)	614-225-8285 (Area Code) (Telephone Number) (Extension) 614-225-8330 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. DAVID LYNN KAUFMAN	CHIEF EXECUTIVE OFFICER	2. MARCHELLE ELAINE MOORE	SECRETARY
3. JAMES CHRISTOPHER HOWAT	TREASURER	4. THOMAS JOSEPH OBROKTA JR.	PRESIDENT

OTHER

GREGORY ARTHUR BURTON EXECUTIVE CHAIR

DIRECTORS OR TRUSTEES

GREGORY ARTHUR BURTON JAMES CHRISTOPHER HOWAT DAVID LYNN KAUFMAN MARCHELLE ELAINE MOORE
THOMAS JOSEPH OBROKTA JR.

State of..... OHIO
County of..... FRANKLIN

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.

(Signature)	(Signature)	(Signature)
DAVID LYNN KAUFMAN	MARCHELLE ELAINE MOORE	JAMES CHRISTOPHER HOWAT
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
CHIEF EXECUTIVE OFFICER	SECRETARY	TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This 7th day of November, 2019	b. If no:	1. State the amendment number
		2. Date filed
		3. Number of pages attached

IOWA AMERICAN INSURANCE COMPANY
ASSETS

	Current Statement Date			4
	1	2	3	December 31 Prior Year Net Admitted Assets
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	19,005,227		19,005,227	18,772,329
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....(416,995)), cash equivalents (\$.....919,855) and short-term investments (\$.....0).....	502,860		502,860	1,358,867
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....		(0)	0	0
9. Receivables for securities.....			0	(0)
10. Securities lending reinvested collateral assets.....	224,000		224,000	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	19,732,087	(0)	19,732,088	20,131,196
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	158,563		158,563	151,115
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	707,137		707,137	560,848
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....54,000 earned but unbilled premiums).....	60,000	6,000	54,000	2,693,983
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	471,811		471,811	(749,461)
16.2 Funds held by or deposited with reinsured companies.....	2,091,230		2,091,230	1,771,754
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	11,740
18.2 Net deferred tax asset.....	409,756	121,523	288,233	293,442
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	1,051,148		1,051,148	1,340,787
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	29,711	0	29,711	209,015
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	24,711,443	127,523	24,583,921	26,414,419
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	24,711,443	127,523	24,583,921	26,414,419

DETAILS OF WRITE-INS				
1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Pooled general expenses receivable.....	24,853		24,853	204,157
2502. Equities and deposits in pools and associations.....	4,858		4,858	4,858
2503. Prepaid expenses.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	29,711	0	29,711	209,015

IOWA AMERICAN INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	2 December 31 Prior Year
1.	Losses (current accident year \$.....1,974,614).....	9,554,761	9,273,713
2.	Reinsurance payable on paid losses and loss adjustment expenses.....	546,467	386,239
3.	Loss adjustment expenses.....	1,617,652	1,686,131
4.	Commissions payable, contingent commissions and other similar charges.....	240,673	254,363
5.	Other expenses (excluding taxes, licenses and fees).....	392,502	462,141
6.	Taxes, licenses and fees (excluding federal and foreign income taxes).....	46,743	78,776
7.1	Current federal and foreign income taxes (including \$.....6,865 on realized capital gains (losses)).....	8,399	
7.2	Net deferred tax liability.....		
8.	Borrowed money \$.....0 and interest thereon \$.....0.....		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....96,376 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	3,078,606	2,889,093
10.	Advance premium.....		
11.	Dividends declared and unpaid:		
11.1	Stockholders.....		
11.2	Policyholders.....	17,960	27,713
12.	Ceded reinsurance premiums payable (net of ceding commissions).....	(42,601)	487,196
13.	Funds held by company under reinsurance treaties.....	111,225	2,737,683
14.	Amounts withheld or retained by company for account of others.....		
15.	Remittances and items not allocated.....		
16.	Provision for reinsurance (including \$.....0 certified).....		
17.	Net adjustments in assets and liabilities due to foreign exchange rates.....		
18.	Drafts outstanding.....		
19.	Payable to parent, subsidiaries and affiliates.....	671,209	81,009
20.	Derivatives.....		
21.	Payable for securities.....		
22.	Payable for securities lending.....	224,000	
23.	Liability for amounts held under uninsured plans.....		
24.	Capital notes \$.....0 and interest thereon \$.....0.....		
25.	Aggregate write-ins for liabilities.....	74,522	157,435
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	16,542,118	18,521,493
27.	Protected cell liabilities.....		
28.	Total liabilities (Lines 26 and 27).....	16,542,118	18,521,493
29.	Aggregate write-ins for special surplus funds.....	0	0
30.	Common capital stock.....	1,000,000	1,000,000
31.	Preferred capital stock.....		
32.	Aggregate write-ins for other than special surplus funds.....	0	0
33.	Surplus notes.....		
34.	Gross paid in and contributed surplus.....	5,000,000	5,000,000
35.	Unassigned funds (surplus).....	2,041,803	1,892,926
36.	Less treasury stock, at cost:		
36.1	.....0.000 shares common (value included in Line 30 \$.....0).....		
36.2	.....0.000 shares preferred (value included in Line 31 \$.....0).....		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36).....	8,041,803	7,892,926
38.	Totals (Page 2, Line 28, Col. 3).....	24,583,921	26,414,418

2501.	Pooled general expenses payable.....	8,172	122,767
2502.	Reinsurance assumed overhead payable.....	65,761	34,078
2503.	Obligations in pools and associations.....	589	589
2598.	Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	74,522	157,435
2901.	.....	
2902.	.....	
2903.	.....	
2998.	Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.	.....	
3202.	.....	
3203.	.....	
3298.	Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299.	Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

IOWA AMERICAN INSURANCE COMPANY
STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....(80,487)).....	3,764,407	11,499,241	14,858,008
1.2 Assumed..... (written \$.....5,110,581).....	4,929,422	5,008,783	6,669,327
1.3 Ceded..... (written \$.....22,873).....	3,876,121	11,615,609	15,006,702
1.4 Net..... (written \$.....5,007,221).....	4,817,708	4,892,415	6,520,634
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....3,174,555):			
2.1 Direct.....	2,647,665	8,012,641	10,339,789
2.2 Assumed.....	2,854,436	2,760,643	3,635,746
2.3 Ceded.....	2,699,901	8,081,170	10,433,066
2.4 Net.....	2,802,200	2,692,114	3,542,469
3. Loss adjustment expenses incurred.....	706,815	650,982	907,376
4. Other underwriting expenses incurred.....	1,572,149	1,379,516	1,994,350
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	5,081,164	4,722,612	6,444,195
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(263,456)	169,803	76,439
INVESTMENT INCOME			
9. Net investment income earned.....	421,259	363,369	505,761
10. Net realized capital gains (losses) less capital gains tax of \$.....7,077.....	10,343	7,251	7,155
11. Net investment gain (loss) (Lines 9 + 10).....	431,602	370,620	512,916
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....2,371).....	(2,371)	(8,889)	(7,764)
13. Finance and service charges not included in premiums.....	15,405	16,584	21,886
14. Aggregate write-ins for miscellaneous income.....	10,009	0	(4,022)
15. Total other income (Lines 12 through 14).....	23,043	7,695	10,101
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	191,189	548,118	599,455
17. Dividends to policyholders.....	12,672	34,174	40,742
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	178,517	513,944	558,713
19. Federal and foreign income taxes incurred.....	13,062	181,518	282,798
20. Net income (Line 18 minus Line 19) (to Line 22).....	165,455	332,426	275,915
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	7,892,926	7,565,393	7,565,393
22. Net income (from Line 20).....	165,455	332,426	275,915
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....18,800.....	(61,724)	21,154	27,698
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	14,451	88,510	168,880
27. Change in nonadmitted assets.....	30,695	(49,524)	(144,960)
28. Change in provision for reinsurance.....			
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	148,877	392,566	327,533
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	8,041,803	7,957,959	7,892,926

DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Miscellaneous income or expense.....	10,009		(4,022)
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	10,009	0	(4,022)
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

IOWA AMERICAN INSURANCE COMPANY
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	6,972,918	4,223,095	5,543,807
2. Net investment income.....	518,960	412,918	578,992
3. Miscellaneous income.....	23,043	7,695	10,101
4. Total (Lines 1 through 3).....	7,514,921	4,643,708	6,132,899
5. Benefit and loss related payments.....	3,901,672	(1,746,635)	(2,267,383)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	2,462,805	1,190,802	1,860,220
8. Dividends paid to policyholders.....	22,425	50,074	63,004
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		193,385	248,388
10. Total (Lines 5 through 9).....	6,386,902	(312,374)	(95,771)
11. Net cash from operations (Line 4 minus Line 10).....	1,128,018	4,956,082	6,228,671
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	2,900,039	941,162	1,195,346
12.2 Stocks.....			
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	2,900,039	941,162	1,195,346
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	3,262,015	5,438,143	5,889,389
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....	224,000		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	3,486,015	5,438,143	5,889,389
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(585,975)	(4,496,981)	(4,694,043)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	(1,398,047)	(437,986)	(620,615)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(1,398,047)	(437,986)	(620,615)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(856,004)	21,115	914,013
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	1,358,864	444,851	444,851
19.2 End of period (Line 18 plus Line 19.1).....	502,860	465,966	1,358,864

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

20.0001			
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NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices
This statement has been completed in accordance with the accounting practices and procedures prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the State of Ohio. A reconciliation of the company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Sate of Ohio is shown below.

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
NET INCOME					
(1) The Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 165,455	\$ 275,913
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 165,455	\$ 275,913
SURPLUS					
(5) The Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 8,041,803	\$ 7,892,926
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 8,041,803	\$ 7,892,926

The preparation of financial statements in conformity with Statutory Accounting Principles as described in the NAIC Annual Statement Instructions and the Accounting Policies and Procedures Manual requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

(2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method
Bonds not back by other loans are stated at amortized cost using the scientific amortization method.

(6) Basis for Loan-Backed Securities and Adjustment Methodology
Loan-backed securities are stated in accordance with the guidance provided in SSAP No. 43R: Loan-backed and Structured Securities. The restrospective adjustment method is used to value these securities

D. Going Concern

Management has concluded that there is no substantial doubt about the Company's ability to continue as a going concern.

Note 2 – Accounting Changes and Corrections of Errors

No significant changes

Note 3 – Business Combinations and Goodwill

No significant changes

Note 4 – Discontinued Operations

No significant changes

Note 5 – Investments

D. Loan-Backed Securities

(1) Description of Sources Used to Determine Prepayment Assumptions
Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from market data vendors or broker dealer values.

(2) Securities with Recognized Other-Than-Temporary Impairment
Not Applicable

(3) Recognized OTTI securities
Not Applicable

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

NOTES TO FINANCIAL STATEMENTS

a. The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ 7
	2. 12 Months or Longer	\$ 106
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 74,993
	2. 12 Months or Longer	\$ 14,332

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary
The Company performed an analysis of loan-backed securities and determined that exposure to credit risk was not a factor and did not warrant any other-than-temporary impairments.

E.	Dollar Repurchase Agreements and/or Securities Lending Transactions	
(3)	Collateral Received	
b.	The fair value of that collateral and of the portion of that collateral that it has sold or repledged	\$ 224,000
F.	Repurchase Agreements Transactions Accounted for as Secured Borrowing	
(1)	Company Policies or Strategies for Repo Programs	
	Not Applicable	
G.	Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing	
	Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions	
(1)	Company Policy or Strategies for Engaging in Repo Programs	
	Not Applicable	
H.	Repurchase Agreements Transactions Accounted for as a Sale	
	Repurchase Transaction – Cash Taker – Overview of Sale Transactions	
(1)	Company Policy or Strategies for Engaging in Repo Programs	
	Not Applicable	
I.	Reverse Repurchase Agreements Transactions Accounted for as a Sale	
	Repurchase Transaction – Cash Provider – Overview of Sale Transactions	
(1)	Company Policy or Strategies for Engaging in Repo Programs	
	Not Applicable	
M.	Working Capital Finance Investments	
	Not Applicable	
N.	Offsetting and Netting of Assets and Liabilities	
	Not Applicable	

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

No significant changes

Note 7 – Investment Income

No significant changes

Note 8 – Derivative Instruments

No significant changes

Note 9 – Income Taxes

No significant changes

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes

Note 11 – Debt

The company did not have any capital notes or other debt obligations outstanding during the periods reported.

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A.	Defined Benefit Plan
	No significant changes

Note 13 – Capital and Surplus, Shareholder’s Dividend Restrictions and Quasi-Reorganizations

NOTES TO FINANCIAL STATEMENTS

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

No significant changes

Note 15 – Leases

No significant changes

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No significant changes

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

B. Transfer and Servicing of Financial Assets

Not Applicable

C. Wash Sales

Not Applicable

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

No significant changes

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No significant changes

Note 20 – Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date
Not applicable

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy
Not applicable

(3) Policies when Transfers Between Levels are Recognized
Not applicable

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement
Not applicable

(5) Fair Value Disclosures
Not applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not applicable

C. Fair Value Level

The following tables reflect the estimated fair values and admitted values of all admitted assets and liabilities that are financial instruments excluding those accounted for under the equity method (subsidiaries, joint ventures and ventures). The estimated fair values are categorized into the three-level fair value hierarchy as described above.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 19,799,413	\$ 19,005,227	\$	\$ 19,799,413	\$	\$	\$

Bonds and Common Stocks

When available, the estimated fair values for bonds, including loan-backed and structured securities, and unaffiliated common stocks are based on quoted prices in active markets that are readily and regularly obtainable. Generally, these investments are classified in Level 1. Generally, these are the most liquid of the Company's securities holdings and valuation of these securities does not involve management's judgment.

When quoted prices in active markets are not available, the determination of estimated fair value is based on market standard valuation methodologies, giving priority to observable inputs. The significant inputs to the market standard valuation methodologies for certain types of securities with reasonable levels of price transparency are inputs that are observable in the market or can be derived principally from or corroborated by observable market data. Generally, these investments are classified as Level 2.

When observable inputs are not available, the market standard valuation methodologies for determining the estimated fair value of certain types of securities that trade infrequently, and therefore have little or no price transparency, rely on inputs that are significant to the estimated fair value that are not observable in the market or cannot be derived principally from or corroborated by observable market data. These unobservable inputs can be based in large part on management's judgment or estimation, and cannot be supported by reference or market activity. Even though these inputs are unobservable, management believes they are consistent with what other market participants would use when pricing such securities and are considered appropriate given the circumstances. Generally, these investments are classified as Level 3.

NOTES TO FINANCIAL STATEMENTS

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Affiate LLC Holding	\$	n/a		Asset is not a marketable financial instrument

E. NAV Practical Expedient Investments

Not Applicable

Note 21 – Other Items

No significant changes

Note 22 – Events Subsequent

Subsequent events have been considered through November 7, 2019 for these statutory financial statements which are to be issued on November 7, 2019. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

Note 23 – Reinsurance

No significant changes

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

F. Risk Sharing Provisions of the Affordable Care Act

- (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions?

Yes [] No [X]
- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year: to date

Not Applicable
- (3) Roll forward of prior year ACA Risk Sharing Provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance:

Not Applicable
- (4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Not Applicable
- (5) ACA Risk Corridors Receivable as of Reporting Date

Not Applicable

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

Reserves for the Company’s incurred losses and loss adjustment expenses (after intercompany pooling) attributable to insured events of prior years reflect favorable development totaling \$465,777. The development can be attributed primarily to the re-estimation of unpaid losses and loss adjustment expenses in the workers' compensation, private passenger auto liability, commercial auto liability and auto physical damage. The favorable development in these lines was slightly offset by losses in the products liability, homeowners, other liability and commercial multiple peril lines of business. The changes reflected in these lines were generally the result of recent development trends. There were not any premium adjustments made as a result of this loss and loss adjustment expense development..

B. Information about Significant Changes in Methodologies and Assumptions

There have been no significant changes in methodologies and assumptions used in calculating the liability for unpaid loss and loss adjustment expense.

Note 26 – Intercompany Pooling Arrangements

No significant changes

Note 27 – Structured Settlements

No significant changes

Note 28 – Health Care Receivables

NOTES TO FINANCIAL STATEMENTS

No significant changes

Note 29 – Participating Policies

No significant changes

Note 30 – Premium Deficiency Reserves

No significant changes

Note 31 – High Deductibles

No significant changes

Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

No significant changes

Note 33 – Asbestos/Environmental Reserves

No significant changes

Note 34 – Subscriber Savings Accounts

No significant changes

Note 35 – Multiple Peril Crop Insurance

No significant changes

Note 36 – Financial Guaranty Insurance

The Company did not write financial guaranty insurance during the periods reported.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [☐] No [☒]

1.2

If yes, has the report been filed with the domiciliary state?

Yes [☐] No [☐]

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [☐] No [☒]

2.2

If yes, date of change:

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes [☒] No [☐]

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [☒] No [☐]

3.3

If the response to 3.2 is yes, provide a brief description of those changes.

The insurance group name changed from Motorists Insurance Group to Encova Mutual Insurance Group. Also, company names changed from Brickstreet Foundation to Encova Foundation of West Vrginia, Inc. Motorists Group Foundation was renamed Encova Foundation of Ohio. MIG Realty changed to Encova Realty, and Motorists Service Corporation changed to Encova Service Corporation.

3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [☐] No [☒]

3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

Yes [☐] No [☒]

4.2

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

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

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes [☐] No [☐] N/A [☒]

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2018

6.2

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

12/31/2013

6.3

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

05/13/2015

6.4

By what department or departments?
Iowa Insurance Division

6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [☐] No [☐] N/A [☒]

6.6

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

Yes [☐] No [☐] N/A [☒]

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [☐] No [☒]

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?

Yes [☐] No [☒]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [☐] No [☒]

8.4

If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

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

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [☒] No [☐]

(a)

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b)

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c)

Compliance with applicable governmental laws, rules and regulations;

(d)

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e)

Accountability for adherence to the code.

9.11

If the response to 9.1 is No, please explain:

9.2

Has the code of ethics for senior managers been amended?

Yes [☐] No [☒]

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ☐ No ☒
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☒ No ☐
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$

0

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes ☐ No ☒
- 11.2

If yes, give full and complete information relating thereto:

12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$

0
13.

Amount of real estate and mortgages held in short-term investments:

\$

0
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes ☒ No ☐
- 14.2

If yes, please complete the following:

- 14.21

Bonds
- 14.22

Preferred Stock
- 14.23

Common Stock
- 14.24

Short-Term Investments
- 14.25

Mortgage Loans on Real Estate
- 14.26

All Other
- 14.27

Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)
- 14.28

Total Investment in Parent included in Lines 14.21 to 14.26 above

1 Prior Year End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
\$0	\$0
0	0
0	0
0	0
0	0
0	0
1,576	0
\$1,576	\$0
\$0	\$0

- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes ☐ No ☒
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes ☐ No ☐
- If no, attach a description with this statement.

16.

For the reporting entity's security lending program, state the amount of the following as of current statement date:
- 16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$

224,000
- 16.2

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$

224,000
- 16.3

Total payable for securities lending reported on the liability page:

\$

224,000
17.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes ☒ No ☐

- 17.1

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

1 Name of Custodian(s)	2 Custodian Address
BNY Mellon	500 Grant Street One Mellon Center, Suite #1035, Pittsburgh, PA 15258

- 17.2

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

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

- 17.3

Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes ☐ No ☒
- 17.4

If yes, give full and complete information relating thereto:

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

- 17.5

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

1 Name of Firm or Individual	2 Affiliation
NEAM New England Asset Management, Inc.	U

- 17.5097

For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets?

Yes ☒ No ☐
- 17.5098

For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes ☒ No ☐

- 17.6

For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105900	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	NO

- 18.1

Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes ☒ No ☐

IOWA AMERICAN INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

18.2 If no, list exceptions:

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

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

b. Issuer or obligor is current on all contracted interest and principal payments.

c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes [] No [X]
20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:

a. The security was purchased prior to January 1, 2018.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.

d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes [] No [X]

GENERAL INTERROGATORIES (continued)

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?

If yes, attach an explanation.

Yes [] No [X] N/A []

2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?

If yes, attach an explanation.

Yes [] No [X]

3.1

Have any of the reporting entity's primary reinsurance contracts been canceled?

Yes [] No [X]

3.2

If yes, give full and complete information thereto:

4.1

Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2

If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
	0.000	0.000	0	0	0	0	0	0	0	0
Total	XXX	XXX	0	0	0	0	0	0	0	0

5.

Operating Percentages:

5.1 A&H loss percent

5.2 A&H cost containment percent

5.3 A&H expense percent excluding cost containment expenses

0.000%

0.000%

0.000%

6.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]

6.2

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

\$ 0

6.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]

6.4

If yes, please provide the amount of funds administered as of the reporting date.

\$ 0

7.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes [X] No []

7.1

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

Yes [] No []

IOWA AMERICAN INSURANCE COMPANY
SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
All Other Insurers						
00000.....	AA-1120156.....	Lloyd's Syndicate Number 1686.....	GBR.....	Authorized.....	.....	.....
00000.....	AA-1120184.....	Lloyd's Syndicate Number 3268.....	GBR.....	Authorized.....	.....	.....
00000.....	AA-1126005.....	Lloyd's Syndicate Number 4000.....	GBR.....	Authorized.....	.....	.....

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, Etc.		1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
1.	Alabama.....AL	..N...						
2.	Alaska.....AK	..N...						
3.	Arizona.....AZ	..N...						
4.	Arkansas.....AR	..N...						
5.	California.....CA	..N...						
6.	Colorado.....CO	..N...						
7.	Connecticut.....CT	..N...						
8.	Delaware.....DE	..N...						
9.	District of Columbia.....DC	..N...						
10.	Florida.....FL	..N...						
11.	Georgia.....GA	..N...						
12.	Hawaii.....HI	..N...						
13.	Idaho.....ID	..N...						
14.	Illinois.....IL	..L...	.....20,269	.....5,109,345	.....1,774,290	.....5,436,997	.....8,979,040	.....8,379,833
15.	Indiana.....IN	..N...						
16.	Iowa.....IA	..L...	.....(75,775)	.....2,900,589	.....773,709	.....1,095,295	.....2,480,663	.....2,765,592
17.	Kansas.....KS	..N...						
18.	Kentucky.....KY	..N...						
19.	Louisiana.....LA	..N...						
20.	Maine.....ME	..N...						
21.	Maryland.....MD	..N...						
22.	Massachusetts.....MA	..N...						
23.	Michigan.....MI	..N...						
24.	Minnesota.....MN	..N...						
25.	Mississippi.....MS	..N...						
26.	Missouri.....MO	..N...						
27.	Montana.....MT	..N...						
28.	Nebraska.....NE	..L...	.....(24,981)	.....2,721,686	.....634,730	.....1,273,306	.....2,752,057	.....3,437,076
29.	Nevada.....NV	..N...						
30.	New Hampshire.....NH	..N...						
31.	New Jersey.....NJ	..N...						
32.	New Mexico.....NM	..N...						
33.	New York.....NY	..N...						
34.	North Carolina.....NC	..N...						
35.	North Dakota.....ND	..L...						
36.	Ohio.....OH	..L...						
37.	Oklahoma.....OK	..N...						
38.	Oregon.....OR	..N...						
39.	Pennsylvania.....PA	..N...						
40.	Rhode Island.....RI	..N...						
41.	South Carolina.....SC	..N...						
42.	South Dakota.....SD	..L...						
43.	Tennessee.....TN	..N...						
44.	Texas.....TX	..N...						
45.	Utah.....UT	..N...						
46.	Vermont.....VT	..N...						
47.	Virginia.....VA	..N...						
48.	Washington.....WA	..N...						
49.	West Virginia.....WV	..N...						
50.	Wisconsin.....WI	..N...						
51.	Wyoming.....WY	..N...						
52.	American Samoa.....AS	..N...						
53.	Guam.....GU	..N...						
54.	Puerto Rico.....PR	..N...						
55.	US Virgin Islands.....VI	..N...						
56.	Northern Mariana Islands.....MP	..N...						
57.	Canada.....CAN	..N...						
58.	Aggregate Other Alien.....OT	..XXX...	.....0	.....0	.....0	.....0	.....0	.....0
59.	Totals.....	..XXX...	.....(80,487)	.....10,731,620	.....3,182,729	.....7,805,598	.....14,211,760	.....14,582,501

DETAILS OF WRITE-INS

58001.....	..XXX...						
58002.....	..XXX...						
58003.....	..XXX...						
58998. Summary of remaining write-ins for Line 58 from overflow page....	..XXX...	.....0	.....0	.....0	.....0	.....0	.....0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	..XXX...	.....0	.....0	.....0	.....0	.....0	.....0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	6	R - Registered - Non-domiciled RRGs.....	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - See DSLI).....	0	Q - Qualified - Qualified or accredited reinsurer.....	0
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.....	0	N - None of the above - Not allowed to write business in the state.....	51

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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
012			31-1783451..				Broad Street Brokerage Insurance Agency, LLC	OH.....	NIA.....	Motorists Life Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	10204...	62-1590861..			Consumers Insurance USA, Inc.....	OH.....	IA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3, 6.....
			42-1496478..				IMARC, LLC.....	IA.....	DS.....	Iowa Mutual Insurance Company.....	Ownership.....	...90.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	31577...	42-1019089..			Iowa American Insurance Company.....	OH.....	RE.....	Iowa Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	14338...	42-0333120..			Iowa Mutual Insurance Company.....	OH.....	UDP.....				Motorists Mutual Insurance Company.....	...N.....	1.....
			41-1563134..				MCM Insurance Agency, Inc.....	MN.....	NIA.....	Motorists Commercial Mutual Insurance Company	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	40932...	31-1022150..			MICO Insurance Company.....	OH.....	IA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	13331...	41-0299900..			Motorists Commercial Mutual Insurance Company	OH.....	IA.....				Motorists Mutual Insurance Company.....	...N.....	1.....
	0291	Encova Mutual Insurance Group	66311...	31-0717055..			Motorists Life Insurance Company.....	OH.....	IA.....	Motorists Mutual Insurance Company.....	Ownership.....	...70.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	14621...	31-4259550..			Motorists Mutual Insurance Company.....	OH.....	IA.....					...N.....	1.....
			31-0851906..				Encova Service Corporation.....	OH.....	NIA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3.....
	0291	Encova Mutual Insurance Group	23175...	02-0178290..			Phenix Mutual Fire Insurance Company.....	OH.....	IA.....				Motorists Mutual Insurance Company.....	...N.....	1.....
	0291	Encova Mutual Insurance Group	19950...	39-0739760..			Wilson Mutual Insurance Company.....	OH.....	IA.....				Motorists Mutual Insurance Company.....	...N.....	1.....
			81-4951462..				Encova Realty, LLC.....	OH.....	NIA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	3.....
			31-1712343..				Encova Foundation of Ohio.....	OH.....	NIA.....	Motorists Mutual Insurance Company.....	Board.....		Motorists Mutual Insurance Company.....	...N.....	4.....
	0291	Encova Mutual Insurance Group	12372...	20-2394166..			BrickStreet Mutual Insurance Company.....	WV.....	IA.....				Motorists Mutual Insurance Company.....	...N.....	1.....
	0291	Encova Mutual Insurance Group	15137...	46-1783383..			PinnaclePoint Insurance Company.....	WV.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	2.....
	0291	Encova Mutual Insurance Group	13045...	26-0818900..			NorthStone Insurance Company.....	PA.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	2.....
	0291	Encova Mutual Insurance Group	15136...	46-1795752..			SummitPoint Insurance Company.....	WV.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	2.....
	0291	Encova Mutual Insurance Group	13016...	87-0807723..			AlleghenyPoint Insurance Company.....	PA.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	...N.....	2.....
			80-0772825..				Encova Foundation of West Virginia, Inc.....	WV.....	NIA.....	BrickStreet Mutual Insurance Company.....	Board.....		Motorists Mutual Insurance Company.....	...N.....	5.....

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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*

Aster	Explanation
1	The company is a mutual property/casualty insurer and an affiliate of Encova Mutual Insurance Group. Motorists Mutual Insurance Company is the ultimate controlling entity of the Group through an interlocking board of directors.
2	This company is a stock subsidiary of BrickStreet Mutual Insurance Company with ultimate control of that parent as described in Note1
3	The entity is a subsidiary of an insurer that is an affiliate of Encova Mutual Insurance Group. With ultimate control of that insurer as described in Note 1
4	Schedule Y, Parts 1 and 1A, includes the Encova Foundation of Ohio a 501(c)(3) tax-exempt private foundation incorporated on 7/12/2000.
5	Schedule Y, Parts 1 and 1A, includes Encova Foundation of West Virginia a 501(c)(3) tax-exempt private foundation incorporated on December 23, 2011.
6	CIUSA became an Ohio corporation on 06/18/2019 per the Secretary of State, but it did not technically become an insurance company in the State of Ohio until 07/23/2019. The ODI will be doing the analysis for the 2nd quarter filings, per agreement with the State of Tennessee, due to the timing difference.

IOWA AMERICAN INSURANCE COMPANY
PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	214,997	(63,209)	(29.400)	127.495
2. Allied lines.....	356,561	181,671	50.951	41.236
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....	194,930	331,074	169.843	38.017
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....			0.000	
10. Financial guaranty.....			0.000	
11.1. Medical professional liability - occurrence.....			0.000	
11.2. Medical professional liability - claims-made.....			0.000	
12. Earthquake.....	10,422		0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....	545,212	(1,877)	(0.344)	50.960
17.1. Other liability-occurrence.....	661,164	1,194,407	180.652	130.789
17.2. Other liability-claims made.....			0.000	
17.3. Excess workers' compensation.....			0.000	
18.1. Products liability-occurrence.....	176,447		0.000	19.088
18.2. Products liability-claims made.....			0.000	
19.1, 19.2. Private passenger auto liability.....			0.000	
19.3, 19.4. Commercial auto liability.....	1,018,431	789,923	77.563	70.506
21. Auto physical damage.....	478,220	224,497	46.944	63.347
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....	108,022	(8,821)	(8.166)	12.191
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.000	
35. Totals.....	3,764,406	2,647,665	70.334	69.680
DETAILS OF WRITE-INS				
3401.			0.000	
3402.			0.000	
3403.			0.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.000	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.000	

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	34	(4,411)	589,568
2. Allied lines.....	(151)	(9,741)	980,388
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....	1,087	(8,482)	584,604
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1. Medical professional liability - occurrence.....			
11.2. Medical professional liability - claims made.....			
12. Earthquake.....		(26)	26,962
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....	(72,721)	(133,561)	2,066,254
17.1. Other liability-occurrence.....	2,771	59,064	1,725,467
17.2. Other liability-claims made.....			
17.3. Excess workers' compensation.....			
18.1. Products liability-occurrence.....	(4,180)	15,050	566,727
18.2. Products liability-claims made.....			
19.1 19.2. Private passenger auto liability.....			
19.3 19.4. Commercial auto liability.....	2,774	7,516	2,639,474
21. Auto physical damage.....	446	(2,278)	1,263,485
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....	(9)	(3,618)	288,691
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	(69,949)	(80,487)	10,731,620
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. 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.

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	<div>NO</div>
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	<div>NO</div>
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	<div>NO</div>
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	<div>NO</div>

Explanation:

1.

The data for this supplement is not required to be filed.
2.

The data for this supplement is not required to be filed.
3.

The data for this supplement is not required to be filed.
4.

The data for this supplement is not required to be filed.

Bar Code:



IOWA AMERICAN INSURANCE COMPANY
Overflow Page for Write-Ins

NONE

IOWA AMERICAN INSURANCE COMPANY
SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other-than-temporary impairment recognized.....		
8. Deduct current year's depreciation.....		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	1,576	670
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....	(1,576)	906
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	1,576
12. Deduct total nonadmitted amounts.....	(0)	1,576
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	18,772,329	14,154,734
2. Cost of bonds and stocks acquired.....	3,262,015	5,889,389
3. Accrual of discount.....	9,723	11,645
4. Unrealized valuation increase (decrease).....	(41,348)	26,792
5. Total gain (loss) on disposals.....	17,420	6,931
6. Deduct consideration for bonds and stocks disposed of.....	2,900,039	1,195,346
7. Deduct amortization of premium.....	114,872	121,816
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7-8+9+10).....	19,005,227	18,772,329
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	19,005,227	18,772,329

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	17,359,048	1,071,728	940,071	(37,764)	17,635,787	17,359,048	17,452,941	17,175,175
2. NAIC 2 (a).....	1,402,586	149,805		(105)	1,240,663	1,402,586	1,552,286	1,597,155
3. NAIC 3 (a).....							0	
4. NAIC 4 (a).....							0	
5. NAIC 5 (a).....							0	
6. NAIC 6 (a).....							0	
7. Total Bonds.....	18,761,633	1,221,533	940,071	(37,868)	18,876,450	18,761,633	19,005,227	18,772,329
PREFERRED STOCK								
8. NAIC 1.....							0	
9. NAIC 2.....							0	
10. NAIC 3.....							0	
11. NAIC 4.....							0	
12. NAIC 5.....							0	
13. NAIC 6.....							0	
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	18,761,633	1,221,533	940,071	(37,868)	18,876,450	18,761,633	19,005,227	18,772,329

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

Sch. DA - Pt. 1
NONE

Sch. DA - Verification
NONE

Sch. DB - Pt. A - Verification
NONE

Sch. DB - Pt. B - Verification
NONE

Sch. DB - Pt. C - Sn. 1
NONE

Sch. DB - Pt. C - Sn. 2
NONE

Sch. DB - Verification
NONE

IOWA AMERICAN INSURANCE COMPANY

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	1,352,405	444,852
2. Cost of cash equivalents acquired.....	9,018,973	12,131,095
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	9,451,523	11,223,542
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	919,855	1,352,405
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	919,855	1,352,405

Sch. A Pt. 2

NONE

Sch. A Pt. 3

NONE

Sch. B - Pt. 2

NONE

Sch. B - Pt. 3

NONE

Sch. BA - Pt. 2

NONE

Sch. BA - Pt. 3

NONE

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1	2			3	4	5	6	7	8	9	10
CUSIP Identification	Description			Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - U.S. Special Revenue and Special Assessment											
3131XT	N6	3	FH ZM0413 - RMBS.....		08/12/2019.....	SUNTRUST ROBINSON HUMPHREY INC.....		.....111,071	.....108,130	.....116	1.....
31329K	LR	3	FH ZA2136 - RMBS.....		08/09/2019.....	VARIOUS.....		.....19,397	.....18,686	.....21	1.....
3132A5	E4	3	FH ZS4655 - RMBS.....		07/16/2019.....	Nomura.....		.....65,211	.....62,603	.....91	1.....
3132AC	SR	2	FH ZT0528 - RMBS.....		08/12/2019.....	CANTOR FITZGERALD + CO.....		.....127,913	.....124,963	.....134	1.....
3199999. Total - Bonds - U.S. Special Revenue and Special Assessments.....								.....323,592	.....314,382	.....361	.....XXX.....
Bonds - Industrial and Miscellaneous											
037833	DM	9	APPLE INC.....		09/04/2019.....	GOLDMAN.....		.....49,886	.....50,000		1FE.....
05531F	BH	5	BB&T CORP.....		07/23/2019.....	MORGAN STANLEY CO.....		.....49,958	.....50,000		1FE.....
254687	FK	7	WALT DISNEY CO.....		09/03/2019.....	JP MORGAN SECURITIES LLC.....		.....199,184	.....200,000		1FE.....
438516	BW	5	HONEYWELL INTERNATIONAL INC.....		07/30/2019.....	JP MORGAN SECURITIES LLC.....		.....199,586	.....200,000		1FE.....
674599	CW	3	OCCIDENTAL PETROLEUM CORP.....		08/06/2019.....	Citigroup (SSB).....		.....149,805	.....150,000		2FE.....
693475	AX	3	PNC FINANCIAL SERVICES GROUP INC.....		07/18/2019.....	MORGAN STANLEY CO.....		.....249,523	.....250,000		1FE.....
3899999. Total - Bonds - Industrial and Miscellaneous.....								.....897,942	.....900,000	.....0	.....XXX.....
8399997. Total - Bonds - Part 3.....								.....1,221,533	.....1,214,382	.....361	.....XXX.....
8399999. Total - Bonds.....								.....1,221,533	.....1,214,382	.....361	.....XXX.....
9999999. Total - Bonds, Preferred and Common Stocks.....								.....1,221,533	.....XXX	.....361	.....XXX.....

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:.....0.

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2		3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
											11	12	13	14	15							
CUSIP Identification	Description		F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Admini- strative Symbol/ Market Indicator (a)
Bonds - U.S. Government																						
36176D	CR	2		09/01/2019.	Paydown.....		.....15,161	.....15,161	.....15,661	.....15,665	.....	.....(504)	.....	.....(504)	.....	.....15,161	.....	.....	.....0	.....384	02/15/2041.	1.....
3620C6	YU	3		09/01/2019.	Paydown.....		.....36,768	.....36,768	.....37,903	.....37,911	.....	.....(1,143)	.....	.....(1,143)	.....	.....36,768	.....	.....	.....0	.....868	11/15/2040.	1.....
912828	LA	6		07/15/2019.	Maturity @ 100.00.....		.....23,960	.....23,960	.....24,392	.....23,961	.....(1,584)	.....(275)	.....	.....(1,859)	.....	.....22,102	.....	.....1,858	.....1,858	.....446	07/15/2019.	1.....
0599999.	Total - Bonds - U.S. Government.....						.....75,889	.....75,889	.....77,956	.....77,538	.....(1,584)	.....(1,923)	.....0	.....(3,507)	.....0	.....74,031	.....0	.....1,858	.....1,858	.....1,699	XXX	XXX
Bonds - U.S. States, Territories and Possessions																						
604129	MY	9		08/01/2019.	Call @ 100.00.....		.....50,000	.....50,000	.....61,337	.....50,928	.....	.....(928)	.....	.....(928)	.....	.....50,000	.....	.....	.....0	.....2,500	08/01/2021.	1FE.....
1799999.	Total - Bonds - U.S. States, Territories & Possessions.....						.....50,000	.....50,000	.....61,337	.....50,928	.....0	.....(928)	.....0	.....(928)	.....0	.....50,000	.....0	.....	.....0	.....2,500	XXX	XXX
Bonds - U.S. Political Subdivisions of States																						
521841	MY	9		08/15/2019.	Call @ 100.00.....		.....130,000	.....130,000	.....149,250	.....131,728	.....	.....(1,728)	.....	.....(1,728)	.....	.....130,000	.....	.....	.....0	.....6,500	08/15/2025.	1FE.....
521841	NN	2		08/15/2019.	Call @ 100.00.....		.....20,000	.....20,000	.....22,962	.....20,266	.....	.....(266)	.....	.....(266)	.....	.....20,000	.....	.....	.....0	.....1,000	08/15/2025.	1FE.....
2499999.	Total - Bonds - U.S. Political Subdivisions of States.....						.....150,000	.....150,000	.....172,212	.....151,993	.....0	.....(1,993)	.....0	.....(1,993)	.....0	.....150,000	.....0	.....	.....0	.....7,500	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																						
3128MJ	X4	7		08/01/2019.	VARIOUS.....		.....66,236	.....63,588	.....66,352	.....66,560	.....	.....(324)	.....	.....(324)	.....	.....66,236	.....	.....	.....0	.....1,302	03/01/2046.	1.....
3128P7	MQ	3		09/01/2019.	VARIOUS.....		.....20,601	.....19,880	.....20,899	.....20,733	.....	.....(131)	.....	.....(131)	.....	.....20,601	.....	.....	.....0	.....539	09/01/2029.	1.....
3131XT	N6	3		09/01/2019.	Paydown.....		.....2,316	.....2,316	.....2,396	.....	.....(63)	.....	.....(63)	.....	.....2,316	.....	.....	.....0	.....7	11/01/2045.	1.....	
31329K	LR	3		09/01/2019.	Paydown.....		.....145	.....145	.....153	.....	.....(6)	.....	.....(6)	.....	.....145	.....	.....	.....0	.....1	09/01/2029.	1.....	
3132A5	E4	3		09/01/2019.	Paydown.....		.....2,028	.....2,028	.....2,116	.....	.....(84)	.....	.....(84)	.....	.....2,028	.....	.....	.....0	.....9	03/01/2046.	1.....	
3132AC	SR	2		09/01/2019.	Paydown.....		.....1,776	.....1,776	.....1,824	.....	.....(42)	.....	.....(42)	.....	.....1,776	.....	.....	.....0	.....5	08/01/2046.	1.....	
3132QU	AK	9		09/01/2019.	VARIOUS.....		.....111,658	.....108,661	.....112,422	.....112,156	.....	.....(498)	.....	.....(498)	.....	.....111,658	.....	.....	.....0	.....2,556	11/01/2045.	1.....
3132XC	RV	9		09/01/2019.	VARIOUS.....		.....131,523	.....128,507	.....131,961	.....131,942	.....	.....(420)	.....	.....(420)	.....	.....131,523	.....	.....	.....0	.....3,043	08/01/2046.	1.....
31371N	XK	6		09/01/2019.	Paydown.....		.....1,156	.....1,156	.....1,144	.....1,142	.....	.....14	.....	.....14	.....	.....1,156	.....(0)	.....(0)	.....0	.....42	07/01/2028.	1.....
3137A4	FR	3		09/01/2019.	Paydown.....		.....16,895	.....16,895	.....16,861	.....16,866	.....	.....29	.....	.....29	.....	.....16,895	.....	.....	.....0	.....461	09/15/2037.	1.....
3137A5	SG	0		09/01/2019.	Paydown.....		.....1,936	.....1,936	.....2,007	.....1,955	.....	.....(20)	.....	.....(20)	.....	.....1,936	.....	.....	.....0	.....32	03/15/2038.	1.....
3138WJ	YB	8		09/01/2019.	Paydown.....		.....8,071	.....8,071	.....8,381	.....8,364	.....	.....(292)	.....	.....(292)	.....	.....8,071	.....	.....0	.....0	.....173	02/01/2042.	1.....
3138X3	BX	9		09/01/2019.	Paydown.....		.....26,450	.....26,450	.....27,809	.....27,742	.....	.....(1,292)	.....	.....(1,292)	.....	.....26,450	.....	.....0	.....0	.....740	09/01/2043.	1.....
3138Y6	MY	7		09/01/2019.	Paydown.....		.....4,631	.....4,631	.....4,909	.....4,870	.....	.....(239)	.....	.....(239)	.....	.....4,631	.....	.....	.....0	.....113	12/01/2044.	1.....
31397S	RW	6		09/01/2019.	Paydown.....		.....20,402	.....20,402	.....18,097	.....19,662	.....	.....739	.....	.....739	.....	.....20,402	.....	.....(0)	.....(0)	.....409	04/25/2026.	1.....
3140EV	4E	4		09/01/2019.	Paydown.....		.....383	.....383	.....402	.....403	.....	.....(20)	.....	.....(20)	.....	.....383	.....	.....0	.....0	.....9	01/01/2046.	1.....
3140QA	NN	6		09/01/2019.	Paydown.....		.....94,130	.....94,130	.....98,682	.....	.....	.....(4,552)	.....	.....(4,552)	.....	.....94,130	.....	.....	.....0	.....1,842	02/01/2049.	1.....
31416X	FA	3		09/01/2019.	Paydown.....		.....2,895	.....2,895	.....3,099	.....3,097	.....	.....(202)	.....	.....(202)	.....	.....2,895	.....	.....0	.....0	.....76	12/01/2040.	1.....
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.....						.....513,230	.....503,849	.....519,515	.....415,493	.....0	.....(7,403)	.....0	.....(7,403)	.....0	.....513,230	.....0	.....	.....0	.....11,359	XXX	XXX
Bonds - Industrial and Miscellaneous																						
23305Y	AD	1		09/01/2019.	Paydown.....		.....2,879	.....2,879	.....2,907	.....2,884	.....	.....(5)	.....	.....(5)	.....	.....2,879	.....	.....(0)	.....(0)	.....103	08/12/2044.	1FE.....
263901	AC	4		08/07/2019.	JP MORGAN SECURITIES LLC.....		.....50,793	.....50,000	.....53,948	.....50,788	.....	.....(305)	.....	.....(305)	.....	.....50,483	.....	.....310	.....310	.....1,995	07/15/2020.	1FE.....
29366A	AA	2		07/01/2019.	Paydown.....		.....	.....	.....	.....	.....	.....	.....	.....0	.....	.....	.....	.....	.....0	.....165	09/01/2023.	1FE.....
38014B	AC	3		09/19/2019.	VARIOUS.....		.....56,034	.....56,034	.....56,034	.....56,034	.....	.....	.....	.....0	.....	.....56,034	.....	.....0	.....0	.....916	04/20/2020.	1FE.....
44935A	AC	9		09/16/2019.	Paydown.....		.....28,710	.....28,710	.....28,710	.....28,710	.....	.....	.....	.....0	.....	.....28,710	.....	.....(0)	.....(0)	.....505	08/17/2020.	1FE.....
82653E	AA	5		09/20/2019.	Paydown.....		.....12,818	.....12,818	.....12,818	.....	.....	.....0	.....	.....0	.....	.....12,818	.....	.....(0)	.....(0)	.....161	01/22/2036.	1FE.....
927804	FH	2		06/30/2019.	Maturity @ 100.00.....		.....	.....	.....	.....	.....	.....	.....	.....0	.....	.....	.....	.....	.....0	.....2,500	06/30/2019.	1FE.....
92935J	BC	8		09/01/2019.	Paydown.....		.....1,886	.....1,886	.....1,958	.....1,900	.....	.....(14)	.....	.....(14)	.....	.....1,886	.....	.....(0)	.....(0)	.....61	02/15/2044.	1FE.....

QE05

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Admini- strative Symbol/ Market Indicator (a)
3899999.	Total - Bonds - Industrial and Miscellaneous.....					.....153,120	.....152,327	.....156,376	.....140,316	.....0	.....(324)	.....0	.....(324)	.....0	.....152,810	.....0	.....310	.....310	.....6,407	XXX	XXX
8399997.	Total - Bonds - Part 4.....					.....942,238	.....932,065	.....987,395	.....836,268	.....(1,584)	.....(12,571)	.....0	.....(14,155)	.....0	.....940,071	.....0	.....2,168	.....2,168	.....29,464	XXX	XXX
8399999.	Total - Bonds.....					.....942,238	.....932,065	.....987,395	.....836,268	.....(1,584)	.....(12,571)	.....0	.....(14,155)	.....0	.....940,071	.....0	.....2,168	.....2,168	.....29,464	XXX	XXX
9999999.	Total - Bonds, Preferred and Common Stocks.....					.....942,238	XXX	.....987,395	.....836,268	.....(1,584)	.....(12,571)	.....0	.....(14,155)	.....0	.....940,071	.....0	.....2,168	.....2,168	.....29,464	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:0.

Sch. DB - Pt. A - Sn. 1

NONE

Sch. DB - Pt. B - Sn. 1

NONE

Sch. DB - Pt. D - Sn. 1

NONE

Sch. DB - Pt. D - Sn. 2

NONE

IOWA AMERICAN INSURANCE COMPANY
SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets reported in aggregate on one Line 10 of the Assets page and not included on Schedules A, B, BA, D, DB and E.)

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation and Administrative Symbol / Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Date
Common Stocks - Industrial and Miscellaneous (Unaffiliated)						
	BNY MELLON SECURITIES OVERNIGHT FUND.....	.....	L.....	.....224,000	.....224,000	.....
7499999.	Total - Common Stocks - Industrial and Miscellaneous (Unaffiliated).....	.....		.....224,000	.....224,000	XXX
7799999.	Total - Common Stock.....	.....		.....224,000	.....224,000	.....0
7899999.	Total - Preferred and Common Stock.....	.....		.....224,000	.....224,000	XXX
9999999.	Totals.....	.....		.....224,000	.....224,000	XXX

General Interrogatories:

1. The activity for the year: Fair Value \$.....224,000 Book/Adjusted Carrying Value \$.....224,000
2. Average balance for the year: Fair Value \$.....110,955 Book/Adjusted Carrying Value \$.....110,955
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
NAIC 1: \$.....224,000 NAIC 2: \$.....0 NAIC 3: \$.....0 NAIC 4: \$.....0 NAIC 5: \$.....0 NAIC 6: \$.....0

IOWA AMERICAN INSURANCE COMPANY

SCHEDULE DL - PART 2

SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets included on Schedules A, B, BA, D, DB and E and not reported in aggregate on Line 10 of the Assets page).

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation and Administrative Symbol / Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Date

General Interrogatories:

1. The activity for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0

NONE

IOWA AMERICAN INSURANCE COMPANY
SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount or interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
The Bank of NY Mellon..... Pittsburgh, PA.....							.....(416,995)	XXX
0199999. Total Open Depositories.....	XXX	XXX	.....0	.....0	.....0	.....0	.....(416,995)	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	.....0	.....0	.....0	.....0	.....(416,995)	XXX
0599999. Total Cash.....	XXX	XXX	.....0	.....0	.....0	.....0	.....(416,995)	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
All Other Money Market Mutual Funds								
316175 10 8	FIDELITY IMM:GOVT I.....		09/27/2019.....	.....1.910		.....919,855	.....1,416	.....1,222
8699999. Total - All Other Money Market Mutual Funds.....						.....919,855	.....1,416	.....1,222
8899999. Total - Cash Equivalents.....						.....919,855	.....1,416	.....1,222