

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

IOWA MUTUAL INSURANCE COMPANY

NAIC Group Code	0291 (Current)	0291 (Prior)	NAIC Company Code	14338	Employer's ID Number	42-0333120
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		OH
Country of Domicile	United States of America					
Incorporated/Organized	03/12/1900			Commenced Business	03/12/1900	
Statutory Home Office	471 EAST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
Main Administrative Office	471 EAST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	471 EAST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
Internet Website Address	ENCOVA.COM					
Statutory Statement Contact	AMY E KUHLMAN (Name)			614-225-8285 (Area Code) (Telephone Number)		
	ACCOUNTING@ENCOVA.COM (E-mail Address)			614-225-8330 (FAX Number)		

OFFICERS

CHIEF EXECUTIVE OFFICER	THOMAS JOSEPH OBROKTA JR.	TREASURER	JAMES CHRISTOPHER HOWAT
SECRETARY	MARCHELLE ELAINE MOORE	PRESIDENT	GRADY BRENDAN CAMPBELL

OTHER

GREGORY ARTHUR BURTON, EXECUTIVE CHAIR	DIRECTORS OR TRUSTEES	JAMES CHRISTOPHER HOWAT
JEFFREY LEIGH BENINTENDI	GRADY BRENDAN CAMPBELL	
THOMAS JOSEPH OBROKTA JR.	MATTHEW CARL WILCOX	

State of OH
County of FRANKLIN SS

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



THOMAS JOSEPH OBROKTA JR
CHIEF EXECUTIVE OFFICER



MARCHELLE ELAINE MOORE
SECRETARY



JAMES CHRISTOPHER HOWAT
TREASURER
Subscribed and sworn to before me this
10th day of February 2022

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



Deborah Dailey
Notary Public, State of Ohio
My Commission Expires 11-26-22

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	40,659,424		40,659,424	27,959,559
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	0
2.2 Common stocks	17,048,980		17,048,980	23,958,587
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	869,999
5. Cash (\$ (27,165) , Schedule E - Part 1), cash equivalents (\$ 9,457,996 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	9,430,831		9,430,831	9,159,295
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)	4,500	4,500	0	4,616,128
9. Receivable for securities	5,000		5,000	23
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	67,148,734	4,500	67,144,234	66,563,591
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	260,134		260,134	230,769
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	2,371,201	1,612	2,369,589	6,885,485
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	3,451,788		3,451,788	3,933,173
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	1,950,921		1,950,921	1,807,090
16.2 Funds held by or deposited with reinsured companies	15,956,363		15,956,363	7,358,513
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	164,697
18.2 Net deferred tax asset	736,206		736,206	572,522
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	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	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets	33,182	0	33,182	3,261
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	91,908,529	6,112	91,902,417	87,519,101
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	91,908,529	6,112	91,902,417	87,519,101
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Misc Other Assets	33,182		33,182	3,261
2502.				
2503.				
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)	33,182	0	33,182	3,261

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	28,553,082	27,869,897
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	1,411,846	96,728
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	4,863,949	4,761,346
4. Commissions payable, contingent commissions and other similar charges	703,313	725,798
5. Other expenses (excluding taxes, licenses and fees)	1,872,749	1,804,472
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	145,209	192,792
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	558,834	.....
7.2 Net deferred tax liability .....	.....	.....
8. Borrowed money \$ and interest thereon \$ .....	.....	.....
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 7,285,490 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ 0 for medical loss ratio rebate per the Public Health Service Act)	8,657,981	8,470,123
10. Advance premium	110,474	118,329
11. Dividends declared and unpaid:		
11.1 Stockholders .....	.....	.....
11.2 Policyholders	(250)	.....
12. Ceded reinsurance premiums payable (net of ceding commissions)	1,539,613	610,588
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	4,549,847	6,071,011
14. Amounts withheld or retained by company for account of others	109,616	121,273
15. Remittances and items not allocated	286,407	265,019
16. Provision for reinsurance (including \$ 0 certified) (Schedule F, Part 3, Column 78)	34,586	167,495
17. Net adjustments in assets and liabilities due to foreign exchange rates .....	.....	.....
18. Drafts outstanding .....	.....	.....
19. Payable to parent, subsidiaries and affiliates	14,019	2,338,564
20. Derivatives	0	0
21. Payable for securities	30,878	.....
22. Payable for securities lending .....	.....	.....
23. Liability for amounts held under uninsured plans .....	.....	.....
24. Capital notes \$ and interest thereon \$ .....	.....	.....
25. Aggregate write-ins for liabilities	148,770	1,031,081
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	53,591,173	54,644,266
27. Protected cell liabilities .....	.....	.....
28. Total liabilities (Lines 26 and 27)	53,591,173	54,644,266
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	5,000,000	.....
31. Preferred capital stock .....	.....	.....
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes .....	.....	3,000,000
34. Gross paid in and contributed surplus	3,000,000	.....
35. Unassigned funds (surplus)	30,311,245	29,874,838
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$ ..... ) .....	.....	.....
36.2 shares preferred (value included in Line 31 \$ ..... ) .....	.....	.....
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	38,311,245	32,874,838
38. TOTALS (Page 2, Line 28, Col. 3)	91,902,418	87,519,104
DETAILS OF WRITE-INS		
2501. Miscellaneous liabilities	148,770	1,031,081
2502. .....	.....	.....
2503. .....	.....	.....
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	148,770	1,031,081
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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	18,438,840	18,246,981
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7).....	9,271,952	9,593,889
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	2,781,461	2,741,434
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	5,786,796	5,838,996
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	17,840,209	18,174,319
7. Net income of protected cells.....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....	598,631	72,662
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	1,548,919	902,628
10. Net realized capital gains or (losses) less capital gains tax of \$ 991,206 (Exhibit of Capital Gains (Losses)).....	2,781,440	(652,741)
11. Net investment gain (loss) (Lines 9 + 10).....	4,330,359	249,887
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ 65,819).....	(65,819)	(63,648)
13. Finance and service charges not included in premiums.....	32,133	0
14. Aggregate write-ins for miscellaneous income.....	(109,748)	57,566
15. Total other income (Lines 12 through 14).....	(143,434)	(6,082)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	4,785,557	316,467
17. Dividends to policyholders.....	67,128	20,879
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).....	4,718,429	295,588
19. Federal and foreign income taxes incurred.....	61,746	56,825
20. Net income (Line 18 minus Line 19)(to Line 22).....	4,656,683	238,763
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	32,874,838	31,513,374
22. Net income (from Line 20).....	4,656,683	238,763
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (531,841).....	(2,286,783)	3,092,391
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(368,158)	(741,969)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	2,095,561	94,096
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....	132,909	(115,040)
29. Change in surplus notes.....	(3,000,000)	
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).....	5,000,000	
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....	3,000,000	0
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 (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....	0	0
37. Aggregate write-ins for gains and losses in surplus.....	(3,793,805)	(1,206,777)
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	5,436,407	1,361,464
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	38,311,245	32,874,838
DETAILS OF WRITE-INS		
0501.....		
0502.....		
0503.....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....	0	0
1401. Miscellaneous income or expense.....	(109,748)	57,566
1402. Gain/(loss) on equipment disposals.....		0
1403.....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	(109,748)	57,566
3701. Miscellaneous gains / losses.....	1,206,195	(1,206,777)
3702. Reclass for organizational restructure.....	(5,000,000)	
3703.....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....	(3,793,805)	(1,206,777)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	16,929,828	13,590,474
2. Net investment income	1,171,443	(158,313)
3. Miscellaneous income	(143,434)	(6,082)
4. Total (Lines 1 through 3)	17,957,837	13,426,079
5. Benefit and loss related payments	7,417,480	9,105,473
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	7,879,455	6,637,152
8. Dividends paid to policyholders	66,878	50,887
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	861,263	(361,568)
10. Total (Lines 5 through 9)	16,225,075	15,431,944
11. Net cash from operations (Line 4 minus Line 10)	1,732,762	(2,005,865)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	5,155,385	8,223,693
12.2 Stocks	9,208,503	1,364,973
12.3 Mortgage loans	0	0
12.4 Real estate	696,788	0
12.5 Other invested assets	4,734,267	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	30,878	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	19,825,821	9,588,666
13. Cost of investments acquired (long-term only):		
13.1 Bonds	18,016,020	4,196,532
13.2 Stocks	464,844	460,273
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	72,638	188,617
13.6 Miscellaneous applications	4,977	23
13.7 Total investments acquired (Lines 13.1 to 13.6)	18,558,480	4,845,445
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	1,267,342	4,743,221
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	(2,728,568)	2,991,863
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(2,728,568)	2,991,863
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	271,535	5,729,219
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	9,159,294	3,430,075
19.2 End of period (Line 18 plus Line 19.1)	9,430,829	9,159,294

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

20.0001. Non-Cash Exchanges	41,535
20.0002. Surplus Note Forgiveness	3,000,000
20.0003. Capital Stock from Organizational Restructure	5,000,000

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	53,812	28,907	25,674	57,045
2. Allied lines	55,577	30,718	29,328	56,967
3. Farmowners multiple peril	60,661	37,302	27,560	70,403
4. Homeowners multiple peril	1,217,091	691,637	662,979	1,245,750
5. Commercial multiple peril	3,020,149	1,333,954	1,434,676	2,919,427
6. Mortgage guaranty	0	0		0
8. Ocean marine	2,684	1,642	1,398	2,928
9. Inland marine	324,529	163,963	161,671	326,821
10. Financial guaranty	0	0		0
11.1 Medical professional liability - occurrence	0	0		0
11.2 Medical professional liability - claims-made	0	0		0
12. Earthquake	15,806	9,027	8,999	15,834
13. Group accident and health	0	0		0
14. Credit accident and health (group and individual)	0	0		0
15. Other accident and health	0	0		0
16. Workers' compensation	8,251,542	3,777,782	3,933,670	8,095,654
17.1 Other liability - occurrence	814,256	360,719	394,505	780,470
17.2 Other liability - claims-made	30,927	39,649	39,367	31,209
17.3 Excess workers' compensation	0	0		0
18.1 Products liability - occurrence	4,976	6,528	4,265	7,239
18.2 Products liability - claims-made	0	0		0
19.1, 19.2 Private passenger auto liability	811,714	329,361	304,533	836,542
19.3, 19.4 Commercial auto liability	2,145,195	1,003,434	999,738	2,148,891
21. Auto physical damage	1,447,205	632,608	609,228	1,470,585
22. Aircraft (all perils)	0	0		0
23. Fidelity	0	2		2
24. Surety	0	0		0
26. Burglary and theft	30,549	15,198	14,018	31,729
27. Boiler and machinery	3,432	4,257	1,274	6,415
28. Credit	0	0		0
29. International	0	0		0
30. Warranty	0	0		0
31. Reinsurance - nonproportional assumed property	137,246	914	2,353	135,807
32. Reinsurance - nonproportional assumed liability	199,346	2,520	2,743	199,123
33. Reinsurance - nonproportional assumed financial lines	0	0		0
34. Aggregate write-ins for other lines of business	0	1	0	1
35. TOTALS	18,626,697	8,470,123	8,657,980	18,438,840
DETAILS OF WRITE-INS				
3401. Miscellaneous		1		1
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	1	0	1

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	25,674				25,674
2. Allied lines	29,328				29,328
3. Farmowners multiple peril	27,560				27,560
4. Homeowners multiple peril	662,979				662,979
5. Commercial multiple peril	1,434,676				1,434,676
6. Mortgage guaranty					0
8. Ocean marine	1,398				1,398
9. Inland marine	161,671				161,671
10. Financial guaranty					0
11.1 Medical professional liability - occurrence					0
11.2 Medical professional liability - claims-made					0
12. Earthquake	8,999				8,999
13. Group accident and health					0
14. Credit accident and health (group and individual)					0
15. Other accident and health					0
16. Workers' compensation	3,933,670				3,933,670
17.1 Other liability - occurrence	394,505				394,505
17.2 Other liability - claims-made	39,367				39,367
17.3 Excess workers' compensation					0
18.1 Products liability - occurrence	4,265				4,265
18.2 Products liability - claims-made					0
19.1, 19.2 Private passenger auto liability	304,533				304,533
19.3, 19.4 Commercial auto liability	999,738				999,738
21. Auto physical damage	609,228				609,228
22. Aircraft (all perils)					0
23. Fidelity					0
24. Surety					0
26. Burglary and theft	14,018				14,018
27. Boiler and machinery	1,274				1,274
28. Credit					0
29. International					0
30. Warranty					0
31. Reinsurance - nonproportional assumed property	2,353				2,353
32. Reinsurance - nonproportional assumed liability	2,743				2,743
33. Reinsurance - nonproportional assumed financial lines					0
34. Aggregate write-ins for other lines of business	1	0	0	0	1
35. TOTALS	8,657,981	0	0	0	8,657,981
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Line 35 through 37)					8,657,981
DETAILS OF WRITE-INS					
3401. Aggregate - Other	1				1
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	1	0	0	0	1

(a) State here basis of computation used in each case

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	133,100	53,812	0	130,725	2,375	53,812
2. Allied lines	289,954	55,578	0	286,547	3,408	55,577
3. Farmowners multiple peril	0	60,661	0	0	0	60,661
4. Homeowners multiple peril	6,395,337	1,217,092	0	6,277,885	117,453	1,217,091
5. Commercial multiple peril	0	3,020,149	0	0	0	3,020,149
6. Mortgage guaranty	0	0	0	0	0	0
8. Ocean marine	0	2,684	0	0	0	2,684
9. Inland marine	137,434	324,529	0	135,694	1,740	324,529
10. Financial guaranty	0	0	0	0	0	0
11.1 Medical professional liability - occurrence		0	0	0	0	0
11.2 Medical professional liability - claims-made		0	0	0	0	0
12. Earthquake	14,023	15,806	0	13,823	200	15,806
13. Group accident and health	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0
15. Other accident and health	0	0	0	0	0	0
16. Workers' compensation	0	8,251,542	2,924	1,893	1,031	8,251,542
17.1 Other liability - occurrence	196,644	814,256	0	188,159	8,485	814,256
17.2 Other liability - claims-made	0	30,927	0	0	0	30,927
17.3 Excess workers' compensation	0	0	0	0	0	0
18.1 Products liability - occurrence	(85)	4,976	0	(84)	(1)	4,976
18.2 Products liability - claims-made		0	0	0	0	0
19.1, 19.2 Private passenger auto liability	3,339,037	811,714	0	3,339,037	0	811,714
19.3, 19.4 Commercial auto liability	0	2,145,195	67,324	67,324	0	2,145,195
21. Auto physical damage	4,082,632	1,447,205	1,489	4,063,059	21,062	1,447,205
22. Aircraft (all perils)	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0
26. Burglary and theft	0	30,549	0	0	0	30,549
27. Boiler and machinery	0	3,432	0	0	0	3,432
28. Credit	0	0	0	0	0	0
29. International	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0
31. Reinsurance - nonproportional assumed property	XXX	137,246	0	0	0	137,246
32. Reinsurance - nonproportional assumed liability	XXX	199,346	0	0	0	199,346
33. Reinsurance - nonproportional assumed financial lines	XXX	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0
35. TOTALS	14,588,076	18,626,699	71,737	14,504,062	155,753	18,626,697
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No []

If yes: 1. The amount of such installment premiums \$

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	40,628	44,516	40,628	44,516	19,852	22,389	41,979	73.6
2. Allied lines	145,891	30,843	145,891	30,843	6,624	4,884	32,583	57.2
3. Farmowners multiple peril	0	17,725	0	17,725	8,265	5,131	20,859	29.6
4. Homeowners multiple peril	4,278,968	627,384	4,278,968	627,384	238,942	235,273	631,053	50.7
5. Commercial multiple peril	220,250	929,465	220,250	929,465	1,689,793	1,060,698	1,558,560	53.4
6. Mortgage guaranty	0	0	0	0	0	0	0	0.0
8. Ocean marine	0	971	0	971	79	209	841	28.7
9. Inland marine	142,588	121,658	142,588	121,658	38,811	21,213	139,256	42.6
10. Financial guaranty	0	0	0	0	0	0	0	0.0
11.1 Medical professional liability - occurrence	0	0	0	0	0	0	0	0.0
11.2 Medical professional liability - claims-made	0	0	0	0	0	0	0	0.0
12. Earthquake	0	0	0	0	0	0	0	0.0
13. Group accident and health	0	0	0	0	0	0	0	0.0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0.0
15. Other accident and health	0	0	0	0	0	0	0	0.0
16. Workers' compensation	3,725,471	3,829,698	3,839,915	3,715,255	20,223,135	20,053,144	3,885,246	48.0
17.1 Other liability - occurrence	1,451,820	465,455	1,451,820	465,455	1,944,450	1,978,507	431,398	55.3
17.2 Other liability - claims-made	0	7,185	0	7,185	66,873	40,791	33,267	106.6
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0.0
18.1 Products liability - occurrence	20,000	(26,294)	20,000	(26,294)	177,071	180,851	(30,074)	(415.5)
18.2 Products liability - claims-made	0	0	0	0	0	0	0	0.0
19.1, 19.2 Private passenger auto liability	1,716,924	469,530	1,716,924	469,530	671,254	678,779	462,005	55.2
19.3, 19.4 Commercial auto liability	1,531,352	1,143,051	1,599,562	1,074,841	2,738,660	2,843,351	970,150	45.1
21. Auto physical damage	2,059,012	851,670	2,059,585	851,097	79,865	81,574	849,388	57.8
22. Aircraft (all perils)	0	0	0	0	0	0	0	0.0
23. Fidelity	0	(166)	0	(166)	0	0	(166)	(8,283.0)
24. Surety	0	0	0	0	850	850	0	0.0
26. Burglary and theft	0	1,682	0	1,682	1,907	1,306	2,283	7.2
27. Boiler and machinery	0	654	0	654	4,475	850	4,279	66.7
28. Credit	0	0	0	0	0	0	0	0.0
29. International	0	0	0	0	0	0	0	0.0
30. Warranty	0	0	0	0	0	0	0	0.0
31. Reinsurance - nonproportional assumed property	XXX	95,071	0	95,071	118,136	123,833	89,374	65.8
32. Reinsurance - nonproportional assumed liability	XXX	56,492	0	56,492	524,040	430,863	149,669	75.2
33. Reinsurance - nonproportional assumed financial lines	XXX	0	0	0	0	0	0	0.0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35. TOTALS	15,332,904	8,666,593	15,516,131	8,483,366	28,553,082	27,764,496	9,271,952	50.3
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	4,088	18,431	4,088	18,431	13,800	1,421	13,800	19,852	3,142
2. Allied lines	162,501	5,425	162,501	5,425	0	1,199	0	6,624	1,247
3. Farmowners multiple peril	0	6,024	0	6,024	0	2,241	0	8,265	1,452
4. Homeowners multiple peril	992,076	194,331	992,076	194,331	203,300	44,611	203,300	238,942	40,522
5. Commercial multiple peril	30,000	840,359	30,000	840,359	800	849,434	800	1,689,793	356,704
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	9	0	9	0	0	70	79	.46
9. Inland marine	500	30,306	500	30,306	0	8,505	0	38,811	.7,390
10. Financial guaranty	0	0	0	0	0	0	0	0	0
11.1 Medical professional liability - occurrence	0	0	0	0	0	0	0	0	0
11.2 Medical professional liability - claims-made	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0
13. Group accident and health	0	0	0	0	0	0	0	(a) 0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0
15. Other accident and health	0	0	0	0	0	0	0	(a) 0	0
16. Workers' compensation	15,306,824	11,548,317	15,837,944	11,017,197	1,498,100	9,526,355	1,818,517	20,223,135	2,748,777
17.1 Other liability - occurrence	4,018,794	975,602	4,018,794	.975,602	4,221,500	968,848	4,221,500	1,944,450	731,222
17.2 Other liability - claims-made	0	12,940	0	12,940	0	.53,933	0	66,873	26,471
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0
18.1 Products liability - occurrence	0	118,540	0	118,540	0	.58,531	0	177,071	47,326
18.2 Products liability - claims-made	0	0	0	0	0	0	0	0	0
19.1, 19.2 Private passenger auto liability	1,582,936	.556,878	1,582,936	.556,878	.419,300	114,376	.419,300	671,254	.142,758
19.3, 19.4 Commercial auto liability	287,750	1,625,738	463,505	1,449,983	300,300	1,331,361	342,984	2,738,660	723,700
21. Auto physical damage	79,450	73,946	79,434	73,962	16,100	.5,927	.16,124	.79,865	.15,025
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0
24. Surety	0	.850	0	.850	0	0	0	.850	0
26. Burglary and theft	0	1,150	0	1,150	0	0	.757	1,907	.330
27. Boiler and machinery	0	4,475	0	4,475	0	0	0	4,475	0
28. Credit	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0
31. Reinsurance - nonproportional assumed property	XXX	98,132		98,132	XXX		20,004		118,136
32. Reinsurance - nonproportional assumed liability	XXX	200,865		.200,865	XXX		323,175		.524,040
33. Reinsurance - nonproportional assumed financial lines	XXX			.0	XXX				0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0
35. TOTALS	22,464,919	16,312,318	23,171,778	15,605,459	6,673,200	13,310,748	7,036,325	28,553,082	4,863,949
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0

(a) Including \$ for present value of life indemnity claims.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct	(1,330,658)	0	0	(1,330,658)
1.2 Reinsurance assumed	883,291	0	0	883,291
1.3 Reinsurance ceded	(1,327,370)	0	0	(1,327,370)
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	880,003	0	0	880,003
2. Commission and brokerage:				
2.1 Direct excluding contingent	0	2,166,092	0	2,166,092
2.2 Reinsurance assumed, excluding contingent	0	2,406,106	0	2,406,106
2.3 Reinsurance ceded, excluding contingent	0	2,176,430	0	2,176,430
2.4 Contingent - direct	0	57,326	0	57,326
2.5 Contingent - reinsurance assumed	0	242,285	0	242,285
2.6 Contingent - reinsurance ceded	0	57,326	0	57,326
2.7 Policy and membership fees	0	0	0	0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0	2,638,054	0	2,638,054
3. Allowances to managers and agents	0	1	0	1
4. Advertising	0	51,708	0	51,708
5. Boards, bureaus and associations	94,555	79,097	0	173,652
6. Surveys and underwriting reports	12,211	75,458	0	87,669
7. Audit of assureds' records	774	19,072	0	19,847
8. Salary and related items:				
8.1 Salaries	960,704	1,263,166	20,779	2,244,649
8.2 Payroll taxes	64,410	78,940	868	144,218
9. Employee relations and welfare	116,007	95,869	3,974	215,850
10. Insurance	13,986	13,940	0	27,926
11. Directors' fees	14,972	34,027	3,081	52,080
12. Travel and travel items	29,909	194,079	2,659	226,647
13. Rent and rent items	50,107	36,125	31,657	117,889
14. Equipment	15,758	14,574	4,086	34,418
15. Cost or depreciation of EDP equipment and software	349,898	460,287	3,087	813,272
16. Printing and stationery	4,592	6,133	135	10,860
17. Postage, telephone and telegraph, exchange and express	31,377	33,784	13,331	78,491
18. Legal and auditing	17,347	16,481	931	34,759
19. Totals (Lines 3 to 18)	1,776,607	2,472,742	84,587	4,333,936
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$	0	362,274	0	362,274
20.2 Insurance department licenses and fees	0	102,229	0	102,229
20.3 Gross guaranty association assessments	0	19,860	0	19,860
20.4 All other (excluding federal and foreign income and real estate)	0	112	54,645	54,757
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	484,475	54,645	539,120
21. Real estate expenses	0	0	(2,487)	(2,487)
22. Real estate taxes	0	0	(64,982)	(64,982)
23. Reimbursements by uninsured plans	0	0	0	0
24. Aggregate write-ins for miscellaneous expenses	124,851	191,525	6,581	322,957
25. Total expenses incurred	2,781,461	5,786,796	78,345	8,646,601
26. Less unpaid expenses - current year	4,863,949	2,665,897	55,374	7,585,221
27. Add unpaid expenses - prior year	4,761,346	2,611,538	111,523	7,484,407
28. Amounts receivable relating to uninsured plans, prior year	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year	0	0	0	0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	2,678,858	5,732,437	134,493	8,545,787
DETAILS OF WRITE-INS				
2401. Consulting Fees	76,893	110,494	787	188,174
2402. Donations and Contributions	23,940	54,192	4,873	83,005
2403. Temporary Staff	4,728	9,905	344	14,977
2498. Summary of remaining write-ins for Line 24 from overflow page	19,290	16,934	577	36,801
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	124,851	191,525	6,581	322,957

(a) Includes management fees of \$ to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 18,454	18,191
1.1 Bonds exempt from U.S. tax	(a) 239,868	234,156
1.2 Other bonds (unaffiliated)	(a) 680,473	720,445
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)	608,176	603,513
2.21 Common stocks of affiliates	(c)	
3. Mortgage loans	(d)	
4. Real estate	(e) 915	948
5. Contract loans	(f)	
6. Cash, cash equivalents and short-term investments	86,138	86,138
7. Derivative instruments	1,888	1,888
8. Other invested assets	1,888	1,888
9. Aggregate write-ins for investment income	1,635,912	1,665,279
10. Total gross investment income		
11. Investment expenses	(g) 23,700	
12. Investment taxes, licenses and fees, excluding federal income taxes	(g) 54,645	
13. Interest expense	(h)	
14. Depreciation on real estate and other invested assets	(i) 38,015	
15. Aggregate write-ins for deductions from investment income	0	
16. Total deductions (Lines 11 through 15)	116,359	
17. Net investment income (Line 10 minus Line 16)	1,548,919	
DETAILS OF WRITE-INS		
0901. Miscellaneous income	1,377	1,377
0902. Prior year income	511	511
0903.	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	1,888	1,888
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page	0	0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)	0	0

(a) Includes \$ 20,189 accrual of discount less \$ 222,053 amortization of premium and less \$ 24,852 paid for accrued interest on purchases.

(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.

(c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.

(e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.

(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes \$ interest on surplus notes and \$ interest on capital notes.

(i) Includes \$ 38,015 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	0	0	0	0	0
1.1 Bonds exempt from U.S. tax			0		
1.2 Other bonds (unaffiliated)	41,093	0	41,093	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	3,987,721	(1,279)	3,986,442	(2,595,381)	0
2.21 Common stocks of affiliates	0	0	0	442,977	0
3. Mortgage loans			0	0	0
4. Real estate	(947,382)	0	(947,382)		0
5. Contract loans			0		
6. Cash, cash equivalents and short-term investments			0		
7. Derivative instruments			0		
8. Other invested assets	692,190	0	692,190	(666,220)	0
9. Aggregate write-ins for capital gains (losses)	303	0	303	0	0
10. Total capital gains (losses)	3,773,926	(1,279)	3,772,647	(2,818,624)	0
DETAILS OF WRITE-INS					
0901. Prior year	303		303		
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	303	0	303	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
EXHIBIT OF NON-ADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)		0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks		0	0
2.2 Common stocks		0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens		0	0
3.2 Other than first liens		0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company		0	0
4.2 Properties held for the production of income		0	0
4.3 Properties held for sale		812,185	812,185
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)		0	0
6. Contract loans		0	0
7. Derivatives (Schedule DB)		0	0
8. Other invested assets (Schedule BA)	4,500	24,031	19,531
9. Receivables for securities		0	0
10. Securities lending reinvested collateral assets (Schedule DL)		0	0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	4,500	836,216	831,716
13. Title plants (for Title insurers only)		0	0
14. Investment income due and accrued		0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	1,612	984,140	982,528
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due		0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination		0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers		0	0
16.2 Funds held by or deposited with reinsured companies		0	0
16.3 Other amounts receivable under reinsurance contracts		0	0
17. Amounts receivable relating to uninsured plans		0	0
18.1 Current federal and foreign income tax recoverable and interest thereon		0	0
18.2 Net deferred tax asset		0	0
19. Guaranty funds receivable or on deposit		0	0
20. Electronic data processing equipment and software		0	0
21. Furniture and equipment, including health care delivery assets		104,362	104,362
22. Net adjustment in assets and liabilities due to foreign exchange rates		0	0
23. Receivables from parent, subsidiaries and affiliates		0	0
24. Health care and other amounts receivable		0	0
25. Aggregate write-ins for other than invested assets	0	176,955	176,955
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	6,112	2,101,673	2,095,561
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
28. Total (Lines 26 and 27)	6,112	2,101,673	2,095,561
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501. Automobiles		71,859	71,859
2502. Prepaid expenses		105,096	105,096
2503. Miscellaneous receivables		0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	176,955	176,955

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 State of Ohio is shown below.

	F/S SSAP #	F/S Page	F/S Line #	2021	2020
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 4,656,683	\$ 238,763
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 4,656,683	\$ 238,763
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 38,311,245	\$ 32,874,838
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 38,311,245	\$ 32,874,838

B. Use of Estimates in the Preparation of the Financial Statements

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

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by daily and pro rata methods for direct business and are based on reports received from ceding companies and/or pools for assumed business.

(1) Basis for Short-Term Investments
Short-term investments consist of class 1 money market mutual funds, agencies, and treasury bonds. Short term investments are stated at amortized cost.

(2) Basis for Bonds and Amortization Schedule
Bonds not back by other loans are stated at amortized cost using the scientific amortization method.

(3) Basis for Common Stocks
Common Stocks are valued at market. However, investments in stocks of uncombined subsidiaries and affiliates in which the company has an interest of 20% or more are valued using the equity basis.

(4) Basis for Preferred Stocks
Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32: Investments in Preferred Stock.

(5) Basis for Mortgage Loans
The Company did not have any mortgage loans.

(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 retrospective adjustment method is used to value these securities

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities
The Company owns 100% of the common stock of Iowa American Insurance Company, a property/casualty insurer. Iowa American Insurance Company is valued on an equity basis as described in Part 5, Section 2cB1 of the Securities Valuation Handbook. The Company also owns a 90% membership in IMARC, LLC, a limited liability company valued on a U.S. GAAP equity basis. The value of the investment is nonadmitted on a statutory basis due to the fact that the limited liability company's financial statements are unaudited.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities
The Company has investments in limited partnerships and limited liability companies. In accordance with SSAP No. 48: Joint Ventures, Partnerships and Limited Liability Companies, the investments are recorded using the equity method of accounting based on the underlying audited U.S. GAAP equity values of the holdings. The company also has partnership investments in low income housing tax credit properties. In accordance with SSAP No. 93: Accounting for Low Income Housing Tax Credit Property Investments, the investments are reported at amortized cost.

(9) Accounting Policies for Derivatives
The Company does not hold any derivative instruments.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation
The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53: Property/Casualty Contracts -Premiums

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses
Unpaid loss and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based upon past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates. While management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments reflected in the period determined.

NOTES TO FINANCIAL STATEMENTS

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

The Motorists Insurance Group standardized its thresholds for capitalization across all member companies. The Group also implemented updates for software licenses and maintenance agreements that allow amortization over service periods for material transactions.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Company has no pharmaceutical rebate receivables to report.

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

Not Applicable

NOTE 3 Business Combinations and Goodwill

Not Applicable

NOTE 4 Discontinued Operations

A. Discontinued Operation Disposed of or Classified as Held for Sale

Not Applicable

B. Change in Plan of Sale of Discontinued Operation

Not Applicable

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal

Not Applicable

D. Equity Interest Retained in the Discontinued Operation After Disposal

Not Applicable

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not Applicable

B. Debt Restructuring

Not Applicable

C. Reverse Mortgages

Not Applicable

D. Loan-Backed Securities

(1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from Broker dealer survey values and internal estimates.

(2)-(3) Not Applicable

(4) At December 31, 2021, the estimated fair value and gross unrealized losses for loan-backed securities, aggregated 'by length of time the securities have been in a continuous loss position were as follows:

a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 124,851
2. 12 Months or Longer	\$ -

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

1. Less than 12 Months	\$ 8,873,300
2. 12 Months or Longer	\$ -

(5) 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

Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable

H. Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable

J. Real Estate

(1) The Company did not recognize any impairment losses for investments in real estate during the periods reported.

(2) The Company sold an office building that was no longer occupied by the company for \$696,788, and recognized a loss of \$947,382 during the periods reported.

(3) There were no properties held for sale as of December 31, 2021.

(4) The Company did not engage in retail land sales operations during the periods reported.

(5) The Company did not hold any real estate investments with participating mortgage loan features during the periods reported.

NOTES TO FINANCIAL STATEMENTS

K. Low Income Housing tax Credits (LIHTC)
Not Applicable

L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted					6	7		
	Current Year								
	1	2	3	4	5				
Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)			
a. Subject to contractual obligation for which liability is not shown				\$ -	\$ -	\$ -			
b. Collateral held under security lending agreements				\$ -	\$ -	\$ -			
c. Subject to repurchase agreements				\$ -	\$ -	\$ -			
d. Subject to reverse repurchase agreements				\$ -	\$ -	\$ -			
e. Subject to dollar repurchase agreements				\$ -	\$ -	\$ -			
f. Subject to dollar reverse repurchase agreements				\$ -	\$ -	\$ -			
g. Placed under option contracts				\$ -	\$ -	\$ -			
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock				\$ -	\$ -	\$ -			
i. FHLB capital stock				\$ -	\$ -	\$ -			
j. On deposit with states				\$ 4,808,957	\$ 4,808,957	\$ 4,847,603	\$ (38,646)		
k. On deposit with other regulatory bodies									
l. Pledged collateral to FHLB (including assets backing funding agreements)									
m. Pledged as collateral not captured in other categories									
n. Other restricted assets									
o. Total Restricted Assets	\$ 4,808,957	\$ -	\$ -	\$ -	\$ 4,808,957	\$ 4,847,603	\$ (38,646)		

(a) Subset of Column 1

(b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%
c. Subject to repurchase agreements		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%
g. Placed under option contracts		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%
i. FHLB capital stock		\$ -	0.000%	0.000%
j. On deposit with states		\$ 4,808,957	5.232%	5.233%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%
n. Other restricted assets		\$ -	0.000%	0.000%
o. Total Restricted Assets	\$ -	\$ 4,808,957	5.232%	5.233%

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

- Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
Not Applicable
- Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
Not Applicable
- Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements
Not Applicable

M. Working Capital Finance Investments
Not Applicable

N. Offsetting and Netting of Assets and Liabilities
Not Applicable

NOTES TO FINANCIAL STATEMENTS

O. 5GI Securities
Not Applicable

P. Short Sales
Not Applicable

Q. Prepayment Penalty and Acceleration Fees

	<u>General Account</u>	<u>Protected Cell</u>
1. Number of CUSIPs	1	
2. Aggregate Amount of Investment Income	\$ 14,227	

R. Reporting Entity's Share of Cash Pool by Asset Type
Not Applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable

NOTE 7 Investment Income

Not Applicable

NOTE 8 Derivative Instruments

Not Applicable

NOTE 9 Income Taxes

A. Deferred Tax Assets/(Liabilities)

1. The components of the net deferred tax assets/(liabilities)

	2021			2020			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$ 1,291,252	\$ 5,456	\$ 1,296,708	\$ 1,805,773	\$ 18,706	\$ 1,824,479	\$ (514,521)	\$ (13,250)	\$ (527,771)
(b) Statutory Valuation Allowance Adjustment									
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 1,291,252	\$ 5,456	\$ 1,296,708	\$ 1,805,773	\$ 18,706	\$ 1,824,479	\$ (514,521)	\$ (13,250)	\$ (527,771)
(d) Deferred Tax Assets Nonadmitted									
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 1,291,252	\$ 5,456	\$ 1,296,708	\$ 1,805,773	\$ 18,706	\$ 1,824,479	\$ (514,521)	\$ (13,250)	\$ (527,771)
(f) Deferred Tax Liabilities	\$ 63,164	\$ 497,338	\$ 560,502	\$ 73,534	\$ 1,178,423	\$ 1,251,957	\$ (10,370)	\$ (681,085)	\$ (691,455)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 1,228,088	\$ (491,882)	\$ 736,206	\$ 1,732,239	\$ (1,159,717)	\$ 572,522	\$ (504,151)	\$ 667,835	\$ 163,684

2. Admission Calculation Components SSAP No. 101

	2021			2020			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ 854,473	\$ -	\$ 854,473	\$ 296,216	\$ -	\$ 296,216	\$ 558,257	\$ -	\$ 558,257
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)									
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.				\$ 925,759	\$ -	\$ 925,759	\$ (925,759)	\$ -	\$ (925,759)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$ 5,531,660	XXX	XXX	\$ 4,854,254	XXX	XXX	\$ 677,406
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 436,779	\$ 5,456	\$ 442,235	\$ 583,798	\$ 18,706	\$ 602,504	\$ (147,019)	\$ (13,250)	\$ (160,269)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 1,291,252	\$ 5,456	\$ 1,296,708	\$ 1,805,773	\$ 18,706	\$ 1,824,479	\$ (514,521)	\$ (13,250)	\$ (527,771)

NOTES TO FINANCIAL STATEMENTS

3. Other Admissibility Criteria

	2021	2020
a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	932.000%	696.000%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 36,877,735	\$ 32,361,692

4. Impact of Tax Planning Strategies

	2021		2020		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 1,291,252	\$ 5,456	\$ 1,805,773	\$ 18,706	\$ (514,521)	\$ (13,250)
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies						
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 1,291,252	\$ 5,456	\$ 1,805,773	\$ 18,706	\$ (514,521)	\$ (13,250)
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies						

b. Do the Company's tax-planning strategies include the use of reinsurance? Yes [] No [X]

B. Deferred Tax Liabilities that are not recognized

Not Applicable

C. Current income taxes incurred consist of the following major components:

1. Current Income Tax
 - (a) Federal
 - (b) Foreign
 - (c) Subtotal
- (d) Federal income tax on net capital gains
- (e) Utilization of capital loss carry-forwards
- (f) Other
- (g) Federal and foreign income taxes incurred

(1) 2021	(2) 2020	(3) (Col. 1 - 2) Change
\$ 14,024	\$ 202,621	\$ (188,597)
\$ 14,024	\$ 202,621	\$ (188,597)
\$ 991,206	\$ (173,513)	\$ 1,164,719
\$ 47,722	\$ (145,796)	\$ 193,518
\$ 1,052,952	\$ (116,688)	\$ 1,169,640

2. Deferred Tax Assets:
 - (a) Ordinary:
 - (1) Discounting of unpaid losses
 - (2) Unearned premium reserve
 - (3) Policyholder reserves
 - (4) Investments
 - (5) Deferred acquisition costs
 - (6) Policyholder dividends accrual
 - (7) Fixed Assets
 - (8) Compensation and benefits accrual
 - (9) Pension accrual
 - (10) Receivables - nonadmitted
 - (11) Net operating loss carry-forward
 - (12) Tax credit carry-forward
 - (13) Other (including items <5% of total ordinary tax assets)
 - (99) Subtotal
 - (b) Statutory valuation allowance adjustment
 - (c) Nonadmitted
 - (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)
 - (e) Capital:
 - (1) Investments
 - (2) Net capital loss carry-forward
 - (3) Real estate
 - (4) Other (including items <5% of total ordinary tax assets)
 - (99) Subtotal
 - (f) Statutory valuation allowance adjustment
 - (g) Nonadmitted
 - (h) Admitted capital deferred tax assets (2e99 - 2f - 2g)
 - (i) Admitted deferred tax assets (2d + 2h)

(1) 2021	(2) 2020	(3) (Col. 1 - 2) Change
\$ 891,485	\$ 882,915	\$ 8,570
\$ 368,275	\$ 360,715	\$ 7,560
\$ 6,469	\$ 66,467	\$ (59,998)
\$ 720	\$ 28,858	\$ (28,138)
\$ 23,019	\$ 25,467	\$ (2,448)
\$ 1,284	\$ 441,351	\$ (440,067)
\$ 1,291,252	\$ 1,805,773	\$ (514,521)
\$ 5,456	\$ 18,706	\$ (13,250)
\$ 5,456	\$ 18,706	\$ (13,250)
\$ 5,456	\$ 18,706	\$ (13,250)
\$ 1,296,708	\$ 1,824,479	\$ (527,771)

NOTES TO FINANCIAL STATEMENTS

3. Deferred Tax Liabilities:

(a) Ordinary:

- (1) Investments
- (2) Fixed Assets
- (3) Deferred and uncollected premium
- (4) Policyholder reserves
- (5) Other (including items <5% of total ordinary tax liabilities)
- (99) Subtotal

(b) Capital:

- (1) Investments
- (2) Real estate
- (3) Other (including items <5% of total capital tax liabilities)
- (99) Subtotal

(c) Deferred tax liabilities (3a99 + 3b99)

4. Net deferred tax assets/liabilities (2i - 3c)

(1) 2021	(2) 2020	(3) (Col. 1 - 2) Change
\$ 21,900	\$ 21,901	\$ (1)
\$ 41,264	\$ 51,633	\$ (10,369)
\$ 63,164	\$ 73,534	\$ (10,370)
\$ 497,338	\$ 1,042,429	\$ (545,091)
	\$ 135,994	\$ (135,994)
\$ 497,338	\$ 1,178,423	\$ (681,085)
\$ 560,502	\$ 1,251,957	\$ (691,455)
\$ 736,206	\$ 572,522	\$ 163,684

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

Among the more significant book to tax adjustments were the following:

2021	
Amount	Effective Tax Rate (%)
\$ 1,194,843	21.0%
\$ 440,068	7.7%
\$ (36,738)	-0.7%
\$ (4,737)	0.0%
\$ (23,084)	-0.4%
\$ 1,570,352	27.6%
\$ 1,052,952	18.5%
\$ -	%
\$ 517,400	9.1%
\$ 1,570,352	27.6%

E. Operating Loss and Tax Carry Forwards and Protective Tax Deposits

(1) At December 31, 2021, the Company did not have any operating loss or tax credit carry forwards.

(2) The following is income tax expense for current and preceding years that is available for recoupment in the event of future net losses:

Year Generated	Ordinary	Capital
2021	\$ 169,935	\$ 835,295
2020	\$ 140,105	\$ -
Totals	\$ 310,040	\$ 835,295

(3) The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated Federal Income Tax Return

(1) The Company's Federal income tax return is consolidated with the following entities:

AlleghenyPoint Insurance Company
 BrickStreet Mutual Insurance Company
 Consumers Insurance USA, Inc.
 Encova Insurance Agency, Inc
 Encova Service Corporation
 Iowa American Insurance Company
 MCM Insurance Agency Inc of MA
 MICO Insurance Company
 Motorists Commercial Mutual Insurance Company
 Motorists Mutual Insurance Company
 NorthStone Insurance Company
 Phenix Mutual Fire Insurance Company
 PinnaclePoint Insurance Company
 SummitPoint Insurance Company
 Wilson Mutual Insurance Company

(2) The method of allocation between the companies is subject to written agreement, approved by the Board of Directors. Allocation is based upon separate return calculations with current credit for net losses. Intercompany tax balances are settled annually when the federal income tax return is filed.

G. Federal or Foreign Federal Income Tax Loss Contingencies

As of December 31, 2021, the Company had no unrecognized tax benefits.

H. Repatriation Transition Tax (RTT)

The Company is not subject to the Repatriation Transition Tax.

I. Alternative Minimum Tax (AMT) Credit

Not Applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship Involved

Effective January 1, 2021, a mutual holding company structure went into effect. Through this conversion, the Company and its mutual affiliates became stock companies under Encova Holdings, Inc., which is 100% owned by Encova Mutual Insurance Group, Inc.

The Company is a member of an affiliated group of companies and is party to various transactions and agreements with other members of the group. Primarily those transactions are composed of:

- IT and Payroll processing services are provided by a non-insurance member of the group.
- The P&C Companies within the group participate in a pooling arrangement.
- The lead company to the pool provides management services to the other members of the Group. All Companies in the Group are parties to a cost sharing.
- The Various companies have entered into a tax sharing agreement with each company that qualifies to be included in a consolidated return.
- Selected members of the group participated in intercompany loan agreements.

B. Transactions

Effective January 1, 2021, \$5,000,000 was reclassified out of unassigned surplus into common stock with the issuance of 1,000 shares to Encova Holdings, Inc. at a par value of \$5,000.

Effective June 30, 2021, the Company's surplus note with Motorists Mutual Insurance Company was forgiven and terminated without repayment required. \$3,000,000 was reclassified out of Surplus Notes to Contributed Surplus

C. Transactions with related party who are not reported on Schedule Y

Not Applicable

D. Amounts Due From or To Related Parties

As of December 31, 2021 and 2020, the Company reported net amounts due from/(due to) affiliates of \$(14,019) and \$(2,338,564) respectively. All amounts were settled within 60 days.

E. Material Management or Service Contracts and Cost-Sharing Arrangements

See Note A

F. Guarantees or Undertakings

The Company had no guarantees or undertakings for the benefit of an affiliate or related party that resulted in a material contingency exposure to the Company or any related parties during the periods reported.

G. Nature of the Control Relationship

The Company is a mutual property/casualty insurer that controls its operations. As the lead Company of The Encova Insurance Group, Motorists Mutual Insurance Company also controls its affiliated companies' operations through interlocking boards of directors.

H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned

The Company did not own any shares, directly or indirectly, of an upstream intermediate entity or ultimate parent during the periods reported.

I. Investments in SCA that Exceed 10% of Admitted Assets

The Company had one affiliated investment in Iowa American Insurance Company (IAIC) that exceeded 10% of the Company's admitted assets during the period reported. IAIC's affiliate value of \$9,257,712 was 10.1% of the Company's admitted assets of \$91,897,417. IAIC is valued on an equity basis as described in Part 5, Section 2ciB1 of the Securities Valuation Handbook.

IAIC's assets and liabilities as of 12/31/2021 were \$26,324,224. The net income was \$9,257,712.

J. Investments in Impaired SCAs

The Company did not recognize any impairment write-downs for investments in subsidiary, controlled, or affiliated entities during the periods reported.

K. Investment in Foreign Insurance Subsidiary

The Company did not have any investments in foreign insurance subsidiaries during the periods reported.

L. Investment in Downstream Noninsurance Holding Company

The Company did not have any investments in downstream non-insurance holding companies.

M. All SCA Investments

Not Applicable

N. Investment in Insurance SCAs

The Company did not hold any insurance SCA investments that departed from the NAIC statutory accounting practices and procedures.

O. SCA or SSAP 48 Entity Loss Tracking

Not Applicable

NOTE 11 Debt

A. Debt, Including Capital Notes

Not Applicable

B. FHLB (Federal Home Loan Bank) Agreements

Not Applicable

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

A. Defined Benefit Plan

Not Applicable

B. Investment Policies and Strategies

Not Applicable

C. The fair value of each class of plan assets

Not Applicable

D. Basis Used to Determine Expected Long-Term Rate-of-Return on Assets Assumption

Not Applicable

NOTES TO FINANCIAL STATEMENTS

E. Defined Contribution Plan

The Company participates in an Incentive Savings Plan under Section 401(k) of the Internal Revenue Code sponsored by Motorists Mutual Insurance Company covering substantially all of its employees. The Plan matches employee contributions of 5% and 7% of total eligible compensation for 2021 and 2020, respectively. Employer contributions are immediately vested. The Company's share of the contribution to the plan was \$194 and \$1,377, respectively. The Company participates in two Non-qualified supplemental retirement plans for selected employees. One plan provides for contributions at the Company's discretion on a yearly basis. The other is composed of a single contribution for selected employees. Employees vest at age 60 or when certain vesting events occur. The Company's share of the expenses is allocated through the cost allocation model.

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

The Company participated in a non-contributory defined pension plan sponsored by Motorists, until Motorists elected to freeze its benefit plans effective December 31, 2017. In addition, the Company shares in certain other post-retirement benefits provided through a plan sponsored by Motorists Mutual. The Company has no legal obligation for benefits under these plans. Motorists Mutual allocates amounts to the Company based on a cost sharing agreement. In 2021 and 2020, the Company was allocated (\$8) and \$0, respectively, as a portion of the periodic pension costs and post-retirement benefits.

H. Postemployment Benefits and Compensated Absences

The Company generally has no obligations to current or former employees for benefits after their employment but before their retirement other than for compensation related to earned paid time off. The liability for earned but unused paid time off has been accrued.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. Number of Share and Par or State Value of Each Class

As of December 31, 2021, the Company had 1,000 capital stock shares authorized, issued, and outstanding, with a par value of \$5,000.

B. Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues

Not Applicable

C. Dividend Restrictions

Not Applicable

D. Dates and Amounts of Dividends Paid

Not Applicable

E. Profits that may be Paid as Ordinary Dividends to Stockholders

Not Applicable

F. Restrictions Places on Unassigned Funds (Surplus)

Not Applicable

G. Amount of Advances to Surplus not Repaid

Not Applicable

H. Amount of Stock Held for Special Purposes

Not Applicable

I. Reasons for Changes in Balance of Special Surplus Funds from Prior Period

Not Applicable

J. The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is \$3,627,015.

K. The Company Issued the Following Surplus Debentures or Similar Obligations

Effective 6/30/21, the Company's surplus note with Motorists Mutual Insurance Company was forgiven and terminated without repayment required. The effect of the forgiveness was a reclassification of Surplus Notes to Contributed Surplus in accordance with SSAP No. 72.

L. The Impact of Any Restatement Due to Prior Quasi-Reorganizations is as Follows

Not Applicable

M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization

Not Applicable

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not Applicable

B. Assessments

(1) Nature of Any Assets That Could Have a Material Financial Effect

The Company is subject to guaranty fund and other assessments by the states in which it conducts business. Guaranty fund assessments are accrued upon notification of the insolvency. Other assessments are recognized 1) when assessed by a state, 2) when premiums are written for premium-based assessments, or 3) when losses are incurred for loss based assessments. Incurred assessments are subject to the intercompany pooling arrangement described in Note 26. The company's net paid guaranty fund assessments totaled \$7,750.91 and \$3,193.70 for the years ended December 31, 2021 and 2020, respectively. The company's net accrued liabilities for guaranty funds were \$16,861.42 and \$15,748.34 as of December 31, 2021 and 2020, respectively. Per the accounting practices and procedures prescribed by the company's state of domicile, receivables for premium tax credits are not reflected in the accompanying financial statements.

(2) Assessments

Not Applicable

(3) Undiscounted and Discounted Guaranty Fund Assessments

Not Applicable

C. Gain Contingencies

Not Applicable

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

Not Applicable

NOTES TO FINANCIAL STATEMENTS

E. Product Warranties
(1)-(2) Not Applicable

F. Joint and Several Liabilities
Not Applicable

G. All Other Contingencies
Not Applicable

NOTE 15 Leases

A. Lessee Operating Lease:

- (1) The Company has allocated expenses related to leases of building space, vehicles, and various office equipment. The Company recognized expense for the years ending December 31, 2021 and 2020 of \$37,787 and \$24,999, respectively.
- (2) a. At December 31, 2021, the minimum aggregate rental commitments are as follows:
Not applicable
- (3) For Sale-Leaseback Transactions
Not applicable

B. Lessor Leases
Not applicable

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not Applicable

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales
Not Applicable

B. Transfer and Servicing of Financial Assets
Not Applicable

C. Wash Sales

In the course of the Company's asset management, securities are not sold and reacquired within 30 days of the sale date to enhance the Company's yield on its investment portfolio. There may be occasional isolated incidents where wash sales occur. At year end, the Company sold a security for \$1,188 that was subsequently repurchased.

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

Not Applicable

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

Not Applicable

NOTE 20 Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

SSAP No. 100, Fair Value Measurements, clarifies the definition of estimated fair value and establishes a hierarchy for measuring estimated fair value. The hierarchy established by this standard consists of three levels to indicate the quality of the estimated fair value measurements as described below:

Level 1 - Quoted Prices in Active Markets for Identical Assets and Liabilities: Unadjusted quoted prices for identical assets or liabilities in active markets that are readily and regularly obtainable.

Level 2 - Significant Other Observable Inputs: Quoted prices in markets that are not active or inputs that are observable either directly or indirectly. These inputs can include quoted prices for similar but not identical assets or liabilities other than quoted prices in Level 1.

Level 3 - Significant Unobservable Inputs: Unobservable inputs that are supported by little or no market activity and are significant to the determination of estimated fair value of assets or liabilities. Unobservable inputs reflect the entity's assumptions about the assumptions that market participants would use in pricing the asset or liability.

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value Common Stocks, unaffiliated	\$ 7,714,017	\$ 310	\$ 76,941		\$ 7,791,268
Total assets at fair value/NAV	\$ 7,714,017	\$ 310	\$ 76,941	\$ -	\$ 7,791,268

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value					
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

Description	Beginning Balance at 01/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2021
a. Assets Common Stocks, unaffiliated	\$ 75,949				\$ 992					\$ 76,941
Total Assets	\$ 75,949	\$ -	\$ -	\$ -	\$ 992	\$ -	\$ -	\$ -	\$ -	\$ 76,941

Description	Beginning Balance at 01/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2021
b. Liabilities										
Total Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Policies when Transfers Between Levels are Recognized

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1, 2 or 3. The Company had no transfers into or out of any of the levels during the years ended December 31, 2021 and 2020.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

Common Stocks, unaffiliated- According to statutory accounting rules, common stocks are reported at fair value.

(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 unaffiliated	\$ 42,084,385 \$ 7,791,268	\$ 40,659,424 \$ 7,791,268	\$ 7,714,017	\$ 42,084,385 \$ 310	\$ 76,941		

Bonds and Common Stocks

When available, the estimated fair values for bonds, including loan-backed and structured securities, and certain short-term investments 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 judgement 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 investment are classified as Level 3.

The estimated fair value of cash approximates carrying value and is classified as Level 1 given the nature of cash.

D. Not Practicable to Estimate Fair Value

Not Applicable

E. NAV Practical Expedient Investments

Not Applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring: Debtors

Not Applicable

C. Other Disclosures

Not Applicable

D. Business Interruption Insurance Recoveries

Not Applicable

E. State Transferable and Non-transferable Tax Credits

Not Applicable

NOTES TO FINANCIAL STATEMENTS

F. Subprime Mortgage Related Risk Exposure

(1) Description of the Subprime-Mortgage-Related Exposure and Related Risk Management Policies

The Company does not engage in subprime residential mortgage lending.

The Company's exposure to subprime lending is limited to investments within the fixed maturity investment portfolio which contains securities collateralized by mortgages that might have characteristics of subprime lending such as adjustable rate mortgages and alternative documentation mortgages. Currently the Company has no exposure to subprime loans within the fixed maturity investment portfolio.

(2) Direct exposure through investments in subprime mortgage loans.

Not Applicable

(3) Direct exposure through other investments.

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a. Residential mortgage backed securities	\$ 398	\$ 384	\$ 427	
b. Commercial mortgage backed securities				
c. Collateralized debt obligations				
d. Structured securities				
e. Equity investment in SCAs *				
f. Other assets				
g. Total	\$ 398	\$ 384	\$ 427	\$ -

* These investments comprise of the companies invested assets.

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

Not Applicable

G. Insurance-Linked Securities (ILS) Contracts

Not Applicable

H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not Applicable

NOTE 22 Events Subsequent

The Company did not have any recognized subsequent events for the periods reported.

Subsequent events have been considered through February 24, 2022 for these statutory financial statements which are to be issued on March 1, 2022.

A. Federal Affordable Care Act (YES/NO)?

Yes [] No [X]

		2021	2020
B.	ACA Fee Assessment Payable for the Upcoming Year	\$ -	\$ -
C.	ACA Fee Assessment Paid	\$ -	\$ -
D.	Premium Written Subject to ACA 9010 Assessment	\$ -	\$ -
E.	Total Adjusted Capital Before Surplus Adjustment (Five-Year Historical Line 28)	\$ 38,311,245	\$ 32,874,838
F.	Total Adjusted Capital After Surplus Adjustment (Five-Year Historical Line 28 minus 22B above)	\$ 38,311,245	\$ 32,874,838
G.	Authorized Control Level (Five-Year Historical Line 29)	\$ 4,109,556	\$ 4,724,123

H. (YES/NO)?

Yes [] No [X]

NOTES TO FINANCIAL STATEMENTS

NOTE 23 Reinsurance**A. Unsecured Reinsurance Recoverables**

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

Individual Reinsurers Who Are Members of a Group

Group Code	FEIN	Reinsurer Name	Unsecured Amount
14621	31-4259550	Motorists Mutual Insurance Company	\$ 28,953,941
10227	13-4924125	Munich Reinsurance America, Inc	\$ 2,248,101
00000	CR-1340125	Hannover Rückversicherungs AG	\$ 1,393,298

B. Reinsurance Recoverable in Dispute

Not Applicable

C. Reinsurance Assumed and Ceded

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$ 8,600,271	\$ 1,099,350	\$ 7,282,952	\$ 1,015,734	\$ 1,317,319	\$ 83,616
b. All Other	\$ 81,338	\$ 17,167	\$ 2,538	\$ 381	\$ 78,800	\$ 16,786
c. Total	\$ 8,681,609	\$ 1,116,517	\$ 7,285,490	\$ 1,016,115	\$ 1,396,119	\$ 100,402
d. Direct Unearned Premium Reserve						\$ 7,261,862

(2)

	Direct	Assumed	Ceded	Net
	\$ 57,199		\$ (155,125)	\$ 212,324
a. Contingent Commission	\$ 57,199		\$ (155,125)	\$ 212,324
b. Sliding Scale Adjustments				
c. Other Profit Commission Arrangements	\$ -		\$ -	\$ -
d. TOTAL	\$ 57,199	\$ -	\$ (155,125)	\$ 212,324

(3) Not Applicable

D. Uncollectible Reinsurance

Not Applicable

E. Commutation of Reinsurance Reflected in Income and Expenses.

Not Applicable

F. Retroactive Reinsurance

Not Applicable

G. Reinsurance Accounted for as a Deposit

Not Applicable

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

Not Applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not Applicable

K. Reinsurance Credit

Not Applicable

NOTE 24 Retrospectively Rated Contracts & 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)?

Yes [] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year
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**

Reserves for the Company's incurred losses and loss adjustment expenses (after intercompany pooling) are attributable to insured events of prior years, which reflect favorable development totaling \$4,529,870. The development can be attributed primarily to the re-estimation of unpaid losses and loss adjustment expenses in the workers' compensation, commercial auto liability, private passenger auto liability, commercial multi perils, auto physical damage, products liability and other 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.

NOTES TO FINANCIAL STATEMENTS

NOTE 26 Intercompany Pooling Arrangements

A. Identification of the Lead Entity and all Affiliated Entities Participating in the Intercompany Pool

	NAIC Company Code	Pooling Percentage
Lead Entity and all Affiliated Entities		
Motorists Mutual Insurance Company (Lead Entity)	14621	32.4%
BrickStreet Mutual Insurance Company	12372	48.0%
Motorists Commercial Mutual Insurance Company	13331	10.3%
Consumers Insurance USA, Inc.	10204	2.1%
Iowa Mutual Insurance Company	14338	1.7%
Wilson Mutual Insurance Company	19950	1.7%
Phenix Mutual Fire Insurance Company	23175	1.6%
PinnaclePoint Insurance Company	15137	0.8%
SummitPoint Insurance Company	15136	0.8%
Iowa American Insurance Company	31577	0.6%
MICO Insurance Company	40932	%
NorthStone Insurance Company	13045	%
AlleghenyPoint Insurance Company	13016	%

B. Description of Lines and Types of Business Subject to the Pooling Agreement

The pooling arrangement covered premiums, losses and underwriting expenses for all lines during the year. Related finance and service charge income, agent and premium balance charge-offs, deficiency reserves, and policyholder dividends were also subject to the pooling arrangement.

C. Description of Cessions to Non-Affiliated Reinsurance Subject to Pooling Agreement

D. Identification of all Pool Members that are Parties to Reinsurance Agreements with Non-Affiliated Reinsurers

As the lead insurer, Motorists Mutual assumed all net premiums, losses, loss adjustment expenses, and underwriting expenses and then ceded each pool participant its share of the pool.

E. Explanation of Discrepancies Between Entries of Pooled Business

There are no discrepancies between any entries regarding pooled business on the assumed and ceded reinsurance schedules of other pooled participants.

F. Description of Intercompany Sharing

Underwriting-related balance sheet items such as premiums receivable, installments, reinsurance assumed premium receivables and loss payables, reinsurance ceded premium payables and loss receivables, general expense receivables and payables, funds held balances, advanced premiums, and outstanding drafts were also pooled.

G. Amounts Due To/From Lead Entity and all Affiliated Entities Participating in the Intercompany Pool

As of December 31, 2021, the lead company reported an aggregate pooling-related balance of \$23,714,417 payable to the other pool participants.

NOTE 27 Structured Settlements

	Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
A. Reserves No Longer Carried	\$ 716,880	\$ 1,002,741
B. Annuities Which Equal or Exceed 1% of Policyholders' Surplus		
Life Insurance Company And Location	Licensed in Company's State of Domicile Yes/No	Statement Value (i.e., Present Value) of Annuities
Cigna Life Insurance Company; Philadelphia, PA John Hancock Financial; Lansing, Michigan	Yes Yes	\$ 616,519 \$ 386,222

NOTE 28 Health Care Receivables

Not Applicable

NOTE 29 Participating Policies

Not Applicable

NOTE 30 Premium Deficiency Reserves

As of December 31, 2021 the Company reported no premium deficiency reserves.

(1) Liability carried for premium deficiency reserves	\$ -
(2) Date of the most recent evaluation of this liability	01/21/2022
(3) Was anticipated investment income utilized in the calculation?	Yes [X] No []

NOTE 31 High Deductibles

Not Applicable

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not Applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 33 Asbestos/Environmental Reserves

A. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to asbestos losses? Yes. The company had exposure to asbestos losses during the periods reported. Direct exposure arose from the sale of general liability business. The company also had exposure through its unaffiliated reinsurance assumed operations and an intercompany pooling arrangement (reference Note 26). The company estimates the impact of its direct exposure by establishing case reserves on all known losses and by computing IBNR losses based on previous experience. The company relies on case and IBNR reserves established by the Excess Casualty Reinsurance Association and the Mutual Reinsurance Bureau to measure its exposure from unaffiliated reinsurance assumed operations.

(1) Direct

	2017	2018	2019	2020	2021
a. Beginning reserves:	\$ 190,089	\$ 179,727	\$ 155,630	\$ 202,609	\$ 299,712
b. Incurred losses and loss adjustment expense:	\$ 8,829	\$ (11,963)	\$ 56,992	\$ 131,640	\$ (29,641)
c. Calendar year payments for losses and loss adjustment expenses:	\$ 19,191	\$ 12,134	\$ 10,013	\$ 34,537	\$ 119,259
d. Ending reserves:	\$ 179,727	\$ 155,630	\$ 202,609	\$ 299,712	\$ 150,812

(2) Assumed Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:	\$ 37,383	\$ 56,029	\$ 54,266	\$ 53,366	\$ 43,419
b. Incurred losses and loss adjustment expense:	\$ 23,134	\$ (11)	\$ 1,023	\$ (8,182)	\$ 58
c. Calendar year payments for losses and loss adjustment expenses:	\$ 4,488	\$ 1,752	\$ 1,923	\$ 1,765	\$ 1,191
d. Ending reserves:	\$ 56,029	\$ 54,266	\$ 53,366	\$ 43,419	\$ 42,286

(3) Net of Ceded Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:	\$ 227,246	\$ 235,320	\$ 209,388	\$ 254,880	\$ 279,384
b. Incurred losses and loss adjustment expense:	\$ 31,730	\$ (12,124)	\$ 57,475	\$ 60,796	\$ (29,591)
c. Calendar year payments for losses and loss adjustment expenses:	\$ 23,656	\$ 13,808	\$ 11,983	\$ 36,292	\$ 90,221
d. Ending reserves:	\$ 235,320	\$ 209,388	\$ 254,880	\$ 279,384	\$ 159,572

B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):

(1) Direct Basis:	\$ 89,325
(2) Assumed Reinsurance Basis:	\$ 30,639
(3) Net of Ceded Reinsurance Basis:	\$ 119,789

C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):

(1) Direct Basis:	\$ 22,253
(2) Assumed Reinsurance Basis:	\$ 1,635
(3) Net of Ceded Reinsurance Basis:	\$ 23,801

D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to environmental losses?

Yes. The Company had exposure to environmental losses during the periods reported. Direct exposure arose from the sale of general liability, commercial autoliability, and homeowners business. The Company also had exposure through its unaffiliated reinsurance assumed operations and an intercompany pooling arrangement (reference Note 26). The Company estimates the impact of its direct exposure by establishing case reserves on all known losses and by computing IBNR losses based on previous experience. The Company relies on case and IBNR reserves established by the Excess Casualty Reinsurance Association and the Mutual Reinsurance Bureau to measure its exposure from unaffiliated reinsurance assumed operations.

(1) Direct

	2017	2018	2019	2020	2021
a. Beginning reserves:	\$ 74,435	\$ 85,539	\$ 66,497	\$ 59,577	\$ 38,841
b. Incurred losses and loss adjustment expense:	\$ 17,771	\$ (11,261)	\$ (3,318)	\$ (12,024)	\$ (16,747)
c. Calendar year payments for losses and loss adjustment expenses:	\$ 6,667	\$ 7,781	\$ 3,602	\$ 8,712	\$ 663
d. Ending reserves:	\$ 85,539	\$ 66,497	\$ 59,577	\$ 38,841	\$ 21,431

(2) Assumed Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:	\$ 5,003	\$ 8,234	\$ 11,981	\$ 11,178	\$ 15,445
b. Incurred losses and loss adjustment expense:	\$ 4,262	\$ 4,651	\$ 21	\$ 4,961	\$ (2,976)
c. Calendar year payments for losses and loss adjustment expenses:	\$ 1,031	\$ 904	\$ 824	\$ 694	\$ 776
d. Ending reserves:	\$ 8,234	\$ 11,981	\$ 11,178	\$ 15,445	\$ 11,693

(3) Net of Ceded Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:	\$ 78,792	\$ 90,962	\$ 73,009	\$ 65,727	\$ 48,697
b. Incurred losses and loss adjustment expense:	\$ 19,328	\$ (9,400)	\$ (2,484)	\$ (7,881)	\$ (17,697)
c. Calendar year payments for losses and loss adjustment expenses:	\$ 7,158	\$ 8,553	\$ 4,798	\$ 9,149	\$ 1,382
d. Ending reserves:	\$ 90,962	\$ 73,009	\$ 65,727	\$ 48,697	\$ 29,618

NOTES TO FINANCIAL STATEMENTS

E. State the amount of the ending reserves for Bulk + IBNR included in D (Loss & LAE):

(1) Direct Basis:	\$ 18,432
(2) Assumed Reinsurance Basis:	\$ 9,519
(3) Net of Ceded Reinsurance Basis:	\$ 24,795

F. State the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR):

(1) Direct Basis:	\$ 6,029
(2) Assumed Reinsurance Basis:	\$ 2,598
(3) Net of Ceded Reinsurance Basis:	\$ 7,049

NOTE 34 Subscriber Savings Accounts

Not Applicable

NOTE 35 Multiple Peril Crop Insurance

Not Applicable

NOTE 36 Financial Guaranty Insurance

Not Applicable

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []

1.3 State Regulating? OHIO

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2018

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2018

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/03/2020

3.4 By what department or departments?
 Ohio Department of Insurance

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 4.11 sales of new business? Yes [] No [X]
 4.12 renewals? Yes [] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 4.21 sales of new business? Yes [] No [X]
 4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
 If yes, complete and file the merger history data file with the NAIC.

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

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

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

6.2 If yes, give full information:

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]

7.2 If yes,
 7.21 State the percentage of foreign control; %
 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity
------------------	---------------------

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

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

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

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity? Yes [] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []

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

KPMG LLP 191 W. Nationwide Blvd., Suite 500, Columbus OH 43215

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []

10.6 If the response to 10.5 is no or n/a, please explain

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Derek A. Jones, FCAS, MAAA, Milliman, One Pennsylvania Plaza, 38th Floor, New York, NY 10119, who is a consulting actuary for the Encova Mutual Insurance Group

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]

12.11 Name of real estate holding company

12.12 Number of parcels involved

12.13 Total book/adjusted carrying value \$

12.2 If, yes provide explanation:

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []

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

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

c. Compliance with applicable governmental laws, rules and regulations;

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

e. Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11	To directors or other officers.....	\$
20.12	To stockholders not officers.....	\$
20.13	Trustees, supreme or grand (Fraternal Only)	\$

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21	To directors or other officers.....	\$
20.22	To stockholders not officers.....	\$
20.23	Trustees, supreme or grand (Fraternal Only)	\$

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21	Rented from others.....	\$
21.22	Borrowed from others.....	\$
21.23	Leased from others	\$
21.24	Other	\$

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]

22.2 If answer is yes:

22.21	Amount paid as losses or risk adjustment \$	\$
22.22	Amount paid as expenses	\$
22.23	Other amounts paid	\$

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

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

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

25.02 If no, give full and complete information relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

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

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$	0
25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$	0
25.093 Total payable for securities lending reported on the liability page. \$	0

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements \$
26.22 Subject to reverse repurchase agreements \$
26.23 Subject to dollar repurchase agreements \$
26.24 Subject to reverse dollar repurchase agreements \$
26.25 Placed under option agreements \$
26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
26.27 FHLB Capital Stock \$
26.28 On deposit with states \$
26.29 On deposit with other regulatory bodies \$
26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
26.32 Other \$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? .. Yes [] No []

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108	Yes [] No []
27.42 Permitted accounting practice	Yes [] No []
27.43 Other accounting guidance	Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$

29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

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

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

29.04 If yes, give full and complete information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Chickasaw Capital Management, LLC	U.....
New England Asset Management, Inc.	U.....
Northern Trust Investments, Inc.	U.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5 Investment Management Agreement (IMA) Filed
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	
127398	Chickasaw Capital Management, LLC	254900X6FR1LTWA2B610	SEC	NO.....
109846	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	NO.....
105900	Northern Trust Investments, Inc.	BEL4B8X7EHJU845Y2N39	SEC	NO.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?..... Yes [X] No []

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
04314H-85-7	Artisan Intl Val Fund 1	3,730,833
04314H-66-7	Artisan Intl Val ADV	1,778,906
464287-65-5	ISHARES: RUSS 2000 ETF	134,408
30.2999 - Total		5,644,147

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
Artisan Intl Val Fund 1	Samsung Electronics Co Ltd	170,126	12/31/2021 ..
Artisan Intl Val Fund 1	Compass Group PLC	166,022	12/31/2021 ..
Artisan Intl Val Fund 1	Arch Capital Group LTD	162,291	12/31/2021 ..
Artisan Intl Val Fund 1	Novartis AG	150,726	12/31/2021 ..
Artisan Intl Val Fund 1	ABB Ltd	147,741	12/31/2021 ..
Artisan Intl Val ADV	Samsung Electronics Co Ltd	81,118	12/31/2021 ..
Artisan Intl Val ADV	Compass Group PLC	79,161	12/31/2021 ..
Artisan Intl Val ADV	Arch Capital Group Ltd	77,382	12/31/2021 ..
Artisan Intl Val ADV	Novartis AG	71,868	12/31/2021 ..
Artisan Intl Val ADV	ABB Ltd	70,445	12/31/2021 ..
ISHARES: RUSS 2000 ETF	Ovintiv Inc	524	12/31/2021 ..
ISHARES: RUSS 2000 ETF	Macy's Inc	430	12/31/2021 ..
ISHARES: RUSS 2000 ETF	BJ's Wholesale Club Holdings Inc	417	12/31/2021 ..
ISHARES: RUSS 2000 ETF	AMC Entertainment Holdings Inc Class A	417	12/31/2021 ..
ISHARES: RUSS 2000 ETF	Tenet Healthcare Corp	403	12/31/2021 ..

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	41,419,418	42,844,382	1,424,964
31.2 Preferred stocks	0		0
31.3 Totals	41,419,418	42,844,382	1,424,964

31.4 Describe the sources or methods utilized in determining the fair values:

The Fair Value of securities is determined using quoted market prices when available, external pricing service, SVO pricing, fair values available from custodians or investment managers

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

33.2 If no, list exceptions:

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

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$142,778

38.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
Insurance Services Office Inc	124,947

39.1 Amount of payments for legal expenses, if any?\$63

39.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....

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

40.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [] No [X]	
1.2	If yes, indicate premium earned on U. S. business only.	\$	
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$	
1.31	Reason for excluding		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$	
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.	\$	0
1.6	Individual policies:	Most current three years: 1.61 Total premium earned \$ 0 1.62 Total incurred claims \$ 0 1.63 Number of covered lives 0	
		All years prior to most current three years 1.64 Total premium earned \$ 0 1.65 Total incurred claims \$ 0 1.66 Number of covered lives 0	
1.7	Group policies:	Most current three years: 1.71 Total premium earned \$ 0 1.72 Total incurred claims \$ 0 1.73 Number of covered lives 0	
		All years prior to most current three years 1.74 Total premium earned \$ 0 1.75 Total incurred claims \$ 0 1.76 Number of covered lives 0	
2.	Health Test:	1 Current Year 2 Prior Year	
2.1	Premium Numerator	0 5	
2.2	Premium Denominator	18,438,840 18,246,981	
2.3	Premium Ratio (2.1/2.2) .....	.0.000 0.000
2.4	Reserve Numerator	0 0	
2.5	Reserve Denominator	43,486,859 41,198,094	
2.6	Reserve Ratio (2.4/2.5) .....	.0.000 0.000
3.1	Did the reporting entity issue participating policies during the calendar year?	Yes [] No [X]	
3.2	If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year:	3.21 Participating policies \$	
		3.22 Non-participating policies \$	
4.	For mutual reporting Entities and Reciprocal Exchanges Only:		
4.1	Does the reporting entity issue assessable policies?	Yes [] No [X]	
4.2	Does the reporting entity issue non-assessable policies?	Yes [X] No []	
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?	%	
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$ 0	
5.	For Reciprocal Exchanges Only:		
5.1	Does the Exchange appoint local agents?	Yes [] No []	
5.2	If yes, is the commission paid:	5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A [] 5.22 As a direct expense of the exchange Yes [] No [] N/A []	
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?		
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?	Yes [] No []	
5.5	If yes, give full information		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
Those Companies that concentrate in the Workers Compensation business, and which the Company has exposure to through the intercompany pooling arrangement, purchase catastrophic reinsurance at levels that are deemed adequate to protect against excessive loss. In addition, losses arising from claims under the federal black lung programs for dates of injury prior to 2016 are subject to ADC arrangement related to black lung claims. In addition, single locations, where excessive concentration of potential losses have been identified, are subject to facultative reinsurance above the layers contained in the catastrophic policies.

6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.
The Lead Company in the pooling arrangement performs a concentration of risk study using modeling software to determine the probable maximum insurance loss. The software utilized includes Management Solutions (RMS) RiskLink and AIR Touchstone catastrophe models. Analysis is performed for the perils of hurricane, severe convective storm, winter storm, and earthquake. The PML driver on low return periods (~20 years) is severe convective storm. Starting around the 100 year return period, hurricane becomes the largest driver of the PML. The highest concentration of exposure (total insured value) is in Ohio. Ohio also has the highest gross average annual loss (Gross AAL). 8 of the top 10 counties for exposure are in Ohio. The other two counties are in Kentucky and Rhode Island. 7 of the top 10 counties for Gross AAL are in Ohio. The other counties are in Kentucky, Rhode Island, and South Carolina. The Encova Mutual Insurance Group utilizes Guy Carpenter's CATography tool to analyze and manage property risk. The Group to which this Company is a party through its pooling arrangement works with reinsurer brokers to assist in developing maximum probable losses. Both Property and Casualty exposures are analyzed for probable maximum loss and include various scenarios.

6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
The Company purchases catastrophic reinsurance at levels that are deemed adequate to protect against excessive loss.

6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [X] No []

6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.

7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)? Yes [] No [X]

7.2 If yes, indicate the number of reinsurance contracts containing such provisions:

7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No []

8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]

8.2 If yes, give full information

9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancelable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]

9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [] No [X]

9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]

9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or Yes [] No [X]
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [] No [X]
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [] No [X]

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [X] No [] N/A []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]

11.2 If yes, give full information
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
 12.11 Unpaid losses \$
 12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds \$

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [X] N/A []

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
 12.41 From %
 12.42 To %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]

12.6 If yes, state the amount thereof at December 31 of the current year:
 12.61 Letters of credit \$
 12.62 Collateral and other funds \$

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 34,000

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 2

14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [X] No []

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
Premiums are allocated to cedant based on experience weighted earned premiums subject to the contract. Reinsurance recoveries are distributed based on each cedant's share of the aggregate losses subject to the contract.

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No [X]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [X] No []

14.5 If the answer to 14.4 is no, please explain:
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]

15.2 If yes, give full information
.....

16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home
16.12 Products
16.13 Automobile
16.14 Other*

* Disclose type of coverage:
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance	\$
17.12 Unfunded portion of Interrogatory 17.11	\$
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$
17.14 Case reserves portion of Interrogatory 17.11	\$
17.15 Incurred but not reported portion of Interrogatory 17.11	\$
17.16 Unearned premium portion of Interrogatory 17.11	\$
17.17 Contingent commission portion of Interrogatory 17.11	\$

18.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

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

18.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

18.4 If yes, please provide the balance of funds administered as of the reporting date. \$

19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

19.1 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 []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2021	2 2020	3 2019	4 2018	5 2017
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	15,664,454	16,388,088	17,234,906	19,241,321	48,482,551
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	6,586,111	7,308,304	8,572,156	18,677,514	25,112,864
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	10,699,355	11,040,485	11,411,231	14,784,128	20,717,232
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	(157)	11,209	84,177	139,831
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)	336,592	259,590	229,473	135,041	218,179
6. Total (Line 35)	33,286,512	34,996,310	37,458,875	72,922,181	94,670,657
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	12,058,610	11,872,641	12,355,795	13,052,393	10,676,308
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,927,478	2,019,601	2,385,683	1,745,573	4,811,282
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	4,304,017	4,098,334	3,594,750	1,934,952	5,926,489
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	(157)	11,318	10,828	34,787
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	336,592	259,590	229,473	135,041	218,179
12. Total (Line 35)	18,626,697	18,250,009	18,577,020	16,878,786	21,667,045
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	598,631	72,662	(373,699)	374,176	(5,602,303)
14. Net investment gain or (loss) (Line 11)	4,330,359	249,887	2,100,573	2,695,017	2,200,580
15. Total other income (Line 15)	(143,434)	(6,082)	24,194	38,284	92,459
16. Dividends to policyholders (Line 17)	67,128	20,879	47,656	115,437	120,911
17. Federal and foreign income taxes incurred (Line 19)	61,746	56,825	314,556	(259,850)	(443,780)
18. Net income (Line 20)	4,656,683	238,763	1,388,856	3,251,891	(2,986,395)
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	91,902,417	87,519,102	83,485,111	93,035,967	93,870,453
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	2,369,589	6,885,485	2,562,090	4,233,780	4,853,270
20.2 Deferred and not yet due (Line 15.2)	3,451,788	3,933,173	4,787,491	13,194,323	21,958,235
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	53,591,173	54,644,264	51,971,738	65,137,206	65,754,189
22. Losses (Page 3, Line 1)	28,553,082	27,869,897	26,820,661	26,275,520	14,816,685
23. Loss adjustment expenses (Page 3, Line 3)	4,863,949	4,761,346	4,677,984	4,777,372	3,713,191
24. Unearned premiums (Page 3, Line 9)	8,657,981	8,470,123	8,467,095	8,185,763	9,782,105
25. Capital paid up (Page 3, Lines 30 & 31)	5,000,000	0	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37)	38,311,245	32,874,838	31,513,374	27,898,762	28,116,264
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	1,732,762	(2,005,865)	(445,138)	14,571,911	(1,489,703)
Risk-Based Capital Analysis					
28. Total adjusted capital	38,311,245	32,874,838	31,513,374	27,898,762	28,116,264
29. Authorized control level risk-based capital	4,109,556	4,724,123	4,553,986	4,176,502	4,622,704
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	60.6	42.0	50.2	48.4	40.6
31. Stocks (Lines 2.1 & 2.2)	25.4	36.0	36.0	30.6	42.2
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3)	0.0	1.3	1.4	3.0	4.1
34. Cash, cash equivalents and short-term investments (Line 5)	14.0	13.8	5.4	11.7	4.7
35. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7)	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8)	0.0	6.9	7.1	6.4	8.5
38. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
40. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)		0	0	0	0
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)	0	0	0	0	0
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	9,257,712	8,814,735	8,203,677	7,892,926	7,565,393
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)		0	0	0	0
46. Affiliated mortgage loans on real estate					
47. All other affiliated	4,500	24,031	0	14,185	6,029
48. Total of above Lines 42 to 47	9,262,212	8,838,766	8,203,677	7,907,111	7,571,422
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	24.2	26.9	26.0	28.3	26.9

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2021	2 2020	3 2019	4 2018	5 2017
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	(2,286,783)	3,092,391	2,394,489	(2,418,572)	(1,493,785)
52. Dividends to stockholders (Line 35)	.....	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38)	5,436,407	1,361,465	3,614,613	(217,502)	(8,116,375)
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	14,334,194	16,330,288	18,988,661	13,739,273	22,556,260
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	3,438,487	5,129,306	7,196,512	14,736,221	19,294,755
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	6,075,419	20,160,621	8,440,234	11,264,921	24,272,021
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	(166)	5,039	5,134	18,170	7,909
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)	151,563	159,206	134,720	406,780	152,802
59. Total (Line 35)	23,999,497	41,784,460	34,765,262	40,165,366	66,283,747
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	5,705,973	5,355,397	5,875,517	(5,675,957)	5,579,753
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,049,796	1,030,052	1,414,467	1,571,826	2,686,521
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,576,200	1,994,959	1,902,777	2,257,408	3,779,921
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	(166)	5,039	5,134	18,104	7,909
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)	151,563	159,206	134,720	406,780	152,802
65. Total (Line 35)	8,483,366	8,544,653	9,332,615	(1,421,839)	12,206,906
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	50.3	52.6	54.0	54.3	66.3
68. Loss expenses incurred (Line 3)	15.1	15.0	15.1	13.9	17.2
69. Other underwriting expenses incurred (Line 4)	31.4	32.0	33.0	29.7	42.4
70. Net underwriting gain (loss) (Line 8)	3.2	0.4	(2.0)	2.0	(25.9)
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	31.8	32.0	32.4	32.3	42.0
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	65.4	67.6	69.0	68.2	83.5
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	48.6	55.5	59.0	60.5	77.1
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	(3,622)	(1,822)	(1,210)	(2,339)	1,227
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(11.0)	(5.8)	(4.3)	(8.3)	3.4
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(5,184)	(2,994)	(4,015)	(2,640)	490
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(16.5)	(10.7)	(14.3)	(7.3)	1.4

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes No

If no, please explain: _____

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	254	129	.40	1	0	1	10	.163	XXX	
2. 2012	14,751	1,348	13,403	8,181	781	869	135	1,248	63	160	9,318	XXX	
3. 2013	16,084	1,662	14,422	8,619	1,049	959	180	1,318	77	145	9,591	XXX	
4. 2014	16,964	2,032	14,932	8,742	962	1,004	215	1,296	90	166	9,774	XXX	
5. 2015	16,594	2,492	14,102	8,204	1,236	959	201	1,194	86	148	8,835	XXX	
6. 2016	17,004	2,033	14,971	7,581	703	876	118	1,245	91	153	8,788	XXX	
7. 2017	17,378	1,267	16,111	7,770	433	791	28	1,388	79	126	9,408	XXX	
8. 2018	16,166	415	15,751	7,157	206	636	4	1,117	1	126	8,700	XXX	
9. 2019	18,789	493	18,296	8,032	346	682	0	1,390	1	305	9,757	XXX	
10. 2020	18,813	566	18,247	6,359	145	245	0	1,977	0	224	8,437	XXX	
11. 2021	19,139	700	18,439	3,741	21	82	0	1,878	0	130	5,680	XXX	
12. Totals	XXX	XXX	XXX	74,638	6,011	7,144	884	14,052	487	1,693	88,452	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.	3,449	916	1,442	276	.51	2	89	.37	122	.20	.0	3,903	XXX			
2. 2012	568	26	346	139	15	.1	31	20	18	.4	.0	788	XXX			
3. 2013	819	37	.637	303	.26	.1	71	.45	.29	.8	.0	1,187	XXX			
4. 2014	750	7	.618	.300	.28	.1	80	.48	.45	.12	.0	1,153	XXX			
5. 2015	776	40	.637	130	.28	.1	74	.18	.51	.9	.0	1,368	XXX			
6. 2016	567	47	.635	.54	.14	.0	91	.14	.67	.3	.0	1,257	XXX			
7. 2017	884	73	.645	5	.28	.0	102	0	.65	0	.0	1,646	XXX			
8. 2018	1,206	36	.910	6	.36	.0	.177	0	.119	0	.0	2,406	XXX			
9. 2019	1,576	.2	1,344	.20	.71	.0	.268	0	.198	0	.0	3,434	XXX			
10. 2020	2,457	84	2,408	11	.112	.0	.374	0	.388	0	.0	5,644	XXX			
11. 2021	3,904	81	4,570	0	196	0	637	0	1,407	0	0	10,633	XXX			
12. Totals	16,954	1,348	14,192	1,244	605	6	1,994	181	2,509	56	0	33,417	XXX			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,700	203
2. 2012	11,276	1,170	10,106	.76.4	86.8	75.4	0	0	0.0	.748	.40
3. 2013	12,478	1,701	10,777	.77.6	102.3	74.7	0	0	0.0	1,115	.72
4. 2014	12,563	1,636	10,927	.74.1	80.5	73.2	0	0	0.0	1,061	.92
5. 2015	11,923	1,720	10,203	.71.8	69.0	72.3	0	0	0.0	1,243	.125
6. 2016	11,075	1,030	10,045	.65.1	50.7	67.1	0	0	0.0	1,101	.155
7. 2017	11,672	618	11,054	.67.2	48.8	68.6	0	0	0.0	1,451	.195
8. 2018	11,358	252	11,106	.70.3	60.7	70.5	0	0	0.0	2,074	.333
9. 2019	13,561	369	13,191	.72.2	74.8	72.1	0	0	0.0	2,897	.537
10. 2020	14,320	240	14,080	.76.1	42.4	77.2	0	0	0.0	4,770	.874
11. 2021	16,415	102	16,313	.85.8	14.6	88.5	0	0	0.0	8,393	.2,239
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	28,553	4,864

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	17,644	16,829	15,875	14,277	13,566	12,189	12,548	11,644	11,451	11,016	(434)	(627)
2. 2012	9,483	9,302	9,053	9,024	8,859	8,765	8,760	8,806	8,885	8,907	22	101
3. 2013	XXX	9,920	9,901	9,816	9,624	9,471	9,319	9,320	9,495	9,515	20	195
4. 2014	XXX	XXX	10,071	10,172	10,101	9,943	9,730	9,741	9,903	9,688	(215)	(52)
5. 2015	XXX	XXX	XXX	9,684	9,627	9,523	9,237	9,047	8,998	9,053	54	5
6. 2016	XXX	XXX	XXX	XXX	9,990	10,365	9,688	9,286	8,911	8,827	(84)	(459)
7. 2017	XXX	XXX	XXX	XXX	XXX	12,624	11,350	10,968	10,149	9,680	(469)	(1,289)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	10,955	11,492	10,727	9,870	(857)	(1,621)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,040	13,003	11,603	(1,399)	(1,437)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,976	11,715	(261)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,028	XXX	XXX
										12. Totals	(3,622)	(5,184)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior	000	2,391	3,994	4,853	5,545	6,043	6,357	6,620	7,052	7,215	XXX	XXX
2. 2012	3,292	5,444	6,427	7,015	7,470	7,709	7,842	8,012	8,084	8,133	XXX	XXX
3. 2013	XXX	3,331	5,517	6,600	7,329	7,740	7,957	8,144	8,253	8,349	XXX	XXX
4. 2014	XXX	XXX	3,618	5,872	6,933	7,689	8,098	8,322	8,469	8,569	XXX	XXX
5. 2015	XXX	XXX	XXX	3,195	5,259	6,369	6,981	7,378	7,561	7,726	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	4,404	6,767	7,967	8,559	8,845	7,634	XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX	5,070	7,662	8,704	9,209	8,100	XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4,527	7,091	8,336	7,583	XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,942	7,248	8,368	XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,031	6,459	XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,802	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior	11,392	9,055	7,559	5,765	4,616	2,965	3,031	2,176	1,820	1,219		
2. 2012	3,449	2,157	1,243	1,016	631	349	186	147	221	218		
3. 2013	XXX	3,697	2,164	1,579	1,059	696	478	351	393	360		
4. 2014	XXX	XXX	3,528	2,404	1,612	1,153	735	618	627	349		
5. 2015	XXX	XXX	XXX	3,743	2,682	1,781	1,273	796	654	563		
6. 2016	XXX	XXX	XXX	XXX	4,025	2,819	1,950	1,299	809	659		
7. 2017	XXX	XXX	XXX	XXX	XXX	5,491	3,248	2,480	1,369	742		
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4,575	3,723	2,173	1,081		
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,011	3,631	1,592		
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,256	2,771		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,206		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	L	0	0	0	0	0	0	
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	1,095,552	1,171,827	0	5,688,193	1,804,239	10,301,124	
15. Indiana	IN	N							
16. Iowa	IA	L	13,492,524	14,342,049	0	8,655,472	7,660,558	8,039,967	1,631
17. Kansas	KS	L	0	0	0	0	0	0	
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	L	0	0	0	7,511	(28,790)	30,700	
25. Mississippi	MS	N							
26. Missouri	MO	L	0	0	0	0	0	0	
27. Montana	MT	L	0	0	0	0	0	0	
28. Nebraska	NE	L	0	0	1,960	736,020	(1,503,298)	7,094,714	
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	0	0	0	0	0	0	
36. Ohio	OH	L	0	0	0	0	0	0	
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	0	0	0	245,709	(58,469)	3,671,614	
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	L	0	0	0	0	0	0	
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. 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	0
59. Totals		XXX	14,588,076	15,513,877	1,960	15,332,904	7,874,241	29,138,120	1,631
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	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX	0	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 12 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 45

(b) Explanation of basis of allocation of premiums by states, etc.

Premiums are assigned to state based on the following methods:

1) the location of the risk for lines 1, 2, 4, 5, 9, 12, 16, 26 and 27

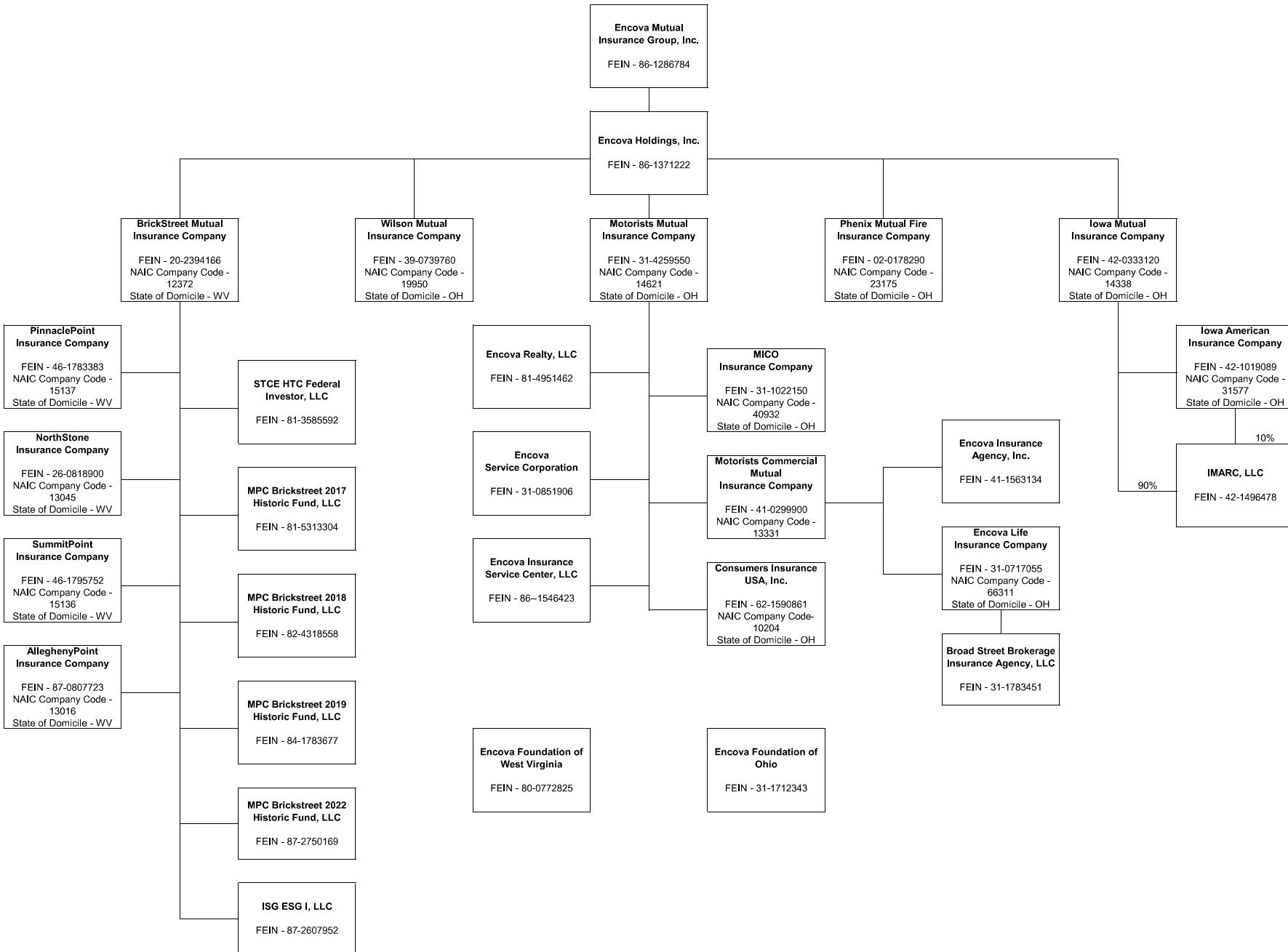
2) the location of the insured's operation for lines 17 and 18

3) the principal garaging location for lines 19 and 21

4) the location of the employer for line 23

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 24

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Misc Expenses	1	16,863	577	17,441
2405. Unalloc Direct Adj Exp	19,289	71	0	19,360
2497. Summary of remaining write-ins for Line 24 from overflow page	19,290	16,934	577	36,801