

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 0291 NAIC Company Code 14338 Employer's ID Number 42-0333120
 (Current) (Prior)

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, COLUMBUS, OH, US 43215
 (Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 471 EAST BROAD STREET
 (Street and Number)
COLUMBUS, OH, US 43215 614-225-8211
 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 471 EAST BROAD STREET, COLUMBUS, OH, US 43215
 (Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 471 EAST BROAD STREET
 (Street and Number)
COLUMBUS, OH, US 43215 614-225-8211
 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address ENCOVA.COM

Statutory Statement Contact AMY E KUHLMAN, 614-225-8285
 (Name) (Area Code) (Telephone Number)
ACCOUNTING@ENCOVA.COM 614-225-8330
 (E-mail Address) (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

JEFFREY LEIGH BENINTENDI GRADY BRENDAN CAMPBELL JAMES CHRISTOPHER HOWAT
THOMAS JOSEPH OBROKTA JR. MATTHEW CARL WILCOX

State of OH SS
 County of FRANKLIN

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

Thomas Joseph Obrokta Jr.
 THOMAS JOSEPH OBROKTA JR.
 CHIEF EXECUTIVE OFFICER

Marchelle Elaine Moore
 MARCHELLE ELAINE MOORE
 SECRETARY

James Christopher Howat
 JAMES CHRISTOPHER HOWAT
 TREASURER

Subscribed and sworn to before me this
10th day of February 2022

Deborah Dailey

- 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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2021

NAIC Company Code 14338

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit accident and health, Collectively renewable accident and health, Non-cancelable accident and health, Guaranteed renewable accident and health, Non-renewable for stated reasons only, Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health, Federal employees health benefits plan premium, Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2021

NAIC Company Code 14338

Table with 12 columns: Line of Business, Gross Premiums (Written/Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Mortgage guaranty, Ocean marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit accident and health, Medicare Title XVIII, Workers' compensation, Other Liability, Excess workers' compensation, Products liability, Private passenger auto, Commercial auto, Aircraft, Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins, and TOTALS (a).

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2021

NAIC Company Code 14338

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Homeowners multiple peril, Commercial multiple peril, etc., ending with a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,631
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2021

NAIC Company Code 14338

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit accident and health, Collectively renewable accident and health, Non-cancelable accident and health, Guaranteed renewable accident and health, Non-renewable for stated reasons only, Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health, Federal employees health benefits plan premium, Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												.28
2.1 Allied lines												.63
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												1,484
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												.29
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation					7,511	(28,790)	30,700	3,017	1,417	100		
17.1 Other Liability - occurrence												.39
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												729
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												925
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a)	0	0	0	0	7,511	(28,790)	30,700	3,017	1,417	100	0	3,298
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	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												.18
2.1 Allied lines												.41
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												.968
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												.19
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												.25
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												.475
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												.603
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	2,150
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	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												.25
2.1 Allied lines .....												.56
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												1,312
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine .....												.26
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence .....												.35
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												644
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												818
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	2,915
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	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2021

NAIC Company Code 14338

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

19 NIE



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												6
2.1 Allied lines												13
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												307
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												6
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												(131)
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												150
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												191
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	542
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												115
2.1 Allied lines												260
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												6, 115
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												121
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												161
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												3, 002
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												3, 812
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	13, 585
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												13
2.1 Allied lines												29
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril					(101)	(101)						689
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												14
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation					247,378	(56,800)	3,671,614		(8,198)	4,600		
17.1 Other Liability - occurrence							0		201	400		18
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												338
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage					(1,568)	(1,568)						429
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	0	0	0	0	245,709	(58,469)	3,671,614	0	(7,997)	5,000	0	1,530
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												6
2.1 Allied lines												14
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												326
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												6
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												9
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												160
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												203
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	725
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2021

NAIC Company Code 14338

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	133,100	148,070	0	64,258	40,628	30,365	17,888	0	(16,502)	7,100	18,953	2,277
2.1 Allied lines	289,954	288,413	0	146,214	145,891	225,631	162,501	6,745	6,745	0	42,739	5,148
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	6,395,337	6,679,858	0	3,243,797	4,278,968	3,556,001	1,195,376	97,958	(67,942)	101,001	1,000,056	121,091
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	20,250	(8,950)	5,800	3,423	(7,179)	3,700	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	200,000	0	25,000	7,757	7,757	0	0	0
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	137,434	148,802	0	67,636	142,588	117,638	500	0	0	0	19,801	2,396
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	14,023	15,339	0	7,021	0	0	0	0	0	0	73	0
13. Group accident and health (b)	0	0	0	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	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	0	0	1,960	0	3,725,471	442,956	16,804,924	208,679	(174,616)	338,701	0	0
17.1 Other Liability - occurrence	196,644	214,265	0	96,311	1,451,820	592,611	8,240,294	369,799	(530,598)	1,468,504	26,446	770
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	(85)	(85)	0	0	20,000	(10,000)	0	26,931	26,931	0	0	0
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	3,339,037	3,635,264	0	1,636,625	1,716,924	1,521,896	2,002,236	50,979	(66,124)	224,497	491,486	59,440
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	0	0	0	0	1,531,352	(579,643)	588,050	136,691	(185,009)	122,000	0	0
21.1 Private passenger auto physical damage	4,082,632	4,383,951	0	2,000,000	2,058,501	1,990,426	95,550	12	2,113	14,401	623,865	75,488
21.2 Commercial auto physical damage	0	0	0	0	511	311	0	77	(324)	2,799	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft	0	0	0	0	0	(5,000)	0	0	0	0	0	0
27. Boiler and machinery	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	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	0	0	0
35. TOTALS (a)	14,588,076	15,513,877	1,960	7,261,862	15,332,904	7,874,241	29,138,120	909,050	(1,004,748)	2,282,703	2,223,418	266,610
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	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,631

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

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SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
NONE					

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

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
31-4259550	14621	Motorists Mutual Insurance Company	OH		14,504	1,687	0	14,005	8	7,036	4,997	7,283	0	35,016	0	759	0	34,257	4,541	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					14,504	1,687	0	14,005	8	7,036	4,997	7,283	0	35,016	0	759	0	34,257	4,541	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates					14,504	1,687	0	14,005	8	7,036	4,997	7,283	0	35,016	0	759	0	34,257	4,541	
06-1182357	22730	Allied World Reinsurance Company	NH		7	16	0	10	0	0	0	0	0	26	0	0	0	26	0	
36-2661954	10103	American Agricultural Insurance Company	IN		2	5	0	4	0	0	0	0	0	8	0	0	0	8	0	
06-1430254	10348	Arch Reinsurance Company	DE		12	55	0	3	0	0	0	0	0	58	0	0	0	58	0	
51-0434766	20370	Axis Reinsurance Company	NY		7	14	0	11	0	0	0	0	0	26	0	0	0	26	0	
36-2994662	36552	Coliseum Reinsurance Company	DE		0	0	0	1,143	0	0	0	0	0	1,143	0	0	0	1,143	0	
36-2114545	20443	Continental Casualty Company	IL		0	0	0	156	0	0	0	0	0	156	0	0	0	156	0	
38-2145898	33499	Dorinco Reinsurance Company	MI		0	0	0	630	0	0	0	0	0	630	0	0	0	630	0	
42-0234980	21415	Employers Mutual Casualty Company	IA		3	1	0	67	0	0	0	0	0	68	0	0	0	68	0	
22-2005057	26921	Everest Reinsurance Company	DE		2	0	0	10	0	0	0	0	0	10	0	0	0	10	0	
13-2673100	22039	General Reinsurance Corporation	DE		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
06-0383750	19682	Hartford Fire Insurance Company	CT		0	0	0	545	0	0	0	0	0	545	0	0	0	545	0	
13-4924125	10227	Munich Reinsurance America, Inc	DE		2	5	0	2,398	0	0	0	0	(155)	2,248	779	0	1,469	0	0	
47-0698507	23680	Odyssey Reinsurance Company	CT		2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13-3031176	38636	Partner Reinsurance Company Of The US	NY		2	0	0	71	0	0	0	0	0	71	0	0	0	71	0	
13-3531373	10006	PartnerRe Insurance Company Of NY	NY		0	0	0	545	0	0	0	0	0	545	0	0	0	545	0	
23-1641984	10219	QBE Reinsurance Corporation	PA		0	0	0	95	0	0	0	0	0	95	0	0	0	95	0	
52-1952955	10357	Renaissance Reinsurance US, Inc	MD		2	0	0	275	0	0	0	0	0	275	0	0	0	275	0	
43-0613000	23388	Shelter Mutual Insurance Company	MO		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
41-0406690	24767	St Paul Fire & Marine Insurance Company	CT		0	0	0	561	0	0	0	0	0	561	0	0	0	561	0	
13-1675535	25364	Swiss Reinsurance America Corporation	NY		9	0	0	954	0	0	0	0	0	954	0	0	0	954	0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					51	97	0	7,479	0	0	0	0	(155)	7,420	0	779	0	6,641	0	
AA-9991500	00000	Illinois Mine Subsidence Insurance Fund	IL		5	0	0	0	0	0	0	0	0	3	1	0	0	1	0	
1099999. Total Authorized - Pools - Mandatory Pools					5	0	0	0	0	0	0	0	0	3	1	0	0	1	0	
AA-9995035	00000	Mutual Reinsurance Bureau	IL		8	16	0	12	0	0	0	0	0	28	0	0	0	28	0	
1199999. Total Authorized - Pools - Voluntary Pools					8	16	0	12	0	0	0	0	0	28	0	0	0	28	0	
AA-1120337	00000	Aspen Insurance UK Ltd	GBR		0	0	0	221	0	0	0	0	0	221	0	0	0	221	0	
AA-3194122	00000	DaVinci Reinsurance Ltd	BMU		2	8	0	6	0	0	0	0	0	14	0	0	0	14	0	
AA-1126623	00000	Lloyd's Syndicate Number 0623	GBR		2	5	0	2	0	0	0	0	0	6	0	0	0	6	0	
AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR		3	6	0	3	0	0	0	0	0	9	0	0	0	9	0	
AA-1120157	00000	Lloyd's Syndicate Number 1729	GBR		4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		8	21	0	8	0	0	0	0	0	29	0	0	0	29	0	
AA-1128791	00000	Lloyd's Syndicate Number 2791	GBR		6	5	0	3	0	0	0	0	0	7	0	0	0	7	0	
AA-1129000	00000	Lloyd's Syndicate Number 3000	GBR		0	13	0	3	0	0	0	0	0	16	0	0	0	16	0	
AA-1120184	00000	Lloyd's Syndicate Number 3268	GBR		2	4	0	2	0	0	0	0	0	6	0	0	0	6	0	
AA-1126005	00000	Lloyd's Syndicate Number 4000	GBR		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1120181	00000	Lloyd's Syndicate Number 5886	GBR		4	13	0	5	0	0	0	0	0	17	0	0	0	17	0	
AA-3190829	00000	Markel Bermuda Ltd	BMU		1	4	0	2	0	0	0	0	0	6	0	0	0	6	0	
AA-3190339	00000	Renaissance Reinsurance Ltd	BMU		2	12	0	12	0	0	0	0	0	24	0	0	0	24	0	
1299999. Total Authorized - Other Non-U.S. Insurers					35	91	0	265	0	0	0	0	0	356	0	0	0	356	0	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					14,602	1,890	0	21,760	8	7,036	4,997	7,285	(155)	42,823	0	1,540	0	41,283	4,541	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
AA-3190932	00000	Argo Re Ltd	BMU		0	1	0	1							2			2	9	
AA-3190770	00000	Chubb Tempest Reinsurance Ltd	BMU		4	2	0	2							5			5	0	
AA-1120191	00000	Convex Insurance UK Ltd	GBR		6	7	0	4							11			11	0	
AA-1340028	00000	Devk Ruckversicherungs und Beteiligungs AG	DEU		6	5	0	3							7			7	0	
AA-1120175	00000	Fidelis Underwriting Ltd	GBR		0	3	0	2							5			5	0	
AA-3191190	00000	Hamilton Re Ltd	BMU		0	2	0	1							2			2	0	
AA-3191298	00000	Qatar Reinsurance Company Ltd	BMU		0	5	0	2							7			7	0	
AA-1340004	00000	R+V Versicherung AG	DEU		13	13	0	12							26			26	0	
AA-3191388	00000	Vermeer Reinsurance Ltd	BMU		0	0	0	0							0			0	0	
AA-3190757	00000	XL Re Ltd	BMU		6	9	0	5							14			14	0	
2699999. Total Unauthorized - Other Non-U.S. Insurers					40	48	0	31	0	0	0	0	0	0	79	0	0	0	79	9
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					40	48	0	31	0	0	0	0	0	0	79	0	0	0	79	9
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CR-1340125	00000	Hannover Ruckversicherungs AG	DEU		18	13	0	1,380							1,393			1,393	0	
4099999. Total Certified - Other Non-U.S. Insurers					18	13	0	1,380	0	0	0	0	0	0	1,393	0	0	0	1,393	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					18	13	0	1,380	0	0	0	0	0	0	1,393	0	0	0	1,393	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					14,660	1,951	0	23,172	8	7,036	4,997	7,285	(155)	44,295	0	1,540	0	42,756	4,550	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					14,660	1,951	0	23,172	8	7,036	4,997	7,285	(155)	44,295	0	1,540	0	42,756	4,550	

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
31-4259550	Motorists Mutual Insurance Company				5,300	29,716	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	5,300	29,716	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	
0899999	Total Authorized - Affiliates	0	0	XXX	0	5,300	29,716	0	0	0	0	0	0	0	0	0	
06-1182357	Allied World Reinsurance Company				0	26	0	26	31	0	31	0	31	4	0	2	
36-2661954	American Agricultural Insurance Company				0	8	0	8	10	0	10	0	10	3	0	0	
06-1430254	Arch Reinsurance Company				0	58	12	46	55	0	55	0	55	2	0	2	
51-0434766	Axis Reinsurance Company				0	26	0	26	31	0	31	0	31	6	0	4	
36-2994662	Coliseum Reinsurance Company				0	1,143	0	1,143	1,371	0	1,371	0	1,371	6	0	192	
36-2114545	Continental Casualty Company				0	156	0	156	188	0	188	0	188	3	0	9	
38-2145898	Dorinco Reinsurance Company				0	630	0	630	756	0	756	0	756	3	0	36	
42-0234980	Employers Mutual Casualty Company				0	68	0	68	82	0	82	0	82	3	0	4	
22-2005057	Everest Reinsurance Company				0	10	0	10	12	0	12	0	12	2	0	0	
13-2673100	General Reinsurance Corporation				0	0	0	0	0	0	0	0	0	2	0	0	
06-0383750	Hartford Fire Insurance Company				0	545	0	545	654	0	654	0	654	2	0	27	
13-4924125	Munich Reinsurance America, Inc				779	1,469	0	2,248	2,698	779	1,918	0	1,918	2	0	79	
47-0698507	Odyssey Reinsurance Company				0	0	0	0	0	0	0	0	0	0	0	0	
13-3031176	Partner Reinsurance Company Of The US				0	71	0	71	85	0	85	0	85	3	0	4	
13-3531373	PartnerRe Insurance Company Of NY				0	545	0	545	654	0	654	0	654	6	0	92	
23-1641984	QBE Reinsurance Corporation				0	95	0	95	114	0	114	0	114	3	0	5	
52-1952955	Renaissance Reinsurance US, Inc				0	275	0	275	330	0	330	0	330	2	0	14	
43-0613000	Shelter Mutual Insurance Company				0	0	0	0	0	0	0	0	0	0	0	0	
41-0406690	St Paul Fire & Marine Insurance Company				0	561	0	561	674	0	674	0	674	1	0	24	
13-1675535	Swiss Reinsurance America Corporation				0	954	0	954	1,145	0	1,145	0	1,145	2	0	47	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	779	6,641	12	7,409	8,891	779	8,111	0	8,111	XXX	542	
AA-9991500	Illinois Mine Subsidence Insurance Fund				1	1	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999	Total Authorized - Pools - Mandatory Pools	0	0	XXX	0	1	1	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9995035	Mutual Reinsurance Bureau				0	28	0	28	33	0	33	0	33	6	0	5	
1199999	Total Authorized - Pools - Voluntary Pools	0	0	XXX	0	28	28	0	28	33	0	33	0	33	XXX	5	
AA-1120337	Aspen Insurance UK Ltd				0	221	0	221	265	0	265	0	265	6	0	37	
AA-3194122	DaVinci Reinsurance Ltd				0	14	0	14	16	0	16	0	16	6	0	2	
AA-1126623	Lloyd's Syndicate Number 0623				0	6	1	5	6	0	6	0	6	6	0	1	
AA-1120156	Lloyd's Syndicate Number 1686				0	9	0	9	11	0	11	0	11	6	0	2	
AA-1120157	Lloyd's Syndicate Number 1729				0	0	0	0	0	0	0	0	0	6	0	0	
AA-1120171	Lloyd's Syndicate Number 1856				0	0	0	0	0	0	0	0	0	6	0	0	
AA-1128623	Lloyd's Syndicate Number 2623				0	29	6	23	28	0	28	0	28	6	0	4	
AA-1128791	Lloyd's Syndicate Number 2791				0	7	0	7	9	0	9	0	9	6	0	1	
AA-1129000	Lloyd's Syndicate Number 3000				0	16	3	12	15	0	15	0	15	6	0	2	
AA-1120184	Lloyd's Syndicate Number 3268				0	6	0	6	7	0	7	0	7	6	0	1	
AA-1126005	Lloyd's Syndicate Number 4000				0	0	0	0	0	0	0	0	0	6	0	0	
AA-1120181	Lloyd's Syndicate Number 5886				0	17	3	14	17	0	17	0	17	6	0	2	

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-3190829	Markel Bermuda Ltd					0	6	0	6	7	0	7	0	7	6	0	1
AA-3190339	Renaissance Reinsurance Ltd					0	24	0	24	29	0	29	0	29	6	0	4
1299999	Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	0	356	14	342	411	0	411	0	411	XXX	0	57
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	6,081	36,742	25	7,779	9,335	779	8,555	0	8,555	XXX	0	604
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999	Total Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
AA-3190932	Argo Re Ltd					2	0	0	2	2	2	0	0	0	6	0	0
AA-3190770	Chubb Tempest Reinsurance Ltd		5	0001		5	0	0	5	6	0	6	5	1	6	0	0
AA-1120191	Convex Insurance UK Ltd		11	0002		11	0	0	11	13	0	13	11	2	6	0	0
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG		7	0003		7	0	0	7	9	0	9	7	1	6	0	0
AA-1120175	Fidelis Underwriting Ltd		5	0004		5	0	0	5	6	0	6	5	1	6	0	0
AA-3191190	Hamilton Re Ltd					0	2	2	0	0	0	0	0	0	6	0	0
AA-3191298	Qatar Reinsurance Company Ltd					0	7	7	0	0	0	0	0	0	6	0	0
AA-1340004	R+V Versicherung AG		26	0005		26	0	0	26	31	0	31	26	5	6	1	1
AA-3191388	Vermeer Reinsurance Ltd					0	0	0	0	0	0	0	0	0	6	0	0
AA-3190757	XL Re Ltd		63	0006		14	0	0	14	17	0	17	14	6	6	1	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	118	XXX	0	70	9	9	70	83	2	81	71	10	XXX	4	1
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	118	XXX	0	70	9	9	70	83	2	81	71	10	XXX	4	1
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999	Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
CR-1340125	Hannover Ruckversicherungs AG	1,393				1,393	0	0	1,393	1,672	0	1,672	1,393	279	2	57	11
4099999	Total Certified - Other Non-U.S. Insurers	1,393	0	XXX	0	1,393	0	0	1,393	1,672	0	1,672	1,393	279	XXX	57	11
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	1,393	0	XXX	0	1,393	0	0	1,393	1,672	0	1,672	1,393	279	XXX	57	11
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	1,393	118	XXX	0	7,544	36,752	35	9,242	11,090	782	10,308	1,464	8,844	XXX	61	617
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals	1,393	118	XXX	0	7,544	36,752	35	9,242	11,090	782	10,308	1,464	8,844	XXX	61	617

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
31-4259550	Motorists Mutual Insurance Company	1,687					1,687		1,687	0	0	0.0	0.0	0.0	XXX	0	
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	1,687	0	0	0	0	1,687	0	1,687	0	0	0.0	0.0	0.0	XXX	0	
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
0899999	Total Authorized - Affiliates	1,687	0	0	0	0	1,687	0	1,687	0	0	0.0	0.0	0.0	XXX	0	
06-1182357	Allied World Reinsurance Company	16					16		16	0		0.0	0.0	0.0	YES	0	
36-2661954	American Agricultural Insurance Company	5					5		5	0		0.0	0.0	0.0	YES	0	
06-1430254	Arch Reinsurance Company	5			50		55		55	50		91.3	91.3	0.0	NO	0	
51-0434766	Axis Reinsurance Company	14					14		14	0		0.0	0.0	0.0	YES	0	
36-2994662	Coliseum Reinsurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
36-2114545	Continental Casualty Company	0					0		0	0		0.0	0.0	0.0	YES	0	
38-2145898	Dorinco Reinsurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
42-0234980	Employers Mutual Casualty Company	1					1		1	0		0.0	0.0	0.0	YES	0	
22-2005057	Everest Reinsurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
13-2673100	General Reinsurance Corporation	0					0		0	0		0.0	0.0	0.0	YES	0	
06-0383750	Hartford Fire Insurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
13-4924125	Munich Reinsurance America, Inc	5					5		5	0		0.0	0.0	0.0	YES	0	
47-0698507	Odyssey Reinsurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
13-3031176	Partner Reinsurance Company Of The US	0					0		0	0		0.0	0.0	0.0	YES	0	
13-3531373	PartnerRe Insurance Company Of NY	0					0		0	0		0.0	0.0	0.0	YES	0	
23-1641984	QBE Reinsurance Corporation	0					0		0	0		0.0	0.0	0.0	YES	0	
52-1952955	Renaissance Reinsurance US, Inc	0					0		0	0		0.0	0.0	0.0	YES	0	
43-0613000	Shelter Mutual Insurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
41-0406690	St Paul Fire & Marine Insurance Company	0					0		0	0		0.0	0.0	0.0	YES	0	
13-1675535	Swiss Reinsurance America Corporation	0					0		0	0		0.0	0.0	0.0	YES	0	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	46	0	0	50	0	97	0	97	50	0	52.1	52.1	0.0	XXX	0	
AA-9991500	Illinois Mine Subsidence Insurance Fund	0					0		0	0		0.0	0.0	0.0	YES	0	
1099999	Total Authorized - Pools - Mandatory Pools	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
AA-9995035	Mutual Reinsurance Bureau	16					16		16	0		0.0	0.0	0.0	YES	0	
1199999	Total Authorized - Pools - Voluntary Pools	16	0	0	0	0	16	0	16	0	0	0.0	0.0	0.0	XXX	0	
AA-1120337	Aspen Insurance UK Ltd	0					0		0	0		0.0	0.0	0.0	YES	0	
AA-3194122	DaVinci Reinsurance Ltd	8					8		8	0		0.0	0.0	0.0	YES	0	
AA-1126623	Lloyd's Syndicate Number 0623	3	0	0	2		5		5	2		32.9	32.9	0.0	NO	0	
AA-1120156	Lloyd's Syndicate Number 1686	6	0	0	0		6		6	0		0.0	0.0	0.0	YES	0	
AA-1120157	Lloyd's Syndicate Number 1729	0	0	0	0		0		0	0		0.0	0.0	0.0	YES	0	
AA-1120171	Lloyd's Syndicate Number 1856	0	0	0	0		0		0	0		0.0	0.0	0.0	YES	0	
AA-1128623	Lloyd's Syndicate Number 2623	14	0	0	7		21		21	7		32.9	32.9	0.0	NO	0	
AA-1128791	Lloyd's Syndicate Number 2791	5	0	0	0		5		5	0		0.0	0.0	0.0	YES	0	
AA-1129000	Lloyd's Syndicate Number 3000	5	0	0	9		13		13	9		65.5	65.5	0.0	NO	0	
AA-1120184	Lloyd's Syndicate Number 3268	4	0	0	0		4		4	0		0.0	0.0	0.0	YES	0	
AA-1126005	Lloyd's Syndicate Number 4000	0	0	0	0		0		0	0		0.0	0.0	0.0	YES	0	
AA-1120181	Lloyd's Syndicate Number 5886	8	0	0	4		13		13	4		35.2	35.2	0.0	NO	0	

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
AA-3190829	Markel Bermuda Ltd	4	0	0	0	0	4	0	4	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3190339	Renaissance Reinsurance Ltd	12	0	0	0	0	12	0	12	0	0	0.0	0.0	0.0	0.0	YES	0
1299999	Total Authorized - Other Non-U.S. Insurers	69	0	0	22	0	22	0	91	22	0	23.8	23.8	0.0	XXX	0	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	1,818	0	0	72	0	72	0	1,890	72	0	3.8	3.8	0.0	XXX	0	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
2299999	Total Unauthorized - Affiliates	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
AA-3190932	Argo Re Ltd	1	0	0	0	0	1	0	1	0	0	0.0	0.0	0.0	YES	0	0
AA-3190770	Chubb Tempest Reinsurance Ltd	2	0	0	0	0	2	0	2	0	0	0.0	0.0	0.0	YES	0	0
AA-1120191	Convex Insurance UK Ltd	7	0	0	0	0	7	0	7	0	0	0.0	0.0	0.0	YES	0	0
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG	5	0	0	0	0	5	0	5	0	0	0.0	0.0	0.0	YES	0	0
AA-1120175	Fidelis Underwriting Ltd	3	0	0	0	0	3	0	3	0	0	0.0	0.0	0.0	YES	0	0
AA-3191190	Hamilton Re Ltd	2	0	0	0	0	2	0	2	0	0	0.0	0.0	0.0	YES	0	0
AA-3191298	Qatar Reinsurance Company Ltd	5	0	0	0	0	5	0	5	0	0	0.0	0.0	0.0	YES	0	0
AA-1340004	R+V Versicherung AG	13	0	0	0	0	13	0	13	0	0	0.0	0.0	0.0	YES	0	0
AA-3191388	Vermeer Reinsurance Ltd	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	0
AA-3190757	XL Re Ltd	9	0	0	0	0	9	0	9	0	0	0.0	0.0	0.0	YES	0	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	48	0	0	0	0	48	0	48	0	0	0.0	0.0	0.0	XXX	0	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	48	0	0	0	0	48	0	48	0	0	0.0	0.0	0.0	XXX	0	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
3699999	Total Certified - Affiliates	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
CR-1340125	Hannover Ruckversicherungs AG	13	0	0	0	0	13	0	13	0	0	0.0	0.0	0.0	YES	0	0
4099999	Total Certified - Other Non-U.S. Insurers	13	0	0	0	0	13	0	13	0	0	0.0	0.0	0.0	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	13	0	0	0	0	13	0	13	0	0	0.0	0.0	0.0	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	0

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		1,879	0	0	72	0	72	1,951	0	0	1,951	72	0	3.7	3.7	0.0	XXX	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
9999999 Totals		1,879	0	0	72	0	72	1,951	0	0	1,951	72	0	3.7	3.7	0.0	XXX	0

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
31-4259550	Motorists Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1182357	Allied World Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	American Agricultural Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1430254	Arch Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	Axis Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2994662	Coliseum Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2114545	Continental Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38-2145898	Dorinco Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	Employers Mutual Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	General Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0383750	Hartford Fire Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	Munich Reinsurance America, Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0698507	Odyssey Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	Partner Reinsurance Company Of The US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3531373	PartnerRe Insurance Company Of NY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-1641984	QBE Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	Renaissance Reinsurance US, Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0613000	Shelter Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
41-0406690	St Paul Fire & Marine Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	Swiss Reinsurance America Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991500	Illinois Mine Subsidence Insurance Fund	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999. Total Authorized - Pools - Mandatory Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9995035	Mutual Reinsurance Bureau	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1199999. Total Authorized - Pools - Voluntary Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120337	Aspen Insurance UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194122	DaVinci Reinsurance Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	Lloyd's Syndicate Number 0623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120156	Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1129000	Lloyd's Syndicate Number 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120184	Lloyd's Syndicate Number 3268	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126005	Lloyd's Syndicate Number 4000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unrecoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
AA-1120181	Lloyd's Syndicate Number 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190829	Markel Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190339	Renaissance Reinsurance Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190932	Argo Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190770	Chubb Tempest Reinsurance Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120191	Convex Insurance UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120175	Fidelis Underwriting Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190	Hamilton Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191298	Qatar Reinsurance Company Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340004	R+V Versicherung AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191388	Vermeer Reinsurance Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190757	XL Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999	Total Unauthorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
3699999	Total Certified - Affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
CR-1340125	Hannover Ruckversicherungs AG	2	09/23/2014	10.0		1,393	139	100.0	100.0	0	1,393	0	0	0	0	0	0	
4099999	Total Certified - Other Non-U.S. Insurers			XXX	0	1,393	139	XXX	XXX	0	1,393	0	0	0	0	0	0	
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	1,393	139	XXX	XXX	0	1,393	0	0	0	0	0	0	
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX	0	1,393	139	XXX	XXX	0	1,393	0	0	0	0	0	0	
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999	Totals			XXX	0	1,393	139	XXX	XXX	0	1,393	0	0	0	0	0	0	

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
31-4259550	Motorists Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1182357	Allied World Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2661954	American Agricultural Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1430254	Arch Reinsurance Company	10	XXX	XXX	0	12	12	XXX	XXX	12
51-0434766	Axis Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2994862	Coliseum Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2114545	Continental Casualty Company	0	XXX	XXX	0	0	0	XXX	XXX	0
38-2145898	Dorinco Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0234980	Employers Mutual Casualty Company	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057	Everest Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2673100	General Reinsurance Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
06-0383750	Hartford Fire Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-4924125	Munich Reinsurance America, Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0698507	Odyssey Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3031176	Partner Reinsurance Company Of The US	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3531373	PartnerRe Insurance Company Of NY	0	XXX	XXX	0	0	0	XXX	XXX	0
23-1641984	QBE Reinsurance Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
52-1952955	Renaissance Reinsurance US, Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
43-0613000	Shelter Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
41-0406690	St Paul Fire & Marine Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	Swiss Reinsurance America Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	10	XXX	XXX	0	12	12	XXX	XXX	12
AA-9991500	Illinois Mine Subsidence Insurance Fund	0	XXX	XXX	0	0	0	XXX	XXX	0
1099999	Total Authorized - Pools - Mandatory Pools	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9995035	Mutual Reinsurance Bureau	0	XXX	XXX	0	0	0	XXX	XXX	0
1199999	Total Authorized - Pools - Voluntary Pools	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120337	Aspen Insurance UK Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3194122	DaVinci Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126623	Lloyd's Syndicate Number 0623	0	XXX	XXX	0	1	1	XXX	XXX	1
AA-1120156	Lloyd's Syndicate Number 1686	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120157	Lloyd's Syndicate Number 1729	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120171	Lloyd's Syndicate Number 1856	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128623	Lloyd's Syndicate Number 2623	1	XXX	XXX	0	6	6	XXX	XXX	6
AA-1128791	Lloyd's Syndicate Number 2791	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1129000	Lloyd's Syndicate Number 3000	2	XXX	XXX	0	3	3	XXX	XXX	3
AA-1120184	Lloyd's Syndicate Number 3268	0	XXX	XXX	0	0	0	XXX	XXX	0

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ((Col. 47 * 20%) + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1126005	Lloyd's Syndicate Number 4000	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120181	Lloyd's Syndicate Number 5886	1	XXX	XXX	0	3	3	XXX	XXX	3
AA-3190829	Markel Bermuda Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190339	Renaissance Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999	Total Authorized - Other Non-U.S. Insurers	4	XXX	XXX	0	14	14	XXX	XXX	14
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	14	XXX	XXX	0	25	25	XXX	XXX	25
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190932	Argo Re Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190770	Chubb Tempest Reinsurance Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1120191	Convex Insurance UK Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1120175	Fidelis Underwriting Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191190	Hamilton Re Ltd	0	2	0	XXX	XXX	XXX	2	XXX	2
AA-3191298	Qatar Reinsurance Company Ltd	0	7	0	XXX	XXX	XXX	7	XXX	7
AA-1340004	R+V Versicherung AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191388	Vermeer Reinsurance Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190757	XL Re Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	9	9	0	XXX	XXX	XXX	9	XXX	9
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	9	0	XXX	XXX	XXX	9	XXX	9
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
CR-1340125	Hannover Ruckversicherungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4099999	Total Certified - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	XXX	XXX	0

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

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		14	9	0	0	25	25	9	0	35
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0
9999999 Totals		14	9	0	0	25	25	9	0	35

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

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
0001	1	021000089	Citibank Europe PLC	.5
0002	1	021000089	Citibank Europe PLC	.11
0003	1	021000021	Landesbank Baden-Württemberg, New York Branch	.7
0004	1	026015037	Lloyds Bank Corporate Markets	.5
0005	1	021000089	Citibank Europe PLC	26
0006	2	026009632	MUFG Bank, LTD	.7
0006	2	026002574	Barclays Bank PLC, NY, NY	.7
0006	2	021000089	Citibank, N.A. NY, NY	.7
0006	2	026009179	Credit Suisse	.4
0006	2	021001033	Deutsche Bank AG, NY, NY	.4
0006	2	021001088	HSBC Bank USA, N.A., NY	.7
0006	2	026014601	Goldman Sachs Bank USA	.4
0006	2	021000021	JPMorgan Chase Bank, N.A.	.4
0006	2	026014630	Morgan Stanley Bank, N.A.	.4
0006	2	021000018	The Bank of New York Mellon	.4
0006	2	121000248	Wells Fargo Bank, N.A.	.7
Total				118

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

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.
2.
3.
4.
5.

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	Motorists Mutual Insurance Company	35,016	14,504	Yes [X] No []
7.	Munich Reinsurance America, Inc	2,248	2	Yes [] No [X]
8.	Hannover Ruckversicherungs AG	1,393	18	Yes [] No [X]
9.	Coliseum Reinsurance Company	1,143	0	Yes [] No [X]
10.	Swiss Reinsurance America Corporation	954	9	Yes [] No [X]

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	67,144,234	0	67,144,234
2. Premiums and considerations (Line 15)	5,821,377	0	5,821,377
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	1,950,921	(1,950,920)	1
4. Funds held by or deposited with reinsured companies (Line 16.2)	15,956,363	0	15,956,363
5. Other assets	1,029,522	(644,170)	385,352
6. Net amount recoverable from reinsurers		41,514,384	41,514,384
7. Protected cell assets (Line 27)	0	0	0
8. Totals (Line 28)	91,902,417	38,919,294	130,821,711
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	34,828,877	35,213,838	70,042,715
10. Taxes, expenses, and other obligations (Lines 4 through 8)	3,280,105	357,843	3,637,948
11. Unearned premiums (Line 9)	8,657,981	7,282,952	15,940,934
12. Advance premiums (Line 10)	110,474	0	110,474
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	1,539,613	(1,538,469)	1,144
15. Funds held by company under reinsurance treaties (Line 13)	4,549,847	(4,549,847)	0
16. Amounts withheld or retained by company for account of others (Line 14)	109,616	0	109,616
17. Provision for reinsurance (Line 16)	34,586	(34,586)	0
18. Other liabilities	480,074	2,187,562	2,667,637
19. Total liabilities excluding protected cell business (Line 26)	53,591,173	38,919,294	92,510,467
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	38,311,245	XXX	38,311,245
22. Totals (Line 38)	91,902,418	38,919,294	130,821,712

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [X] No []

If yes, give full explanation: The company cedes to its affiliate, Motorists Mutual Insurance Company, through a 100% intercompany pooling arrangement. Reference Note 26 in the Notes to Financial Statements for more information.

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	2	0	0	0	0	0	0	2	XXX
2. 2012.....	2,435	147	2,288	1,598	97	20	0	278	2	17	1,796	285
3. 2013.....	2,465	138	2,326	1,324	34	13	0	216	0	13	1,519	204
4. 2014.....	2,509	160	2,349	1,384	0	18	0	200	0	25	1,602	188
5. 2015.....	2,424	149	2,275	1,138	3	27	0	167	0	22	1,328	144
6. 2016.....	2,207	110	2,096	1,012	0	16	0	141	0	13	1,169	124
7. 2017.....	1,987	62	1,926	1,428	86	20	0	207	0	12	1,570	148
8. 2018.....	1,844	68	1,776	884	0	15	0	154	0	16	1,054	156
9. 2019.....	1,687	61	1,626	982	18	36	0	155	0	11	1,155	173
10. 2020.....	1,509	68	1,441	1,039	52	1	0	194	0	7	1,182	105
11. 2021.....	1,382	66	1,316	469	0	1	0	178	0	1	648	54
12. Totals	XXX	XXX	XXX	11,259	290	168	0	1,890	2	136	13,025	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	1	0	0	0	0	0	0	0	0	0	(1)	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	2	0	0	0	0	0	0	0	0	0	0	1	0
4. 2014.....	1	0	0	0	0	0	0	0	0	0	0	1	0
5. 2015.....	5	0	0	0	0	0	0	0	0	0	0	5	0
6. 2016.....	2	0	1	0	0	0	0	0	0	0	0	3	0
7. 2017.....	5	0	0	0	0	0	0	0	0	0	0	6	0
8. 2018.....	11	0	1	0	0	0	0	0	1	0	0	13	0
9. 2019.....	9	0	2	0	0	0	2	0	1	0	0	14	1
10. 2020.....	44	3	3	0	0	0	3	0	3	0	0	50	2
11. 2021.....	126	0	39	0	0	0	6	0	24	0	0	196	9
12. Totals	205	4	47	0	0	0	12	0	30	0	0	289	12

	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
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	(1)	0
2. 2012.....	1,896	99	1,797	77.9	67.6	78.5	0	0	1.7	0	0
3. 2013.....	1,555	34	1,521	63.1	24.6	65.4	0	0	1.7	1	0
4. 2014.....	1,603	0	1,603	63.9	0.0	68.2	0	0	1.7	1	0
5. 2015.....	1,336	3	1,333	55.1	2.0	58.6	0	0	1.7	5	0
6. 2016.....	1,172	0	1,172	53.1	0.0	55.9	0	0	1.7	3	1
7. 2017.....	1,662	86	1,576	83.6	138.8	81.9	0	0	1.7	6	0
8. 2018.....	1,066	0	1,066	57.8	0.0	60.1	0	0	1.7	12	1
9. 2019.....	1,187	19	1,169	70.4	30.4	71.9	0	0	1.7	11	3
10. 2020.....	1,287	55	1,232	85.3	80.9	85.5	0	0	1.7	44	6
11. 2021.....	844	0	844	61.1	0.1	64.1	0	0	1.7	165	30
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	247	42

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX	XXX	XXX	45	38	0	0	0				0	1	7	XXX
2. 2012.....	1,867	15	1,851	1,233	3	60	0	201	0	47	1,491	305
3. 2013.....	1,908	17	1,891	1,196	2	61	0	237	0	55	1,492	304
4. 2014.....	2,006	39	1,967	1,297	0	60	0	242	0	61	1,600	315
5. 2015.....	2,062	33	2,029	1,222	0	66	0	237	0	43	1,525	278
6. 2016.....	1,780	23	1,757	1,026	0	58	0	211	0	38	1,295	227
7. 2017.....	1,538	0	1,539	846	0	39	0	125	0	28	1,010	185
8. 2018.....	1,317	0	1,317	713	0	28	0	115	0	25	856	298
9. 2019.....	1,158	0	1,158	571	1	38	0	129	0	19	737	240
10. 2020.....	976	0	976	303	(1)	4	0	118	0	13	427	67
11. 2021.....	837	0	837	196	0	4	0	96	0	5	296	33
12. Totals	XXX	XXX	XXX	8,647	43	419	0	1,712	0	334	10,734	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
	1. Prior.....	625	612	0	0	0	0	0	0	2				0	0	16	1
2. 2012.....	3	0	0	0	0	0	0	0	0	0	0	4	0
3. 2013.....	1	0	0	0	0	0	0	0	0	0	0	1	0
4. 2014.....	4	0	1	0	0	0	0	0	0	0	0	5	0
5. 2015.....	7	0	2	0	0	0	0	0	1	0	0	11	0
6. 2016.....	19	0	3	0	0	0	2	0	1	0	0	25	0
7. 2017.....	24	0	3	0	1	0	3	0	2	0	0	32	1
8. 2018.....	54	0	1	0	1	0	5	0	4	0	0	66	1
9. 2019.....	84	0	9	0	1	0	15	0	8	0	0	115	2
10. 2020.....	138	0	27	0	1	0	18	0	13	0	0	197	3
11. 2021.....	210	0	69	0	0	0	19	0	45	0	0	343	11
12. Totals	1,169	612	114	0	3	0	63	0	77	0	0	814	19

	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
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	14	2
2. 2012.....	1,498	3	1,494	80.2	21.8	80.7	0	0	1.7	3	0
3. 2013.....	1,495	2	1,493	78.4	11.1	79.0	0	0	1.7	1	0
4. 2014.....	1,605	0	1,605	80.0	0.0	81.6	0	0	1.7	5	0
5. 2015.....	1,536	0	1,536	74.5	0.0	75.7	0	0	1.7	9	2
6. 2016.....	1,319	0	1,319	74.1	0.0	75.1	0	0	1.7	22	3
7. 2017.....	1,043	0	1,043	67.8	0.0	67.8	0	0	1.7	26	6
8. 2018.....	921	0	921	69.9	0.0	69.9	0	0	1.7	55	10
9. 2019.....	853	1	852	73.7	0.0	73.6	0	0	1.7	92	23
10. 2020.....	623	(1)	624	63.8	0.0	63.9	0	0	1.7	166	31
11. 2021.....	639	0	639	76.4	0.0	76.4	0	0	1.7	279	65
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	671	143

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	3	0	2	0	0	0	0	5	XXX
2. 2012.....	1,262	17	1,245	751	45	96	0	78	0	12	879	98
3. 2013.....	1,305	23	1,282	826	138	91	0	96	0	11	874	105
4. 2014.....	1,353	34	1,319	893	51	86	1	109	0	15	1,037	116
5. 2015.....	1,424	27	1,397	983	7	93	0	128	0	10	1,197	124
6. 2016.....	1,583	25	1,557	1,090	25	89	2	154	0	13	1,306	137
7. 2017.....	1,735	1	1,734	998	21	98	1	152	0	12	1,226	143
8. 2018.....	1,843	0	1,843	1,072	26	95	4	154	0	20	1,291	792
9. 2019.....	1,917	1	1,917	845	17	85	0	160	0	19	1,072	762
10. 2020.....	2,068	4	2,063	501	0	17	0	189	0	17	706	47
11. 2021.....	2,220	71	2,149	274	0	6	0	190	0	10	470	100
12. Totals	XXX	XXX	XXX	8,238	331	757	8	1,409	0	140	10,064	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	6	2	0	0	0	0	0	0	1	0	0	6	0
2. 2012.....	2	0	0	0	0	0	0	0	0	0	0	3	0
3. 2013.....	18	12	1	1	3	0	0	0	0	0	0	10	0
4. 2014.....	4	0	0	0	1	0	0	0	1	0	0	7	0
5. 2015.....	51	8	7	1	1	0	1	0	2	0	0	54	1
6. 2016.....	84	41	10	3	1	0	3	0	4	0	0	59	1
7. 2017.....	201	72	25	5	2	0	8	0	7	0	0	166	2
8. 2018.....	253	8	68	6	3	0	16	0	22	0	0	347	3
9. 2019.....	344	0	166	20	3	0	47	0	37	0	0	575	5
10. 2020.....	323	9	335	11	0	0	82	0	67	0	0	787	6
11. 2021.....	315	0	721	0	0	0	148	0	263	0	0	1,448	23
12. Totals	1,603	153	1,334	46	14	0	306	0	405	0	0	3,462	42

	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
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	5	1
2. 2012.....	927	45	881	73.4	266.0	70.8	0	0	1.7	2	0
3. 2013.....	1,036	152	885	79.4	666.7	69.0	0	0	1.7	7	4
4. 2014.....	1,095	51	1,044	80.9	149.0	79.1	0	0	1.7	5	2
5. 2015.....	1,267	16	1,251	89.0	59.4	89.6	0	0	1.7	50	4
6. 2016.....	1,436	71	1,365	90.7	281.5	87.6	0	0	1.7	50	9
7. 2017.....	1,491	99	1,392	86.0	11,382.4	80.3	0	0	1.7	150	17
8. 2018.....	1,683	44	1,639	91.3	13,668.4	88.9	0	0	1.7	307	41
9. 2019.....	1,685	38	1,647	87.9	6,032.4	85.9	0	0	1.7	489	86
10. 2020.....	1,514	20	1,493	73.2	492.9	72.4	0	0	1.7	638	149
11. 2021.....	1,918	0	1,918	86.4	0.0	89.3	0	0	1.7	1,037	411
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2,739	724

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

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

(\$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	184	28	15	1	1	0	5	171	XXX
2. 2012	6,505	965	5,541	3,322	576	530	135	566	61	54	3,647	282
3. 2013	7,593	1,245	6,348	4,066	836	648	180	641	76	45	4,262	299
4. 2014	8,127	1,536	6,591	3,949	859	684	214	607	90	52	4,075	306
5. 2015	7,510	1,992	5,518	3,195	894	568	197	505	84	39	3,093	278
6. 2016	7,972	1,564	6,408	3,049	599	512	106	548	91	44	3,314	323
7. 2017	8,495	915	7,580	2,945	154	451	27	620	78	34	3,757	325
8. 2018	7,505	81	7,423	2,851	0	361	0	460	0	34	3,672	1,440
9. 2019	7,662	69	7,593	2,513	0	364	0	583	0	23	3,460	2,562
10. 2020	7,966	73	7,893	2,228	(1)	179	0	868	0	6	3,276	323
11. 2021	8,214	118	8,096	1,153	0	66	0	851	0	2	2,070	331
12. Totals	XXX	XXX	XXX	29,456	3,944	4,376	860	6,250	480	337	34,798	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	2,662	299	1,211	258	45	1	62	37	90	20	0	3,454	12
2. 2012	550	26	334	139	15	1	30	20	16	4	0	755	2
3. 2013	785	25	622	303	23	1	68	45	27	8	0	1,144	6
4. 2014	726	7	604	300	27	1	75	48	42	12	0	1,106	8
5. 2015	669	32	603	129	26	1	63	18	43	9	0	1,216	21
6. 2016	362	5	582	51	12	0	66	14	51	3	0	1,001	19
7. 2017	484	0	536	0	22	0	55	0	39	0	0	1,136	23
8. 2018	567	0	726	0	31	0	99	0	52	0	0	1,475	30
9. 2019	804	0	921	0	63	0	114	0	93	0	0	1,995	32
10. 2020	1,428	0	1,490	0	108	0	148	0	209	0	0	3,383	43
11. 2021	2,372	0	2,758	0	193	0	247	0	740	0	0	6,309	88
12. Totals	11,410	393	10,387	1,181	564	6	1,027	181	1,402	56	0	22,972	284

	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		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,315	138		
2. 2012	5,363	961	4,402	82.4	99.6	79.5	0	0	1.7	719	36		
3. 2013	6,880	1,474	5,406	90.6	118.4	85.2	0	0	1.7	1,080	64		
4. 2014	6,714	1,532	5,182	82.6	99.8	78.6	0	0	1.7	1,023	83		
5. 2015	5,672	1,363	4,309	75.5	68.4	78.1	0	0	1.7	1,111	105		
6. 2016	5,183	868	4,315	65.0	55.5	67.3	0	0	1.7	888	113		
7. 2017	5,152	259	4,893	60.6	28.4	64.5	0	0	1.7	1,019	116		
8. 2018	5,147	0	5,147	68.6	0.0	69.3	0	0	1.7	1,293	181		
9. 2019	5,455	0	5,455	71.2	0.0	71.8	0	0	1.7	1,725	269		
10. 2020	6,658	(1)	6,659	83.6	(1.4)	84.4	0	0	1.7	2,918	465		
11. 2021	8,379	0	8,379	102.0	0.0	103.5	0	0	1.7	5,130	1,179		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	20,223	2,749		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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					
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
										4				5	6	7	8	9
1. Prior	XXX	XXX	XXX	(1)	0	2	0	0	0	1	1	XXX	
2. 2012	1,209	124	1,085	694	38	18	0	71	1	28	744	82	
3. 2013	1,290	144	1,147	576	7	19	0	63	0	18	651	64	
4. 2014	1,373	153	1,220	709	31	15	0	67	0	9	760	67	
5. 2015	1,450	160	1,291	925	221	16	0	61	2	31	780	53	
6. 2016	1,512	97	1,415	649	16	13	0	72	0	39	717	52	
7. 2017	1,528	70	1,459	774	56	17	0	146	0	35	881	58	
8. 2018	1,551	61	1,491	784	70	21	0	115	0	24	849	97	
9. 2019	1,834	89	1,745	1,112	111	38	0	77	0	28	1,116	113	
10. 2020	2,594	129	2,465	1,029	34	33	0	260	0	26	1,287	31	
11. 2021	3,109	190	2,919	612	1	4	0	271	0	5	887	53	
12. Totals	XXX	XXX	XXX	7,862	585	197	0	1,202	3	244	8,672	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
									13	14			
1. Prior	27	0	48	0	0	0	1	0	2	0	0	77	1
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	1	0	0	0	0	0	0	0	0	0	0	1	0
4. 2014	2	0	0	0	0	0	0	0	1	0	0	3	0
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017	11	0	3	0	0	0	0	0	0	0	0	14	0
8. 2018	20	0	5	0	0	0	1	0	2	0	0	27	1
9. 2019	89	0	33	0	0	0	4	0	4	0	0	130	2
10. 2020	259	21	249	0	0	0	8	0	33	0	0	528	6
11. 2021	499	46	512	0	0	0	66	0	234	0	0	1,266	15
12. Totals	907	67	849	0	0	0	80	0	277	0	0	2,047	25

	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
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	74	2
2. 2012	783	39	745	64.8	31.2	68.7	0	0	1.7	0	0
3. 2013	659	7	652	51.1	5.1	56.8	0	0	1.7	1	0
4. 2014	793	31	762	57.8	20.0	62.5	0	0	1.7	2	1
5. 2015	1,003	223	780	69.1	139.5	60.4	0	0	1.7	0	0
6. 2016	734	16	718	48.5	16.7	50.7	0	0	1.7	0	0
7. 2017	952	56	896	62.3	80.5	61.4	0	0	1.7	14	1
8. 2018	946	70	876	61.0	116.1	58.8	0	0	1.7	24	3
9. 2019	1,357	111	1,246	74.0	125.1	71.4	0	0	1.7	122	8
10. 2020	1,871	56	1,816	72.1	43.0	73.7	0	0	1.7	487	41
11. 2021	2,198	46	2,152	70.7	24.4	73.7	0	0	1.7	965	301
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,690	357

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
	Direct and Assumed	Ceded	Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	XXX
2. 2012	63	40	23	22	19	0	0	1	0	0	0	4	XXX
3. 2013	68	46	23	19	15	0	0	1	0	0	0	5	XXX
4. 2014	73	50	23	21	18	0	0	1	0	0	0	4	XXX
5. 2015	77	55	22	23	19	0	0	1	0	0	0	5	XXX
6. 2016	84	61	23	27	24	0	0	1	0	0	0	5	XXX
7. 2017	89	66	24	29	27	1	0	7	0	0	0	11	XXX
8. 2018	92	69	23	23	21	0	0	6	0	0	0	9	XXX
9. 2019	90	71	19	20	19	1	0	3	0	2	5	XXX	
10. 2020	95	78	16	22	20	0	0	8	0	0	10	XXX	
11. 2021	96	87	9	21	19	0	0	8	0	0	10	XXX	
12. Totals	XXX	XXX	XXX	228	201	3	0	38	0	2	68	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021	4	0	0	0	0	0	0	0	0	0	0	5	0
12. Totals	4	0	0	0	0	0	0	0	0	0	0	5	0

	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	27	28	29	30	31	32	33		35	36
	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	0	0
2. 2012	23	19	4	36.6	48.6	16.1	0	0	1.7	0	0
3. 2013	20	15	5	28.9	32.4	22.1	0	0	1.7	0	0
4. 2014	23	18	4	30.9	36.8	18.0	0	0	1.7	0	0
5. 2015	24	19	5	31.0	34.2	23.3	0	0	1.7	0	0
6. 2016	29	24	5	34.4	38.8	22.8	0	0	1.7	0	0
7. 2017	38	27	11	42.4	40.6	47.4	0	0	1.7	0	0
8. 2018	30	21	9	32.6	31.0	37.7	0	0	1.7	0	0
9. 2019	24	19	5	26.5	26.8	25.4	0	0	1.7	0	0
10. 2020	30	20	10	31.8	25.5	61.5	0	0	1.7	0	0
11. 2021	33	19	14	34.9	22.3	151.5	0	0	1.7	5	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	5	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	12	0	8	0	0	0	0	21	XXX
2. 2012	1,087	39	1,048	394	3	118	0	50	0	3	559	39
3. 2013	1,173	50	1,123	484	17	106	0	60	0	2	633	41
4. 2014	1,272	58	1,213	394	3	126	0	66	0	4	583	44
5. 2015	1,406	74	1,332	632	92	164	4	87	0	3	788	49
6. 2016	1,608	151	1,458	621	44	165	10	111	0	4	843	52
7. 2017	1,748	153	1,594	637	86	146	0	116	0	4	813	57
8. 2018	1,742	135	1,608	677	88	98	0	100	0	4	787	486
9. 2019	1,541	141	1,401	405	87	58	0	61	0	3	436	442
10. 2020	984	96	888	(29)	2	8	0	92	0	0	69	8
11. 2021	839	58	780	7	1	0	0	69	0	0	75	1
12. Totals	XXX	XXX	XXX	4,235	422	997	15	813	0	27	5,607	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	49	0	71	0	4	0	15	0	20	0	0	159	3
2. 2012	9	0	2	0	0	0	1	0	2	0	0	14	0
3. 2013	11	0	4	0	0	0	2	0	1	0	0	18	0
4. 2014	11	0	4	0	0	0	4	0	1	0	0	19	0
5. 2015	32	0	16	0	0	0	8	0	4	0	0	62	1
6. 2016	85	1	31	0	0	0	18	0	10	0	0	143	1
7. 2017	122	0	63	0	0	0	34	0	15	0	0	234	3
8. 2018	249	27	84	0	0	0	53	0	36	0	0	395	3
9. 2019	183	2	178	0	1	0	82	0	52	0	0	493	3
10. 2020	186	51	230	0	1	0	107	0	56	0	0	529	1
11. 2021	154	35	286	0	0	0	134	0	69	0	0	609	1
12. Totals	1,091	115	969	0	5	0	460	0	266	0	0	2,676	16

	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
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	120	39
2. 2012	576	3	573	52.9	6.4	54.7	0	0	1.7	11	3
3. 2013	669	17	652	57.0	33.7	58.1	0	0	1.7	15	4
4. 2014	605	3	602	47.6	5.8	49.6	0	0	1.7	15	5
5. 2015	945	96	849	67.2	129.8	63.8	0	0	1.7	49	13
6. 2016	1,041	55	987	64.7	36.2	67.7	0	0	1.7	116	28
7. 2017	1,134	86	1,047	64.9	56.3	65.7	0	0	1.7	184	50
8. 2018	1,298	116	1,182	74.5	85.9	73.6	0	0	1.7	306	89
9. 2019	1,019	89	930	66.1	63.5	66.4	0	0	1.7	359	134
10. 2020	650	52	597	66.0	54.7	67.3	0	0	1.7	365	164
11. 2021	720	36	684	85.8	61.8	87.6	0	0	1.7	405	204
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,944	731

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012	8	0	8	4	0	1	0	0	0	0	0	5
3. 2013	12	0	12	5	0	1	0	0	0	0	0	7
4. 2014	10	0	10	4	0	1	0	0	0	0	0	6
5. 2015	8	0	8	2	0	1	0	0	0	0	0	2
6. 2016	4	0	4	1	0	0	0	0	0	0	0	1
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	3	0	3	2	0	0	0	0	0	0	0	3
9. 2019	18	2	16	1	0	0	0	0	0	0	0	2
10. 2020	64	29	35	6	0	2	0	6	0	0	0	14
11. 2021	83	52	31	2	0	0	0	7	0	0	0	9
12. Totals	XXX	XXX	XXX	27	0	7	0	13	0	0	0	47

	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	0	0	2	0	0	0	0	0	0	0	0	2	0
9. 2019	0	0	2	0	0	0	1	0	1	0	0	3	0
10. 2020	5	0	19	0	0	0	3	0	3	0	0	30	0
11. 2021	8	0	32	0	0	0	12	0	7	0	0	59	0
12. Totals	13	0	54	0	0	0	16	0	11	0	0	93	1

	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
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2012	5	0	5	57.3	0.0	57.3	0	0	1.7	0	0
3. 2013	7	0	7	58.6	0.0	58.6	0	0	1.7	0	0
4. 2014	6	0	6	55.9	0.0	55.9	0	0	1.7	0	0
5. 2015	2	0	2	25.4	0.0	25.4	0	0	1.7	0	0
6. 2016	1	0	1	25.9	0.0	25.9	0	0	1.7	0	0
7. 2017	0	0	0	35.3	0.0	35.3	0	0	1.7	0	0
8. 2018	4	0	4	132.6	0.0	132.6	0	0	1.7	2	0
9. 2019	5	0	5	28.3	1.5	32.2	0	0	1.7	2	2
10. 2020	43	0	43	68.1	0.0	124.5	0	0	1.7	24	6
11. 2021	68	0	68	81.2	0.0	216.5	0	0	1.7	40	19
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	67	26

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)
(\$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	2	3	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	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	(5)	0	0	0	0	0	8	(5)	XXX
2. 2020	558	16	542	229	3	0	0	50	0	5	277	XXX
3. 2021	502	14	488	161	0	0	0	46	0	6	207	XXX
4. Totals	XXX	XXX	XXX	385	3	0	0	96	0	19	479	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		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	4	1	0	0	0	0	0	0	0	0	0	4	1
2. 2020	8	0	1	0	0	0	0	1	0	0	0	9	0
3. 2021	44	0	11	0	0	0	1	10	0	0	0	66	2
4. Totals	56	1	12	0	0	0	1	11	0	0	0	79	3

	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	27	28	29	30	31	32	33		35	36
	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	0
2. 2020	289	3	287	51.8	17.3	52.8	0	0	1.7	8	1
3. 2021	273	0	273	54.3	0.0	55.9	0	0	1.7	55	11
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	67	12

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$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	(11)	0	3	0	0	0	17	(8)	XXX
2. 2020	1,693	72	1,621	899	36	1	0	188	0	150	1,052	350
3. 2021	1,515	45	1,471	814	0	0	0	157	0	99	971	259
4. Totals	XXX	XXX	XXX	1,702	36	4	0	345	0	266	2,014	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		Other Unpaid				
	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	2	0	0	0	0	0	0	0	0	0	0	3	3
2. 2020	3	0	0	0	0	0	0	0	0	0	0	3	4
3. 2021	70	1	6	0	0	0	1	0	12	0	0	88	30
4. Totals	75	1	6	0	0	0	1	0	13	0	0	95	37

	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
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	2	1
2. 2020	1,092	36	1,055	64.5	50.6	65.1	0	0	1.7	3	1
3. 2021	1,060	1	1,059	69.9	1.3	72.0	0	0	1.7	75	13
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	80	15

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1K - FIDELITY/SURETY
(\$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	0	0	0	0	0	0	0	0	XXX
2. 2020	4	0	4	5	0	0	0	0	0	0	0	XXX
3. 2021	0	0	0	0	0	0	0	0	0	0	0	XXX
4. Totals	XXX	XXX	XXX	5	0	0	0	0	0	0	0	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		Adjusting and Other Unpaid				
	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	1	0	0	0	0	0	0	0	0	0	0	1	0
2. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals	1	0	0	0	0	0	0	0	0	0	0	1	0

	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
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	1	0
2. 2020	5	0	5	130.0	0.0	130.0	0	0	1.7	0	0
3. 2021	0	0	0	0.0	0.0	0.0	0	0	1.7	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1	0

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	2	0	0	0	0	0	0	2	XXX
2. 2012	163	0	163	95	0	5	0	0	0	0	99	XXX
3. 2013	131	0	131	62	0	4	0	0	0	0	66	XXX
4. 2014	111	0	111	53	0	3	0	0	0	0	56	XXX
5. 2015	100	0	100	40	0	3	0	0	0	0	43	XXX
6. 2016	97	0	97	65	0	3	0	0	0	0	69	XXX
7. 2017	80	0	80	57	0	3	0	0	0	0	60	XXX
8. 2018	77	0	77	100	0	3	0	0	0	0	104	XXX
9. 2019	102	0	102	76	0	1	0	1	0	0	77	XXX
10. 2020	115	0	115	108	0	0	0	2	0	0	110	XXX
11. 2021	136	0	136	29	0	0	0	1	0	0	30	XXX
12. Totals	XXX	XXX	XXX	688	0	24	0	4	0	0	716	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	1	2	9	18	0	0	0	0	0	0	0	(9)	XXX
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013	0	0	0	0	0	0	0	0	0	0	0	1	XXX
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015	1	0	0	0	0	0	0	0	0	0	0	2	XXX
6. 2016	1	0	0	0	0	0	0	0	0	0	0	1	XXX
7. 2017	3	0	0	0	0	0	0	0	0	0	0	4	XXX
8. 2018	7	0	0	0	0	0	0	0	0	0	0	7	XXX
9. 2019	14	0	0	0	0	0	0	0	0	0	0	15	XXX
10. 2020	21	0	1	0	1	0	0	0	0	0	0	23	XXX
11. 2021	51	0	27	0	1	0	0	0	0	0	0	79	XXX
12. Totals	100	2	38	18	4	0	0	0	0	0	0	122	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
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	(10)	0
2. 2012	99	0	99	61.1	0.0	61.1	0	0	1.7	0	0
3. 2013	67	0	67	51.1	0.0	51.1	0	0	1.7	0	0
4. 2014	57	0	57	51.1	0.0	51.1	0	0	1.7	0	0
5. 2015	45	0	45	44.6	0.0	44.6	0	0	1.7	1	0
6. 2016	70	0	70	71.7	0.0	71.7	0	0	1.7	1	0
7. 2017	64	0	64	80.0	0.0	80.0	0	0	1.7	3	0
8. 2018	110	0	110	144.1	0.0	144.1	0	0	1.7	7	0
9. 2019	92	0	92	90.1	0.0	90.1	0	0	1.7	14	0
10. 2020	133	0	133	116.1	0.0	116.1	0	0	1.7	22	1
11. 2021	109	0	109	79.9	0.0	79.9	0	0	1.7	78	1
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	118	4

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 10 - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	7	0	0	0	0	0	0	7	XXX
2. 2012.....	74	0	74	32	0	4	0	0	0	0	36	XXX
3. 2013.....	52	0	52	34	0	4	0	0	0	0	37	XXX
4. 2014.....	35	0	35	16	0	2	0	0	0	0	18	XXX
5. 2015.....	25	0	25	8	0	1	0	0	0	0	10	XXX
6. 2016.....	32	0	32	27	0	2	0	0	0	0	30	XXX
7. 2017.....	45	0	45	25	0	2	0	3	0	0	30	XXX
8. 2018.....	63	0	63	32	0	1	0	1	0	0	33	XXX
9. 2019.....	121	0	121	23	0	0	0	3	0	0	26	XXX
10. 2020.....	157	0	157	18	0	0	0	1	0	0	19	XXX
11. 2021.....	199	0	199	4	0	0	0	0	0	0	4	XXX
12. Totals	XXX	XXX	XXX	224	0	17	0	9	0	0	250	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		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	36	0	85	0	2	0	0	0	0	0	0	123	XXX
2. 2012.....	1	0	9	0	0	0	0	0	0	0	0	11	XXX
3. 2013.....	1	0	9	0	0	0	0	0	0	0	0	10	XXX
4. 2014.....	1	0	9	0	0	0	0	0	0	0	0	10	XXX
5. 2015.....	2	0	6	0	1	0	0	0	0	0	0	8	XXX
6. 2016.....	10	0	8	0	1	0	0	0	0	0	0	19	XXX
7. 2017.....	15	0	10	0	2	0	0	0	0	0	0	26	XXX
8. 2018.....	11	0	16	0	2	0	0	0	0	0	0	28	XXX
9. 2019.....	33	0	22	0	3	0	0	0	0	0	0	58	XXX
10. 2020.....	40	0	46	0	2	0	0	0	0	0	0	88	XXX
11. 2021.....	52	0	104	0	2	0	0	0	0	0	0	157	XXX
12. Totals	201	0	323	0	14	0	0	0	0	0	0	538	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
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	121	2
2. 2012.....	47	0	47	63.6	0.0	63.6	0	0	1.7	10	0
3. 2013.....	47	0	47	90.9	0.0	90.9	0	0	1.7	10	0
4. 2014.....	28	0	28	81.1	0.0	81.1	0	0	1.7	10	0
5. 2015.....	18	0	18	69.8	0.0	69.8	0	0	1.7	7	1
6. 2016.....	49	0	49	151.9	0.0	151.9	0	0	1.7	18	1
7. 2017.....	56	0	56	125.5	0.0	125.5	0	0	1.7	25	2
8. 2018.....	61	0	61	97.7	0.0	97.7	0	0	1.7	26	2
9. 2019.....	84	0	84	69.5	0.0	69.5	0	0	1.7	55	3
10. 2020.....	106	0	106	67.7	0.0	67.7	0	0	1.7	86	2
11. 2021.....	161	0	161	80.6	0.0	80.6	0	0	1.7	155	2
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	524	14

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1P - REINSURANCE - NONPROPORTIONAL ASSUMED FINANCIAL LINES
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2012												XXX
3. 2013												XXX
4. 2014												XXX
5. 2015												XXX
6. 2016												XXX
7. 2017												XXX
8. 2018												XXX
9. 2019												XXX
10. 2020												XXX
11. 2021												XXX
12. Totals	XXX	XXX	XXX									XXX

NONE

	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		Adjusting and Other Unpaid				
	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													XXX
2. 2012													XXX
3. 2013													XXX
4. 2014													XXX
5. 2015													XXX
6. 2016													XXX
7. 2017													XXX
8. 2018													XXX
9. 2019													XXX
10. 2020													XXX
11. 2021													XXX
12. Totals													XXX

NONE

	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
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2012											
3. 2013											
4. 2014											
5. 2015											
6. 2016											
7. 2017											
8. 2018											
9. 2019											
10. 2020											
11. 2021											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	3	63	13	0	(2)	0	0	(49)	XXX
2. 2012.....	78	0	78	38	0	17	0	3	0	0	58	2
3. 2013.....	87	0	87	28	0	12	0	4	0	0	44	2
4. 2014.....	95	1	94	21	0	9	0	4	0	0	34	2
5. 2015.....	108	2	106	37	0	20	0	8	0	0	65	3
6. 2016.....	118	2	116	11	0	16	0	7	0	0	34	3
7. 2017.....	125	0	125	27	0	13	0	9	0	0	49	3
8. 2018.....	123	0	123	16	0	14	0	11	0	0	40	47
9. 2019.....	85	1	84	7	0	17	0	8	0	0	32	42
10. 2020.....	30	0	30	0	0	0	0	2	0	0	3	0
11. 2021.....	7	0	7	1	0	0	0	4	0	0	5	0
12. Totals	XXX	XXX	XXX	190	63	131	0	58	0	1	315	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.....	41	0	18	0	0	0	11	0	7	0	0	78	3
2. 2012.....	1	0	1	0	0	0	0	0	0	0	0	1	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	1	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	1	0
5. 2015.....	7	0	3	0	0	0	0	0	0	0	0	11	0
6. 2016.....	3	0	1	0	0	0	1	0	0	0	0	6	0
7. 2017.....	15	0	6	0	0	0	2	0	1	0	0	23	0
8. 2018.....	34	0	6	0	0	0	3	0	2	0	0	46	1
9. 2019.....	14	0	13	0	0	0	4	0	3	0	0	34	1
10. 2020.....	2	0	7	0	0	0	4	0	2	0	0	16	0
11. 2021.....	1	0	4	0	0	0	3	0	2	0	0	9	0
12. Totals	119	0	59	0	0	0	30	0	17	0	0	224	5

	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
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	59	19
2. 2012.....	60	0	60	76.4	0.0	76.7	0	0	1.7	1	0
3. 2013.....	44	0	44	50.6	0.0	50.8	0	0	1.7	0	0
4. 2014.....	34	0	34	36.4	0.0	36.8	0	0	1.7	0	0
5. 2015.....	76	0	76	70.3	0.0	71.7	0	0	1.7	10	1
6. 2016.....	40	0	40	33.7	0.0	34.3	0	0	1.7	4	2
7. 2017.....	72	0	72	57.7	0.0	57.8	0	0	1.7	21	2
8. 2018.....	86	0	86	69.8	0.0	69.8	0	0	1.7	40	5
9. 2019.....	66	0	66	77.6	0.0	78.8	0	0	1.7	27	7
10. 2020.....	18	0	18	61.4	0.0	62.0	0	0	1.7	9	6
11. 2021.....	14	0	14	193.2	0.0	194.1	0	0	1.7	4	5
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	177	47

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1T - WARRANTY
(\$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	0	0	0	0	0	0	0	0	XXX
2. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021.....	0	0	0	0	0	0	0	0	1	0	0	1
4. Totals	XXX	XXX	XXX	0	0	0	0	0	1	0	0	1

	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		Adjusting and Other Unpaid				
	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.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	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
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	0	0
2. 2020.....	0	0	0	0.0	0.0	0.0	0	0	1.7	0	0
3. 2021.....	1	0	1	0.0	0.0	0.0	0	0	1.7	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

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.....	178	174	174	174	175	175	176	175	176	176	0	1
2. 2012.....	1,505	1,508	1,505	1,509	1,512	1,515	1,520	1,524	1,521	1,521	0	(3)
3. 2013.....	XXX	1,321	1,311	1,300	1,301	1,305	1,305	1,307	1,305	1,305	0	(2)
4. 2014.....	XXX	XXX	1,325	1,334	1,375	1,372	1,352	1,353	1,404	1,403	(1)	50
5. 2015.....	XXX	XXX	XXX	1,139	1,152	1,174	1,166	1,164	1,165	1,166	1	2
6. 2016.....	XXX	XXX	XXX	XXX	1,026	1,061	1,037	1,034	1,036	1,031	(5)	(3)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,435	1,391	1,379	1,367	1,369	2	(10)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	919	915	916	912	(4)	(3)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,063	1,023	1,013	(11)	(50)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,005	1,035	30	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	641	XXX	XXX
12. Totals											13	(18)

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	785	763	749	735	732	729	728	727	725	738	13	11
2. 2012.....	1,359	1,325	1,285	1,281	1,304	1,300	1,299	1,294	1,289	1,293	3	(1)
3. 2013.....	XXX	1,284	1,296	1,258	1,259	1,255	1,254	1,250	1,256	1,256	0	6
4. 2014.....	XXX	XXX	1,391	1,342	1,358	1,363	1,329	1,321	1,362	1,362	0	40
5. 2015.....	XXX	XXX	XXX	1,375	1,320	1,321	1,296	1,299	1,294	1,298	4	(1)
6. 2016.....	XXX	XXX	XXX	XXX	1,252	1,190	1,143	1,120	1,107	1,108	0	(13)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,024	972	953	921	915	(6)	(38)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	819	808	809	802	(7)	(6)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	722	720	716	(5)	(6)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	512	493	(19)	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	498	XXX	XXX
12. Totals											(17)	(9)

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	1,140	1,053	1,014	999	1,016	1,013	1,005	1,002	1,006	1,007	1	4
2. 2012.....	863	791	798	809	819	815	807	805	803	804	0	(1)
3. 2013.....	XXX	827	721	717	720	775	779	787	788	789	1	1
4. 2014.....	XXX	XXX	782	808	842	896	881	909	938	934	(5)	24
5. 2015.....	XXX	XXX	XXX	969	979	1,124	1,124	1,102	1,103	1,121	18	19
6. 2016.....	XXX	XXX	XXX	XXX	996	1,237	1,257	1,246	1,237	1,207	(30)	(39)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,419	1,372	1,311	1,279	1,234	(46)	(78)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,546	1,590	1,573	1,463	(111)	(128)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,673	1,580	1,451	(129)	(222)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,355	1,237	(117)	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,465	XXX	XXX
12. Totals											(417)	(419)

**SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	13,215	12,472	11,634	10,139	9,431	8,032	8,320	7,559	7,329	6,896	(433)	(663)
2. 2012.....	4,390	4,338	4,073	4,061	3,847	3,704	3,723	3,772	3,865	3,884	19	112
3. 2013.....	XXX	5,164	5,303	5,259	5,005	4,782	4,634	4,635	4,815	4,822	7	187
4. 2014.....	XXX	XXX	5,256	5,398	5,258	4,969	4,814	4,801	4,821	4,636	(185)	(165)
5. 2015.....	XXX	XXX	XXX	4,643	4,647	4,297	4,048	3,854	3,807	3,854	47	0
6. 2016.....	XXX	XXX	XXX	XXX	5,187	5,176	4,561	4,185	3,838	3,809	(29)	(376)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	6,853	5,746	5,467	4,715	4,312	(404)	(1,155)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	5,713	6,179	5,370	4,635	(735)	(1,544)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,896	6,009	4,779	(1,230)	(1,117)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,601	5,581	(19)	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,788	XXX	XXX
12. Totals											(2,962)	(4,722)

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	400	373	340	353	349	347	341	353	326	259	(68)	(95)
2. 2012.....	694	681	678	671	673	675	674	674	674	674	0	0
3. 2013.....	XXX	627	597	591	591	592	588	587	588	588	0	1
4. 2014.....	XXX	XXX	665	695	678	685	673	672	695	695	0	23
5. 2015.....	XXX	XXX	XXX	761	700	727	726	721	721	721	0	(1)
6. 2016.....	XXX	XXX	XXX	XXX	658	675	663	652	646	646	0	(6)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	775	758	752	749	750	1	(2)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	762	753	752	760	8	7
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,130	1,137	1,165	28	35
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,523	1,523	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,647	XXX	XXX
12. Totals											(31)	(38)

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

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

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												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

Years in Which Losses Were Incurred	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	0	0	0	0	0	0	6	5	5	5	0	0
2. 2012	2	1	1	1	1	1	3	3	3	3	0	0
3. 2013	XXX	2	2	2	2	2	4	4	4	4	0	0
4. 2014	XXX	XXX	4	1	1	1	3	3	3	3	0	0
5. 2015	XXX	XXX	XXX	4	2	2	4	4	4	4	0	0
6. 2016	XXX	XXX	XXX	XXX	7	2	5	4	4	4	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	9	4	3	3	4	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	10	5	2	2	0	(3)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	3	2	(1)	(5)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	2	(1)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	XXX	XXX
12. Totals												(7)

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	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	1,214	1,177	1,124	1,070	1,064	1,079	1,116	1,110	1,155	1,288	134	178	
2. 2012	467	436	475	465	497	520	523	523	521	521	0	(2)	
3. 2013	XXX	515	490	510	569	574	593	585	577	590	13	5	
4. 2014	XXX	XXX	517	460	443	502	545	558	558	535	(22)	(23)	
5. 2015	XXX	XXX	XXX	679	701	719	740	774	773	758	(15)	(17)	
6. 2016	XXX	XXX	XXX	XXX	704	799	852	875	887	866	(21)	(9)	
7. 2017	XXX	XXX	XXX	XXX	XXX	865	917	911	943	916	(27)	5	
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	951	981	1,054	1,046	(8)	65	
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	821	858	817	(42)	(4)	
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	566	450	(117)	XXX	
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	546	XXX	XXX	
12. Totals												(105)	198

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

Years in Which Losses Were Incurred	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	0	(4)	(9)	(10)	(10)	(10)	(10)	(10)	(10)	(10)	0	0	
2. 2012	2	6	8	5	5	5	5	5	5	5	0	0	
3. 2013	XXX	2	7	7	7	7	7	7	7	7	0	0	
4. 2014	XXX	XXX	2	6	6	6	6	6	6	6	0	0	
5. 2015	XXX	XXX	XXX	1	2	2	2	2	2	2	0	0	
6. 2016	XXX	XXX	XXX	XXX	1	1	1	1	1	1	0	0	
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4	5	7	4	(3)	(1)	
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	10	4	(6)	(7)	
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39	35	(4)	XXX	
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54	XXX	XXX	
12. Totals												(13)	(8)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

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.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	22	17	(5)	(17)
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	231	236	5	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	217	XXX	XXX
4. Totals											(1)	(17)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	22	9	(13)	(43)
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	891	867	(24)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	890	XXX	XXX
4. Totals											(37)	(43)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	1	1	0	(4)
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	(4)

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....												
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX	XXX									
6. 2016.....	XXX	XXX	XXX	XXX								
7. 2017.....	XXX	XXX	XXX	XXX	XXX							
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

**SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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	91	75	68	66	60	58	51	54	52	32	(20)	(22)
2. 2012	114	110	109	105	100	100	99	99	99	99	0	0
3. 2013	XXX	88	80	76	72	69	67	67	67	67	0	0
4. 2014	XXX	XXX	58	60	58	57	57	57	57	57	0	0
5. 2015	XXX	XXX	XXX	48	51	48	48	48	45	45	0	(3)
6. 2016	XXX	XXX	XXX	XXX	76	77	72	70	69	69	0	(1)
7. 2017	XXX	XXX	XXX	XXX	XXX	56	71	68	66	64	(2)	(4)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	91	114	111	110	(1)	(4)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76	94	91	(3)	15
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123	132	9	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	108	XXX	XXX
12. Totals											(18)	(19)

**SCHEDULE P - PART 2O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	337	346	335	323	297	290	278	267	267	268	1	1
2. 2012	54	67	68	63	56	53	49	47	47	47	0	0
3. 2013	XXX	50	62	58	53	53	49	49	48	47	(1)	(1)
4. 2014	XXX	XXX	34	34	33	34	32	29	29	28	(1)	(1)
5. 2015	XXX	XXX	XXX	22	22	20	19	19	18	18	0	(2)
6. 2016	XXX	XXX	XXX	XXX	34	37	41	50	49	48	(1)	(2)
7. 2017	XXX	XXX	XXX	XXX	XXX	46	49	54	55	53	(1)	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	62	64	65	60	(5)	(3)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82	80	81	1	(1)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	106	106	(1)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	160	XXX	XXX
12. Totals											(7)	(9)

**SCHEDULE P - PART 2P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

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	286	400	447	427	451	474	377	409	417	369	(48)	(40)
2. 2012	34	40	54	54	46	76	59	61	57	57	0	(4)
3. 2013	XXX	40	32	37	46	56	39	41	40	40	0	(1)
4. 2014	XXX	XXX	37	34	48	57	37	31	31	30	(1)	(1)
5. 2015	XXX	XXX	XXX	44	51	89	64	60	67	68	1	8
6. 2016	XXX	XXX	XXX	XXX	49	110	56	47	36	32	(3)	(15)
7. 2017	XXX	XXX	XXX	XXX	XXX	143	71	70	50	63	12	(8)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	78	77	67	73	6	(4)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	47	56	9	(5)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	15	(2)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	XXX	XXX
12. Totals											(27)	(70)

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
4. Totals												

SCHEDULE P - PART 2T - WARRANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
4. Totals												

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SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

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	2	3	4	5	6	7	8	9	10		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior	.000	93	137	154	162	166	169	174	174	177	7	0
2. 2012	1,180	1,454	1,475	1,492	1,500	1,507	1,513	1,520	1,520	1,520	223	62
3. 2013	XXX	1,064	1,259	1,286	1,293	1,299	1,302	1,303	1,303	1,304	155	49
4. 2014	XXX	XXX	1,122	1,342	1,387	1,389	1,397	1,401	1,402	1,402	138	49
5. 2015	XXX	XXX	XXX	862	1,104	1,144	1,152	1,156	1,159	1,161	106	38
6. 2016	XXX	XXX	XXX	XXX	796	995	1,021	1,027	1,028	1,028	92	32
7. 2017	XXX	XXX	XXX	XXX	XXX	1,164	1,343	1,351	1,358	1,363	112	36
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	702	870	891	899	77	78
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	850	987	1,000	78	94
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	835	988	80	23
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	470	31	13

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	.000	416	584	656	695	713	713	717	717	724	30	0
2. 2012	523	890	1,082	1,181	1,257	1,277	1,286	1,290	1,289	1,289	237	68
3. 2013	XXX	543	879	1,073	1,170	1,222	1,236	1,243	1,255	1,255	235	69
4. 2014	XXX	XXX	608	986	1,162	1,280	1,333	1,346	1,352	1,357	239	77
5. 2015	XXX	XXX	XXX	589	962	1,147	1,210	1,243	1,271	1,288	211	68
6. 2016	XXX	XXX	XXX	XXX	500	835	984	1,043	1,072	1,084	169	57
7. 2017	XXX	XXX	XXX	XXX	XXX	409	684	804	861	885	139	45
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	346	577	699	741	123	174
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	331	531	608	96	142
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	193	309	52	12
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200	14	8

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior	.000	417	713	835	941	980	990	992	997	1,001	17	0
2. 2012	204	398	608	701	775	787	799	801	801	801	74	24
3. 2013	XXX	229	385	518	612	679	731	774	778	779	78	27
4. 2014	XXX	XXX	247	430	611	774	843	881	927	928	85	30
5. 2015	XXX	XXX	XXX	264	514	800	960	1,017	1,030	1,069	91	32
6. 2016	XXX	XXX	XXX	XXX	270	538	823	984	1,085	1,153	99	38
7. 2017	XXX	XXX	XXX	XXX	XXX	278	564	821	940	1,074	104	37
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	362	692	980	1,137	186	603
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	395	690	913	76	681
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	230	517	22	18
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	280	39	38

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior	.000	945	1,668	2,079	2,427	2,695	2,952	3,165	3,342	3,512	(223)	0
2. 2012	793	1,815	2,235	2,531	2,728	2,850	2,913	3,034	3,097	3,142	217	62
3. 2013	XXX	963	2,204	2,797	3,128	3,322	3,433	3,538	3,618	3,697	246	47
4. 2014	XXX	XXX	1,067	2,268	2,804	3,143	3,289	3,399	3,478	3,559	251	47
5. 2015	XXX	XXX	XXX	865	1,727	2,135	2,350	2,494	2,601	2,672	213	44
6. 2016	XXX	XXX	XXX	XXX	906	2,005	2,511	2,699	2,797	2,856	262	41
7. 2017	XXX	XXX	XXX	XXX	XXX	1,106	2,388	2,892	3,079	3,215	246	56
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,174	2,489	2,966	3,212	36	1,374
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,136	2,325	2,877	95	2,435
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,012	2,408	237	43
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,219	189	54

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	.000	91	135	166	179	183	188	182	183	184	5	0
2. 2012	479	630	645	653	659	665	671	674	674	674	59	23
3. 2013	XXX	421	544	563	578	583	586	586	587	588	44	19
4. 2014	XXX	XXX	472	638	663	684	690	693	693	693	47	20
5. 2015	XXX	XXX	XXX	524	663	697	713	716	717	720	35	18
6. 2016	XXX	XXX	XXX	XXX	465	627	640	642	640	646	35	17
7. 2017	XXX	XXX	XXX	XXX	XXX	544	703	724	733	736	40	18
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	530	670	712	735	32	65
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	755	967	1,039	27	84
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	765	1,028	11	14
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	615	17	21

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SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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	2	3	4	5	6	7	8	9	10			
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021			
1. Prior	.000												
2. 2012													
3. 2013	XXX												
4. 2014	XXX	XXX											
5. 2015	XXX	XXX	XXX										
6. 2016	XXX	XXX	XXX	XXX									
7. 2017	XXX	XXX	XXX	XXX	XXX								
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

NONE

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	.000												
2. 2012													
3. 2013	XXX												
4. 2014	XXX	XXX											
5. 2015	XXX	XXX	XXX										
6. 2016	XXX	XXX	XXX	XXX									
7. 2017	XXX	XXX	XXX	XXX	XXX								
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

NONE

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior	.000	0	0	0	0	0	5	5	5	5	XXX	XXX
2. 2012	2	3	1	1	1	1	3	3	3	3	XXX	XXX
3. 2013	XXX	2	2	2	2	2	4	4	4	4	XXX	XXX
4. 2014	XXX	XXX	3	1	1	1	3	3	3	3	XXX	XXX
5. 2015	XXX	XXX	XXX	2	2	2	4	4	4	4	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	3	2	4	4	4	4	XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX	2	3	3	3	4	XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	3	2	2	2	XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	3	2	XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	XXX

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	.000	323	519	646	756	824	898	925	1,129	1,150	11	0
2. 2012	59	143	252	316	393	458	489	503	508	509	23	16
3. 2013	XXX	63	149	245	412	494	527	547	560	573	23	18
4. 2014	XXX	XXX	65	140	222	324	438	493	507	517	24	20
5. 2015	XXX	XXX	XXX	76	240	380	517	644	670	700	27	21
6. 2016	XXX	XXX	XXX	XXX	97	225	439	592	659	732	29	23
7. 2017	XXX	XXX	XXX	XXX	XXX	110	333	451	574	698	31	24
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	106	273	547	687	25	457
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	91	227	375	17	422
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(71)	(23)	3	4
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	1	0

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	.000	(4)	(9)	(10)	(10)	(10)	(10)	(10)	(10)	(10)	0	0
2. 2012	2	6	8	5	5	5	5	5	5	5	0	0
3. 2013	XXX	2	7	7	7	7	7	7	7	7	0	0
4. 2014	XXX	XXX	2	6	6	6	6	6	6	6	0	0
5. 2015	XXX	XXX	XXX	1	2	2	2	2	2	2	0	0
6. 2016	XXX	XXX	XXX	XXX	1	1	1	1	1	1	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	2	0	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2	0	6
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	8	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	0	0

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**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
 EARTHQUAKE, BURGLARY, AND THEFT)**

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	2	3	4	5	6	7	8	9	10		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	19	14	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	183	227	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	161	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	16	7	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	814	864	278	69
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	814	150	78

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	0	0	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	.000										XXX	XXX
2. 2012											XXX	XXX
3. 2013	XXX										XXX	XXX
4. 2014	XXX	XXX									XXX	XXX
5. 2015	XXX	XXX	XXX								XXX	XXX
6. 2016	XXX	XXX	XXX	XXX							XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

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**SCHEDULE P - PART 3N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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	2	3	4	5	6	7	8	9	10		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior	.000	15	22	28	35	39	39	41	40	42	XXX	XXX
2. 2012	40	83	91	94	97	99	98	99	99	99	XXX	XXX
3. 2013	XXX	33	60	65	67	67	67	66	66	66	XXX	XXX
4. 2014	XXX	XXX	22	43	52	53	56	57	56	56	XXX	XXX
5. 2015	XXX	XXX	XXX	10	32	39	41	42	43	43	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	34	58	64	68	68	69	XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX	16	51	59	60	60	XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	12	83	100	103	XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	63	76	XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	108	XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	XXX	XXX

**SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	.000	28	50	74	89	108	118	126	138	145	XXX	XXX
2. 2012	7	14	19	23	28	31	34	34	34	36	XXX	XXX
3. 2013	XXX	9	19	24	31	33	35	36	37	37	XXX	XXX
4. 2014	XXX	XXX	4	8	11	15	16	18	18	18	XXX	XXX
5. 2015	XXX	XXX	XXX	1	6	6	8	10	10	10	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	2	14	20	26	28	29	XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX	3	11	21	24	27	XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	6	21	28	32	XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	6	23	XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	18	XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	XXX	XXX

**SCHEDULE P - PART 3P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior	.000										XXX	XXX
2. 2012											XXX	XXX
3. 2013	XXX										XXX	XXX
4. 2014	XXX	XXX									XXX	XXX
5. 2015	XXX	XXX	XXX								XXX	XXX
6. 2016	XXX	XXX	XXX	XXX							XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

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	2	3	4	5	6	7	8	9	10		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	.67	.174	.225	.272	.344	.298	.309	.346	.298	3	0
2. 2012.....	.2	.9	.13	.17	.26	.29	.33	.51	.55	.55	1	1
3. 2013.....	XXX	.3	.9	.20	.29	.32	.31	.39	.40	.40	1	1
4. 2014.....	XXX	XXX	.5	.10	.14	.20	.26	.28	.28	.29	1	1
5. 2015.....	XXX	XXX	XXX	.2	.9	.17	.19	.44	.50	.57	1	2
6. 2016.....	XXX	XXX	XXX	XXX	.4	.14	.14	.23	.25	.27	1	2
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.5	.5	.10	.16	.40	1	2
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.3	.13	.23	.29	1	45
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.5	.13	.25	1	41
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.1	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....	.000											
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX	XXX									
6. 2016.....	XXX	XXX	XXX	XXX								
7. 2017.....	XXX	XXX	XXX	XXX	XXX							
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

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)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	42	17	6	2	1	0	0	0	0	0
2. 2012.....	107	22	7	3	1	0	1	0	0	0
3. 2013.....	XXX	93	12	6	1	1	1	1	0	0
4. 2014.....	XXX	XXX	58	(6)	(6)	(9)	(14)	(13)	1	0
5. 2015.....	XXX	XXX	XXX	84	16	9	3	2	2	0
6. 2016.....	XXX	XXX	XXX	XXX	76	21	6	4	3	1
7. 2017.....	XXX	XXX	XXX	XXX	XXX	90	21	4	4	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	84	12	9	1
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	101	17	4
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	6
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	242	84	35	15	6	2	1	2	0	0
2. 2012.....	338	159	60	20	11	4	2	1	0	0
3. 2013.....	XXX	292	144	48	24	13	4	1	0	0
4. 2014.....	XXX	XXX	315	128	54	23	(12)	(22)	1	1
5. 2015.....	XXX	XXX	XXX	335	154	71	27	15	6	2
6. 2016.....	XXX	XXX	XXX	XXX	326	145	58	28	11	4
7. 2017.....	XXX	XXX	XXX	XXX	XXX	235	107	58	17	6
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	193	102	29	7
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	156	50	23
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	102	45
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	559	252	94	48	29	14	4	1	1	1
2. 2012.....	383	183	85	36	15	8	4	2	1	1
3. 2013.....	XXX	395	173	75	25	17	7	2	1	1
4. 2014.....	XXX	XXX	311	182	78	48	4	(3)	4	1
5. 2015.....	XXX	XXX	XXX	362	218	148	76	34	15	8
6. 2016.....	XXX	XXX	XXX	XXX	373	320	182	75	43	10
7. 2017.....	XXX	XXX	XXX	XXX	XXX	610	378	218	95	28
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	686	448	228	78
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	818	467	192
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	713	405
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	870

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	9,049	7,500	6,474	4,920	3,914	2,378	2,527	1,692	1,435	978
2. 2012.....	2,146	1,494	873	816	532	281	143	119	202	205
3. 2013.....	XXX	2,430	1,541	1,270	900	589	419	318	372	342
4. 2014.....	XXX	XXX	2,379	1,810	1,319	979	756	681	585	331
5. 2015.....	XXX	XXX	XXX	2,399	1,925	1,289	980	651	565	519
6. 2016.....	XXX	XXX	XXX	XXX	2,669	1,919	1,422	1,002	635	584
7. 2017.....	XXX	XXX	XXX	XXX	XXX	3,752	2,210	1,839	1,028	591
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	2,796	2,580	1,566	825
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,126	2,518	1,034
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,446	1,638
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,005

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	246	203	156	148	147	145	132	150	121	48
2. 2012.....	71	27	18	11	4	2	1	0	0	0
3. 2013.....	XXX	73	21	11	7	5	1	0	0	0
4. 2014.....	XXX	XXX	54	22	2	1	(19)	(21)	1	0
5. 2015.....	XXX	XXX	XXX	85	18	15	6	3	1	0
6. 2016.....	XXX	XXX	XXX	XXX	44	24	11	4	1	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	84	23	13	4	3
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	77	19	17	5
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	95	74	37
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	361	257
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	578

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

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XX	XX					
8. 2018	XXX	XXX	XX	XX	XX	XX				
9. 2019	XXX	XXX	XX	XXX	XXX	XX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	759	518	349	259	219	184	183	147	124	86
2. 2012	311	197	122	75	38	28	16	10	7	3
3. 2013	XXX	336	214	124	75	40	32	16	7	6
4. 2014	XXX	XXX	349	228	123	71	47	31	24	8
5. 2015	XXX	XXX	XXX	416	311	190	150	75	53	25
6. 2016	XXX	XXX	XXX	XXX	438	294	230	161	102	49
7. 2017	XXX	XXX	XXX	XXX	XXX	530	433	283	195	97
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	609	484	282	138
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	554	435	260
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	446	337
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	420

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	2	1	3	2
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	7	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	22
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
 EARTHQUAKE, BURGLARY, AND THEFT)**

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)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	1	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	1
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(38)	1	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XX	XX					
8. 2018	XXX	XXX	XX	XXX	XXX	XX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

**SCHEDULE P - PART 4N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	46	39	33	29	16	14	8	10	9	(9)
2. 2012	31	15	12	8	1	0	0	0	0	0
3. 2013	XXX	20	10	8	3	2	0	0	0	0
4. 2014	XXX	XXX	12	3	1	1	0	0	0	0
5. 2015	XXX	XXX	XXX	12	2	1	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	13	5	1	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	8	1	1	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	12	1	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	2	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	1
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27

**SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	240	223	199	175	145	118	104	92	85	85
2. 2012	33	41	41	31	22	18	15	12	10	9
3. 2013	XXX	28	34	28	18	17	12	11	11	9
4. 2014	XXX	XXX	23	20	16	15	12	10	10	9
5. 2015	XXX	XXX	XXX	16	13	11	8	7	6	6
6. 2016	XXX	XXX	XXX	XXX	17	12	12	12	9	8
7. 2017	XXX	XXX	XXX	XXX	XXX	24	13	14	11	10
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	31	24	19	16
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62	36	22
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76	46
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	104

**SCHEDULE P - PART 4P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

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)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	208	219	213	169	140	109	71	82	44	30
2. 2012	28	19	27	17	8	6	4	4	1	1
3. 2013	XXX	30	16	10	7	13	2	2	0	0
4. 2014	XXX	XXX	25	18	24	24	8	2	1	0
5. 2015	XXX	XXX	XXX	33	26	47	20	9	6	3
6. 2016	XXX	XXX	XXX	XXX	37	75	27	13	5	2
7. 2017	XXX	XXX	XXX	XXX	XXX	130	58	50	15	7
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	66	46	18	9
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	24	17
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	12
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	40	4	2	0	0	0	0	0	0	0
2. 2012	193	220	222	222	223	223	223	223	223	223
3. 2013	XXX	133	153	155	155	155	155	155	155	155
4. 2014	XXX	XXX	120	136	138	138	138	138	138	138
5. 2015	XXX	XXX	XXX	87	104	105	105	106	106	106
6. 2016	XXX	XXX	XXX	XXX	77	90	91	91	91	92
7. 2017	XXX	XXX	XXX	XXX	XXX	87	110	112	112	112
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	64	76	77	77
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	77	78
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66	80
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	6	2	1	1	0	0	0	0	0	0
2. 2012	21	2	1	0	0	0	0	0	0	0
3. 2013	XXX	17	2	1	1	0	0	0	0	0
4. 2014	XXX	XXX	15	2	1	0	0	0	0	0
5. 2015	XXX	XXX	XXX	15	2	1	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	11	2	1	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	23	2	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	9	0	1	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	7	1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	2
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	22	2	1	0	0	0	0	0	0	0
2. 2012	268	283	285	285	285	285	285	285	285	285
3. 2013	XXX	191	203	204	204	204	204	204	204	204
4. 2014	XXX	XXX	178	187	188	188	188	188	188	188
5. 2015	XXX	XXX	XXX	135	143	144	144	144	144	144
6. 2016	XXX	XXX	XXX	XXX	117	123	123	123	124	124
7. 2017	XXX	XXX	XXX	XXX	XXX	141	147	147	148	148
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	149	154	156	156
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	156	178	173
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	93	105
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	66	16	5	2	1	0	4	0	0	0
2. 2012	170	222	232	235	236	236	237	237	237	237
3. 2013	XXX	171	221	230	233	235	235	235	235	235
4. 2014	XXX	XXX	175	225	234	237	238	239	239	239
5. 2015	XXX	XXX	XXX	152	199	208	209	210	210	211
6. 2016	XXX	XXX	XXX	XXX	120	161	167	168	169	169
7. 2017	XXX	XXX	XXX	XXX	XXX	103	133	137	139	139
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	93	118	122	123
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72	94	96
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	52
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	29	12	5	3	1	1	1	0	1	1
2. 2012	67	15	6	3	1	0	0	0	0	0
3. 2013	XXX	63	14	6	2	1	0	0	0	0
4. 2014	XXX	XXX	66	15	5	3	1	0	0	0
5. 2015	XXX	XXX	XXX	56	8	4	2	0	0	0
6. 2016	XXX	XXX	XXX	XXX	54	10	3	0	1	0
7. 2017	XXX	XXX	XXX	XXX	XXX	40	7	1	2	1
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	31	1	3	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	3
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	19	3	1	0	0	0	1	0	1	0
2. 2012	287	302	304	305	305	305	305	305	305	305
3. 2013	XXX	287	302	303	304	304	304	304	304	304
4. 2014	XXX	XXX	300	312	314	316	315	315	315	315
5. 2015	XXX	XXX	XXX	257	272	278	278	278	278	278
6. 2016	XXX	XXX	XXX	XXX	215	225	226	226	227	227
7. 2017	XXX	XXX	XXX	XXX	XXX	175	183	182	185	185
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	288	290	298	298
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	209	240	240
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	69	67
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	26	8	4	2	1	0	1	0	0	0
2. 2012	51	67	71	72	73	73	74	74	74	74
3. 2013	XXX	55	71	74	76	77	78	78	78	78
4. 2014	XXX	XXX	60	77	81	83	85	85	85	85
5. 2015	XXX	XXX	XXX	61	81	86	90	90	91	91
6. 2016	XXX	XXX	XXX	XXX	63	87	96	98	98	99
7. 2017	XXX	XXX	XXX	XXX	XXX	63	97	101	103	104
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	158	180	184	186
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	60	73	76
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	22
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	17	9	4	2	1	0	8	1	0	0
2. 2012	19	6	3	2	0	0	2	0	0	0
3. 2013	XXX	19	6	3	1	1	3	0	0	0
4. 2014	XXX	XXX	23	7	2	2	4	1	0	0
5. 2015	XXX	XXX	XXX	23	5	4	6	1	1	1
6. 2016	XXX	XXX	XXX	XXX	30	8	8	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	29	17	2	3	2
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	85	3	5	3
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	7	5
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	6
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	12	3	0	0	0	0	12	(2)	0	0
2. 2012	88	95	97	97	97	97	100	98	98	98
3. 2013	XXX	94	102	103	103	104	108	105	105	105
4. 2014	XXX	XXX	103	111	112	113	119	116	116	116
5. 2015	XXX	XXX	XXX	106	115	119	127	124	123	124
6. 2016	XXX	XXX	XXX	XXX	118	128	141	136	137	137
7. 2017	XXX	XXX	XXX	XXX	XXX	116	149	139	143	143
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	837	785	791	792
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	753	761	762
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	47
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100

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

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	125	33	6	36	(14)	(11)	(276)	0	2	0
2. 2012	186	301	316	340	328	333	217	217	217	217
3. 2013	XXX	229	351	382	381	390	245	245	246	246
4. 2014	XXX	XXX	265	390	400	419	249	250	251	251
5. 2015	XXX	XXX	XXX	240	346	371	211	212	213	213
6. 2016	XXX	XXX	XXX	XXX	244	397	259	260	262	262
7. 2017	XXX	XXX	XXX	XXX	XXX	303	238	241	245	246
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	11	23	33	36
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	86	95
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	182	237
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	305	306	306	306	306	306	4	11	12	12
2. 2012	76	81	82	82	82	82	0	3	2	2
3. 2013	XXX	58	63	64	64	64	1	7	6	6
4. 2014	XXX	XXX	62	66	67	67	1	9	8	8
5. 2015	XXX	XXX	XXX	49	53	53	1	21	19	21
6. 2016	XXX	XXX	XXX	XXX	46	51	2	20	17	19
7. 2017	XXX	XXX	XXX	XXX	XXX	53	6	25	22	23
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	15	37	29	30
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	87	36	32
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65	43
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	751	1,291	1,461	15	(11)	(3)	(337)	(1)	13	3
2. 2012	376	399	406	425	410	418	278	278	281	282
3. 2013	XXX	417	441	445	451	461	291	291	298	299
4. 2014	XXX	XXX	437	416	475	495	296	296	305	306
5. 2015	XXX	XXX	XXX	401	427	449	255	254	275	278
6. 2016	XXX	XXX	XXX	XXX	432	482	301	300	320	323
7. 2017	XXX	XXX	XXX	XXX	XXX	499	298	297	322	325
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,397	1,397	1,435	1,440
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,444	2,556	2,562
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	292	323
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	331

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	15	3	1	1	0	0	0	0	0	0
2. 2012	47	57	59	59	59	59	59	59	59	59
3. 2013	XXX	33	42	43	44	44	44	44	44	44
4. 2014	XXX	XXX	35	45	46	47	47	47	47	47
5. 2015	XXX	XXX	XXX	27	34	35	35	35	35	35
6. 2016	XXX	XXX	XXX	XXX	26	33	34	34	35	35
7. 2017	XXX	XXX	XXX	XXX	XXX	30	39	39	40	40
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	24	29	32	32
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	26	27
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	11
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	6	3	2	1	1	1	1	0	1	1
2. 2012	13	2	2	0	0	0	0	0	0	0
3. 2013	XXX	11	2	1	1	0	0	0	0	0
4. 2014	XXX	XXX	11	2	1	0	0	0	0	0
5. 2015	XXX	XXX	XXX	8	1	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	8	1	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	9	1	0	1	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	5	0	2	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	9	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	6
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	7	1	1	0	0	0	0	0	1	0
2. 2012	76	81	82	82	82	82	82	82	82	82
3. 2013	XXX	58	63	64	64	64	64	64	64	64
4. 2014	XXX	XXX	62	66	67	67	67	67	67	67
5. 2015	XXX	XXX	XXX	49	53	53	53	53	53	53
6. 2016	XXX	XXX	XXX	XXX	46	51	51	51	52	52
7. 2017	XXX	XXX	XXX	XXX	XXX	53	57	57	58	58
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	92	93	98	97
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	118	113
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	31
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

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

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	11	5	3	1	1	1	0	0	0	0
2. 2012	13	19	21	22	23	23	23	23	23	23
3. 2013	XXX	13	19	20	22	22	23	23	23	23
4. 2014	XXX	XXX	13	19	21	22	23	23	24	24
5. 2015	XXX	XXX	XXX	14	21	23	25	26	27	27
6. 2016	XXX	XXX	XXX	XXX	17	24	26	28	28	29
7. 2017	XXX	XXX	XXX	XXX	XXX	19	26	28	29	31
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	15	21	24	25
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	15	17
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	12	7	4	3	2	1	1	0	2	3
2. 2012	9	4	3	2	1	1	0	0	0	0
3. 2013	XXX	9	5	3	2	1	0	0	0	0
4. 2014	XXX	XXX	10	5	4	2	2	0	0	0
5. 2015	XXX	XXX	XXX	11	6	4	2	0	1	1
6. 2016	XXX	XXX	XXX	XXX	12	6	4	0	2	1
7. 2017	XXX	XXX	XXX	XXX	XXX	12	6	1	4	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	10	1	4	3
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	4	3
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	10	3	2	1	1	0	1	0	3	1
2. 2012	30	36	38	39	39	39	39	39	39	39
3. 2013	XXX	32	38	40	40	41	41	41	41	41
4. 2014	XXX	XXX	34	40	42	43	43	43	43	44
5. 2015	XXX	XXX	XXX	38	45	47	48	47	49	49
6. 2016	XXX	XXX	XXX	XXX	40	48	51	50	52	52
7. 2017	XXX	XXX	XXX	XXX	XXX	43	53	51	56	57
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	474	478	484	486
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	430	441	442
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	8
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

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

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3B

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	7	7
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	1
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.1	.1	.1	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.1	.1	.1	.1	.1	.1	.1	.1
3. 2013	XXX	.0	.1	.1	.1	.1	.1	.1	.1	.1
4. 2014	XXX	XXX	.0	.1	.1	.1	.1	.1	.1	.1
5. 2015	XXX	XXX	XXX	.0	.1	.1	.1	.1	.1	.1
6. 2016	XXX	XXX	XXX	XXX	.1	.1	.1	.1	.1	.1
7. 2017	XXX	XXX	XXX	XXX	XXX	.1	.1	.1	.1	.1
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.1	.1	.1	.1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	.1	.1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.3	.3	.3	.2	.2	.1	.1	.0	.2	.3
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.1	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.1	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.1	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.1	.0	.1	.1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.2	.2	.1	.1	.1	.0	.0	.0	.2	.1
2. 2012	.1	.2	.2	.2	.2	.2	.2	.2	.2	.2
3. 2013	XXX	.1	.2	.2	.2	.2	.2	.2	.2	.2
4. 2014	XXX	XXX	.2	.2	.3	.3	.2	.2	.2	.2
5. 2015	XXX	XXX	XXX	.2	.2	.3	.3	.3	.3	.3
6. 2016	XXX	XXX	XXX	XXX	.2	.3	.3	.2	.3	.3
7. 2017	XXX	XXX	XXX	XXX	XXX	.2	.3	.3	.3	.3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.46	.46	.47	.47
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.41	.41	.42
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	4	1	0	0	1	0	0	0	0	0	0
2. 2012.....	1,309	1,314	1,315	1,315	1,315	1,315	1,315	1,315	1,315	1,315	0
3. 2013.....	XXX	1,124	1,129	1,130	1,130	1,130	1,130	1,130	1,130	1,130	0
4. 2014.....	XXX	XXX	1,402	1,409	1,410	1,410	1,410	1,410	1,410	1,410	0
5. 2015.....	XXX	XXX	XXX	1,473	1,480	1,482	1,482	1,482	1,482	1,482	0
6. 2016.....	XXX	XXX	XXX	XXX	1,637	1,646	1,648	1,648	1,648	1,648	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,794	1,804	1,806	1,806	1,806	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,831	1,845	1,845	1,845	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,901	1,910	1,910	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,059	2,059	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,220	2,220
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,220
13. Earned Premiums (Sch P-Pt. 1)	1,262	1,305	1,353	1,424	1,583	1,735	1,843	1,917	2,068	2,220	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	1	2	0	0	(3)	0	0	0	0	0	0
2. 2012.....	17	17	17	17	17	17	17	17	17	17	0
3. 2013.....	XXX	6	6	6	6	6	6	6	6	6	0
4. 2014.....	XXX	XXX	36	36	36	36	36	36	36	36	0
5. 2015.....	XXX	XXX	XXX	28	28	28	28	28	28	28	0
6. 2016.....	XXX	XXX	XXX	XXX	29	29	29	29	29	29	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71	71
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71
13. Earned Premiums (Sch P-Pt. 1)	17	23	34	27	25	1	0	1	4	71	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	.95	.63	(.7)	.2	.1	.36	.0	.1	(.1)	.0	0
2. 2012.....	6,128	6,268	6,265	6,262	6,260	6,238	6,240	6,239	6,239	6,239	0
3. 2013.....	XXX	7,047	7,302	7,295	7,292	7,287	7,290	7,289	7,287	7,287	0
4. 2014.....	XXX	XXX	7,501	7,691	7,688	7,676	7,674	7,673	7,673	7,673	0
5. 2015.....	XXX	XXX	XXX	6,976	7,160	7,194	7,193	7,193	7,193	7,193	0
6. 2016.....	XXX	XXX	XXX	XXX	7,418	7,534	7,564	7,567	7,566	7,566	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	7,948	8,248	8,271	8,272	8,272	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	7,170	7,433	7,432	7,432	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,376	7,467	7,467	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,879	7,879	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,214	8,214
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,214
13. Earned Premiums (Sch P-Pt. 1)	6,505	7,593	8,127	7,510	7,972	8,495	7,505	7,662	7,966	8,214	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	1	1	0	.190	.1	.37	.0	.0	.0	.0	0
2. 2012.....	914	915	915	938	938	914	914	914	914	914	0
3. 2013.....	XXX	1,172	1,172	1,199	1,199	1,190	1,190	1,190	1,190	1,190	0
4. 2014.....	XXX	XXX	1,446	1,497	1,495	1,478	1,478	1,478	1,478	1,478	0
5. 2015.....	XXX	XXX	XXX	1,585	1,631	1,652	1,652	1,652	1,652	1,652	0
6. 2016.....	XXX	XXX	XXX	XXX	1,430	1,411	1,411	1,411	1,411	1,411	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	875	875	875	875	875	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	139	139	155	155	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	69	77	77	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	49	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	118	118
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	118
13. Earned Premiums (Sch P-Pt. 1)	965	1,245	1,536	1,992	1,564	915	81	69	73	118	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	(2)	0	0	0	0	0	0	0	0	0	0
2. 2012.....	1,695	1,723	1,723	1,723	1,723	1,723	1,723	1,723	1,723	1,723	0
3. 2013.....	XXX	1,780	1,813	1,813	1,813	1,813	1,813	1,813	1,813	1,813	0
4. 2014.....	XXX	XXX	1,890	1,914	1,914	1,914	1,914	1,914	1,914	1,914	0
5. 2015.....	XXX	XXX	XXX	2,009	2,023	2,023	2,023	2,023	2,023	2,023	0
6. 2016.....	XXX	XXX	XXX	XXX	2,103	2,104	2,104	2,104	2,104	2,104	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	2,141	2,141	2,141	2,141	2,141	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,551	1,551	1,552	1,552	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,834	1,829	1,829	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,599	2,599	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,109	3,109
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,109
13. Earned Premiums (Sch P-Pt. 1)	1,209	1,290	1,373	1,450	1,512	1,528	1,551	1,834	2,594	3,109	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	2	0	0	0	0	0	2	0	0	0	0
2. 2012.....	172	174	173	173	173	173	173	173	173	173	0
3. 2013.....	XXX	200	200	200	200	200	200	200	200	200	0
4. 2014.....	XXX	XXX	215	215	215	215	215	215	215	215	0
5. 2015.....	XXX	XXX	XXX	224	224	224	224	224	224	224	0
6. 2016.....	XXX	XXX	XXX	XXX	136	136	136	136	136	136	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	98	98	98	98	98	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	61	61	61	61	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	89	89	89	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129	129	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	190	190
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	190
13. Earned Premiums (Sch P-Pt. 1)	124	144	153	160	97	70	61	89	129	190	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	2	0	0	0	0	0	0	0	37	0	0
2. 2012.....	1,522	1,523	1,523	1,523	1,523	1,523	1,523	1,523	1,523	1,523	0
3. 2013.....	XXX	1,642	1,644	1,644	1,644	1,644	1,644	1,644	1,644	1,644	0
4. 2014.....	XXX	XXX	1,780	1,781	1,784	1,784	1,784	1,784	1,784	1,784	0
5. 2015.....	XXX	XXX	XXX	1,968	1,977	1,977	1,977	1,977	1,977	1,977	0
6. 2016.....	XXX	XXX	XXX	XXX	2,242	2,262	2,263	2,263	2,263	2,263	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	2,428	2,432	2,432	2,432	2,432	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,738	1,739	1,739	1,739	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,540	1,526	1,526	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	961	961	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	839	839
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	839
13. Earned Premiums (Sch P-Pt. 1)	1,087	1,173	1,272	1,406	1,608	1,748	1,742	1,541	984	839	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	2	4	(2)	0	(3)	2	0	0	0	0	0
2. 2012.....	53	53	53	53	53	53	53	53	53	53	0
3. 2013.....	XXX	66	66	66	66	66	66	66	66	66	0
4. 2014.....	XXX	XXX	84	84	84	84	84	84	84	84	0
5. 2015.....	XXX	XXX	XXX	104	104	104	104	104	104	104	0
6. 2016.....	XXX	XXX	XXX	XXX	214	214	214	214	214	214	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	212	212	212	212	212	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	135	135	135	135	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	141	141	141	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	96	96	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58	58
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58
13. Earned Premiums (Sch P-Pt. 1)	39	50	58	74	151	153	135	141	96	58	XXX

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

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....	9	3	0	0	0	0	0	0	0	0	0
2. 2012.....	3	14	14	14	14	14	14	14	14	14	0
3. 2013.....	XXX	3	14	15	15	15	15	15	15	15	0
4. 2014.....	XXX	XXX	3	14	14	14	14	14	14	14	0
5. 2015.....	XXX	XXX	XXX	1	5	5	5	5	5	5	0
6. 2016.....	XXX	XXX	XXX	XXX	3	3	3	3	3	3	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	3	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	18	18	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	64	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	83	83
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	83
13. Earned Premiums (Sch P-Pt. 1)	8	12	10	8	4	0	3	18	64	83	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	29	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	52
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	2	29	52	XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 6N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	6	0	(1)	0	0	0	0	0	0	0	0
2. 2012.....	224	246	246	246	246	246	246	246	246	246	0
3. 2013.....	XXX	162	181	181	181	181	181	181	181	181	0
4. 2014.....	XXX	XXX	139	156	157	157	157	157	157	157	0
5. 2015.....	XXX	XXX	XXX	124	127	127	127	127	127	127	0
6. 2016.....	XXX	XXX	XXX	XXX	133	136	136	136	136	136	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	111	111	113	113	113	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	75	78	78	78	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	99	99	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	115	115	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136	136
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136
13. Earned Premiums (Sch P-Pt. 1)	163	131	111	100	97	80	77	102	115	136	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

NONE

SCHEDULE P - PART 6O - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	2	0	0	0	0	0	0	0	47	0	0
2. 2012.....	76	82	82	82	82	82	82	82	82	82	0
3. 2013.....	XXX	49	55	55	55	55	55	55	55	55	0
4. 2014.....	XXX	XXX	31	33	33	33	33	33	33	33	0
5. 2015.....	XXX	XXX	XXX	25	22	22	22	22	22	22	0
6. 2016.....	XXX	XXX	XXX	XXX	36	36	36	36	36	36	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	47	48	48	48	48	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	62	64	64	64	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	119	111	111	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	119	119	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	199	199
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	199
13. Earned Premiums (Sch P-Pt. 1)	74	52	35	25	32	45	63	121	157	199	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

NONE

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

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	82	82	82	82	82	82	82	82	82	82	0
3. 2013.....	XXX	92	92	92	92	92	92	92	92	92	0
4. 2014.....	XXX	XXX	99	100	100	100	100	100	100	100	0
5. 2015.....	XXX	XXX	XXX	113	113	113	113	113	113	113	0
6. 2016.....	XXX	XXX	XXX	XXX	125	125	125	125	125	125	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	132	132	132	132	132	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	123	123	123	123	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	85	85	85	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30	30	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	7
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7
13. Earned Premiums (Sch P-Pt. 1)	78	87	95	108	118	125	123	85	30	7	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	1	1	1	1	1	1	1	1	0
5. 2015.....	XXX	XXX	XXX	1	1	1	1	1	1	1	0
6. 2016.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	1	2	2	0	0	1	0	0	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)
SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	289	0	0.0	0	0	0.0
2. Private Passenger Auto Liability/ Medical	814	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/ Medical	3,462	0	0.0	0	0	0.0
4. Workers' Compensation	22,972	0	0.0	0	0	0.0
5. Commercial Multiple Peril	2,047	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	5	0	0.0	0	0	0.0
9. Other Liability - Occurrence	2,676	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	93	0	0.0	0	0	0.0
11. Special Property	79	0	0.0	0	0	0.0
12. Auto Physical Damage	95	0	0.0	0	0	0.0
13. Fidelity/Surety	1	0	0.0	0	0	0.0
14. Other	0	0	0.0	0	0	0.0
15. International	0	0	0.0	0	0	0.0
16. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence	224	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	0	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Totals	32,757	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	289	0	0.0	0	0	0.0
2. Private Passenger Auto Liability/Medical	814	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/Medical	3,462	0	0.0	0	0	0.0
4. Workers' Compensation	22,972	0	0.0	0	0	0.0
5. Commercial Multiple Peril	2,047	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	5	0	0.0	0	0	0.0
9. Other Liability - Occurrence	2,676	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	93	0	0.0	0	0	0.0
11. Special Property	79	0	0.0	0	0	0.0
12. Auto Physical Damage	95	0	0.0	0	0	0.0
13. Fidelity/Surety	1	0	0.0	0	0	0.0
14. Other	0	0	0.0	0	0	0.0
15. International	0	0	0.0	0	0	0.0
16. Reinsurance - Nonproportional Assumed Property	122	0	0.0	0	0	0.0
17. Reinsurance - Nonproportional Assumed Liability	538	0	0.0	0	0	0.0
18. Reinsurance - Nonproportional Assumed Financial Lines	0	0	0.0	0	0	0.0
19. Products Liability - Occurrence	224	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	0	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Totals	33,417	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

N O N E

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

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior		
1.602	2012		
1.603	2013		
1.604	2014		
1.605	2015		
1.606	2016		
1.607	2017		
1.608	2018		
1.609	2019		
1.610	2020		
1.611	2021		
1.612	Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars) 5.1 Fidelity 0
 5.2 Surety

6. Claim count information is reported per claim or per claimant (Indicate which) per claimant.....
 If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]

7.2 (An extended statement may be attached.)

Schedule T - Part 2 - Interstate Compact

N O N E

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

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
							Broad Street Brokerage Insurance Agency, LLC								
.0291	Encova Mutual Insurance Group	10204	31-1783451 62-1590861 42-1496478				Consumers Insurance USA, Inc. IMARC, LLC	OH IA	NIA NIA	Encova Life Insurance Company Motorists Mutual Insurance Company	Ownership Ownership	100.000 100.000	Encova Mutual Insurance Group, Inc.	NO NO	
.0291	Encova Mutual Insurance Group	31577	42-1019089				Iowa American Insurance Company	OH	DS	Iowa Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	14338	42-0333120				Iowa Mutual Insurance Company	OH	RE	Encova Holdings, Inc. Motorists Commercial Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	40932	41-1563134 31-1022150				Encova Insurance Agency, Inc. MICO Insurance Company	MN OH	NIA IA	Motorists Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	13331	41-0299900				Motorists Commercial Mutual Insurance Company	OH	IA	Motorists Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	66311	31-0717055				Encova Life Insurance Company	OH	IA	Encova Holdings, Inc.	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	14621	31-4259550 31-0851906				Motorists Mutual Insurance Company Encova Service Corporation	OH OH	IA NIA	Encova Holdings, Inc. Motorists Mutual Insurance Company	Ownership Ownership	100.000 100.000	Encova Mutual Insurance Group, Inc.	NO NO	
.0291	Encova Mutual Insurance Group	23175	02-0178290				Phenix Mutual Fire Insurance Company	OH	IA	Encova Holdings, Inc.	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	19950	39-0739760 81-4951462				Wilson Mutual Insurance Company Encova Realty, LLC	OH OH	IA NIA	Encova Holdings, Inc. Motorists Mutual Insurance Company	Ownership Ownership	100.000 100.000	Encova Mutual Insurance Group, Inc.	NO NO	
.0291	Encova Mutual Insurance Group	12372	31-1712343 20-2394166				Encova Foundation of Ohio BrickStreet Mutual Insurance Company	OH WV	NIA IA	Motorists Mutual Insurance Company Encova Holdings, Inc.	Board Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	15137	46-1783383				PinnaclePoint Insurance Company	WV	IA	BrickStreet Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	13045	26-0818900				NorthStone Insurance Company	WV	IA	BrickStreet Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	15136	46-1795752				SummitPoint Insurance Company	WV	IA	BrickStreet Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	13016	87-0807723 80-0772825				AlleghenyPoint Insurance Company Encova Foundation of West Virginia, Inc	WV WV	IA NIA	BrickStreet Mutual Insurance Company BrickStreet Mutual Insurance Company	Ownership Board	100.000	Encova Mutual Insurance Group, Inc.	NO	
			81-3585592				STCE HTC Federal Investor, LLC	GA	NIA	BrickStreet Mutual Insurance Company	Ownership	99.990	Encova Mutual Insurance Group, Inc.	NO	
			81-5313304				MPC Brickstreet 2017 Historic Fund, LLC	GA	NIA	BrickStreet Mutual Insurance Company	Ownership	99.990	Encova Mutual Insurance Group, Inc.	NO	
			82-4318558				MPC Brickstreet 2018 Historic Fund, LLC	GA	NIA	BrickStreet Mutual Insurance Company	Ownership	99.990	Encova Mutual Insurance Group, Inc.	NO	
			84-1783677				MPC Brickstreet 2019 Historic Fund, LLC	GA	NIA	BrickStreet Mutual Insurance Company	Ownership	99.990	Encova Mutual Insurance Group, Inc.	NO	
			87-2750169				MPC Brickstreet 2022 Historic Fund, LLC	GA	NIA	BrickStreet Mutual Insurance Company	Ownership	99.990	Encova Mutual Insurance Group, Inc.	YES	
			87-2607952				ISG ESG I, LLC	GA	NIA	BrickStreet Mutual Insurance Company	Ownership	50.000	Encova Mutual Insurance Group, Inc.	YES	
			86-1546423				Encova Insurance Service Center, LLC	OH	NIA	Motorists Mutual Insurance Company	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
			86-1371222				Encova Holdings, Inc.	OH	UDP	Encova Mutual Insurance Group, Inc.	Ownership	100.000	Encova Mutual Insurance Group, Inc.	NO	
			86-1286784				Encova Mutual Insurance Group, Inc.	OH	UIP		Ownership	100.000		NO	

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

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	41-1563134	Encova Insurance Agency, Inc.	0	0			(581,131)				(581,131)	0
13331	41-0299900	Motorists Commercial Mutual Insurance Co.	0	0			(96,406,425)				(96,406,425)	0
	31-1783451	Broad Street Brokerage Ins. Agency, LLC	0	0			(43,565)				(43,565)	0
10204	62-1590891	Consumers Insurance USA, Inc.	0	0			(139,332)				(139,332)	0
	42-1496478	IMARC, LLC	0	0			0				0	0
31577	42-1019089	Iowa American Insurance Company	0	0			(193,669)				(193,669)	0
14338	42-0333120	Iowa Mutual Insurance Company	0	13,000,000			(5,029,957)				7,970,043	0
40932	31-1022150	WICO Insurance Company	0	20,000,000			(2,151,684)				17,848,316	0
66311	31-0717055	Motorists Life Insurance Company	0	0			(1,889,105)				(1,889,105)	0
14621	31-4259550	Motorists Mutual Insurance Company	0	(36,000,000)			67,014,809			30,702,313	61,717,122	0
	31-0851906	Encova Service Corporation	0	0			155,888,018			(22,890,589)	132,997,429	0
23175	02-0178290	Phenix Mutual Fire Insurance Company	0	0			(1,995,955)				(1,995,955)	0
19950	39-0739760	Wilson Mutual Insurance Company	0	3,000,000			(7,815,624)				(4,815,624)	0
	81-4951462	Encova Realty, LLC	0	0			0			(7,811,724)	(7,811,724)	0
12372	20-2394166	BrickStreet Mutual Insurance Company	0	(16,000,000)			(32,972,430)				(48,972,430)	0
15136	46-1795752	SummitPoint Insurance Company	0	0			(9,249,307)				(9,249,307)	0
15137	46-1783383	PinnaclePoint Insurance Company	0	0			(33,646,610)				(33,646,610)	0
13045	26-0818900	NorthStone Insurance Company	0	10,000,000			(26,816,790)				(16,816,790)	0
13016	87-0807723	AlleghenyPoint Insurance Company	0	6,000,000			(3,971,243)				2,028,757	0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING

- | | Responses |
|---|-----------|
| 1. Will an actuarial opinion be filed by March 1? | YES |
| 2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | YES |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | YES |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? | YES |

APRIL FILING

- | | |
|--|-----|
| 5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? | YES |
| 6. Will Management's Discussion and Analysis be filed by April 1? | YES |
| 7. Will the Supplemental Investment Risk Interrogatories be filed by April 1? | YES |

MAY FILING

- | | |
|--|-----|
| 8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1? | YES |
|--|-----|

JUNE FILING

- | | |
|--|-----|
| 9. Will an audited financial report be filed by June 1? | YES |
| 10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | YES |

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

MARCH FILING

- | | |
|--|-----|
| 11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | NO |
| 12. Will the Financial Guaranty Insurance Exhibit be filed by March 1? | NO |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | NO |
| 14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? | NO |
| 15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | NO |
| 16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? | NO |
| 17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? | NO |
| 18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? | YES |
| 20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? | YES |
| 21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? | NO |
| 22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | NO |
| 25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | NO |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | NO |
| 27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1? | NO |

APRIL FILING

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|--|-----|
| 28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? | NO |
| 29. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | NO |
| 30. Will the Accident and Health Policy Experience Exhibit be filed by April 1? | NO |
| 31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? | NO |
| 32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? | NO |
| 33. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? | YES |
| 34. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? | NO |
| 35. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? | NO |
| 36. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? | NO |








AUGUST FILING

- | | |
|--|-----|
| 37. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | YES |
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Explanations:

11. The data for this supplement is not required to be filed
12. The data for this supplement is not required to be filed
13. The data for this supplement is not required to be filed
14. The data for this supplement is not required to be filed
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32. The data for this supplement is not required to be filed
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35. The data for this supplement is not required to be filed
36. The data for this supplement is not required to be filed

Bar Codes:

- | | |
|--|--|
| 11. SIS Stockholder Information Supplement [Document Identifier 420] |  |
| 12. Financial Guaranty Insurance Exhibit [Document Identifier 240] |  |
| 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] |  |
| 14. Supplement A to Schedule T [Document Identifier 455] |  |
| 15. Trusteed Surplus Statement [Document Identifier 490] |  |
| 16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385] |  |
| 17. Reinsurance Summary Supplemental Filing [Document Identifier 401] |  |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE IOWA MUTUAL INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

18. Medicare Part D Coverage Supplement [Document Identifier 365]



21. Exceptions to the Reinsurance Attestation Supplement
[Document Identifier 400]



22. Bail Bond Supplement [Document Identifier 500]



23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]



24. Relief from the five-year rotation requirement for lead audit partner
[Document Identifier 224]



25. Relief from the one-year cooling off period for independent CPA
[Document Identifier 225]



26. Relief from the Requirements for Audit Committees [Document Identifier 226]



27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution
Contracts [Document Identifier 555]



28. Credit Insurance Experience Exhibit [Document Identifier 230]



29. Long-Term Care Experience Reporting Forms [Document Identifier 306]



30. Accident and Health Policy Experience Exhibit [Document Identifier 210]



31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]



32. Supplemental Health Care Exhibit's Expense Allocation Report
[Document Identifier 217]



34. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -
Parts 1 and 2 [Document Identifier 290]



35. Private Flood Insurance Supplement [Document Identifier 560]



36. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



OVERFLOW PAGE FOR WRITE-INS

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

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	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