

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## QUARTERLY STATEMENT

AS OF MARCH 31, 2022  
OF THE CONDITION AND AFFAIRS OF THE

## IOWA AMERICAN INSURANCE COMPANY

NAIC Group Code	0291 (Current)	0291 (Prior)	NAIC Company Code	31577	Employer's ID Number	42-1019089
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	OH		
Country of Domicile	United States of America					
Incorporated/Organized	11/15/1973		Commenced Business	02/01/1974		
Statutory Home Office	471 EAST BROAD STREET (Street and Number)		COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)			
Main Administrative Office	471 EAST BROAD STREET (Street and Number)		614-225-8211 (Area Code) (Telephone Number)			
	COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)					
Mail Address	471 EAST BROAD STREET (Street and Number or P.O. Box)		COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	471 EAST BROAD STREET (Street and Number)		614-225-8211 (Area Code) (Telephone Number)			
	COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)					
Internet Website Address	ENCOVA.COM					
Statutory Statement Contact	AMY E KUHLMAN (Name)		614-225-8285 (Area Code) (Telephone Number)			
	ACCOUNTING@ENCOVA.COM (E-mail Address)		614-225-8330 (FAX Number)			

## OFFICERS

PRESIDENT & CHIEF  
EXECUTIVE OFFICER THOMAS JOSEPH O BROKTA JR. TREASURER JAMES CHRISTOPHER HOWAT  
SECRETARY MARCHELLE ELAINE MOORE

**OTHER**

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

State of OH  
County of FRANKLIN SS

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

THOMAS JOSEPH OBROKTA JR.  
RESIDENT & CHIEF EXECUTIVE OFFICER

MARCHELLE ELAINE MOORE  
SECRETARY

JAMES CHRISTOPHER HOWAT  
TREASURER

Subscribed and sworn to before me this  
9th day of May 2022

- a. Is this an original filing? \_\_\_\_\_
- b. If no,
  - 1. State the amendment number \_\_\_\_\_
  - 2. \_\_\_\_\_

Yes [ X ] No [ ]



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

## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

## ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	18,461,701		18,461,701	17,978,805
2. Stocks:				0
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....			0	0
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ ..... 0 ), cash equivalents (\$ ..... 3,412,014 ) and short-term investments (\$ ..... ) .....	3,412,014		3,412,014	3,834,496
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....	500	500	0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	21,874,215	500	21,873,715	21,813,300
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	143,571		143,571	126,150
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	229,701		229,701	703,708
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	901,206		901,206	219,887
16.2 Funds held by or deposited with reinsured companies .....			0	3,149,918
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
18.2 Net deferred tax asset .....	9,507		9,507	299,821
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....			0	0
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	10,595	100	10,495	11,440
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	23,168,795	600	23,168,195	26,324,224
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	23,168,795	600	23,168,195	26,324,224
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above) .....	0	0	0	0
2501. Misc Other Assets .....	10,595	100	10,495	11,440
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) .....	10,595	100	10,495	11,440

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ ..... )		.10,077,557
2. Reinsurance payable on paid losses and loss adjustment expenses		.533,118
3. Loss adjustment expenses		1,716,688
4. Commissions payable, contingent commissions and other similar charges		248,228
5. Other expenses (excluding taxes, licenses and fees)	1,581	.659,701
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		.51,250
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses))	.18,578	.18,578
7.2 Net deferred tax liability		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ ..... 7,326 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... 0 for medical loss ratio rebate per the Public Health Service Act)		3,055,758
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	(133)	184
13. Funds held by company under reinsurance treaties	13,209,323	.406,893
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ ..... certified)		0
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	.932,561	.352,070
20. Derivatives	.0	0
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities	(81,225)	(53,512)
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	14,080,685	17,066,512
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	14,080,685	17,066,512
29. Aggregate write-ins for special surplus funds	.0	0
30. Common capital stock	1,000,000	1,000,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds	.0	0
33. Surplus notes		
34. Gross paid in and contributed surplus	5,000,000	5,000,000
35. Unassigned funds (surplus)	.3,087,510	3,257,712
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... )		
36.2 ..... shares preferred (value included in Line 31 \$ ..... )		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	9,087,510	9,257,712
38. Totals (Page 2, Line 28, Col. 3)	23,168,195	26,324,224
<b>DETAILS OF WRITE-INS</b>		
2501. Miscellaneous liabilities	(81,225)	(53,512)
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page	.0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	(81,225)	(53,512)
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page	.0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page	.0	0
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**STATEMENT OF INCOME**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct (written \$ 0 )	0	0	314
1.2 Assumed (written \$ (133) )		1,562,218	6,508,764
1.3 Ceded (written \$ (133) )		678	1,253
1.4 Net (written \$ 0 )	0	1,561,540	6,507,825
<b>DEDUCTIONS:</b>			
2. Losses incurred (current accident year \$ ):			
2.1 Direct (400,119)	711,713	(1,805,620)	
2.2 Assumed 0	844,577	3,251,396	
2.3 Ceded (400,119)	710,827	(1,826,676)	
2.4 Net 0	845,463	3,272,452	
3. Loss adjustment expenses incurred 0	226,183	981,693	
4. Other underwriting expenses incurred 0	484,980	2,042,399	
5. Aggregate write-ins for underwriting deductions 0	0	0	0
6. Total underwriting deductions (Lines 2 through 5) 0	1,556,626	6,296,544	
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7) 0	4,914	211,281	
<b>INVESTMENT INCOME</b>			
9. Net investment income earned 116,236	136,360	431,880	
10. Net realized capital gains (losses) less capital gains tax of \$ 0	7,026	34,324	
11. Net investment gain (loss) (Lines 9 + 10) 116,236	143,386	466,204	
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ ) 0	(363)	(23,230)	
13. Finance and service charges not included in premiums 0	0	11,341	
14. Aggregate write-ins for miscellaneous income 0	0	0	0
15. Total other income (Lines 12 through 14) 0	(363)	(11,889)	
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) 116,236	147,937	665,596	
17. Dividends to policyholders 5,030		23,692	
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) 116,236	142,907	641,904	
19. Federal and foreign income taxes incurred 19,371		106,577	
20. Net income (Line 18 minus Line 19)(to Line 22) 116,236	123,536	535,327	
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year 9,257,712	8,814,835	8,814,836	
22. Net income (from Line 20) 116,236	123,536	535,327	
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ (402)	3,468	(3,332)	(5,812)
25. Change in net unrealized foreign exchange capital gain (loss) 0			
26. Change in net deferred income tax (411,791)	25,484	(51,734)	
27. Change in nonadmitted assets 121,880	181,706	162,427	
28. Change in provision for reinsurance 0			
29. Change in surplus notes 0			
30. Surplus (contributed to) withdrawn from protected cells 0			
31. Cumulative effect of changes in accounting principles 0			
32. Capital changes:			
32.1 Paid in 0	0	0	0
32.2 Transferred from surplus (Stock Dividend) 0			
32.3 Transferred to surplus 0			
33. Surplus adjustments:			
33.1 Paid in 0	0	0	0
33.2 Transferred to capital (Stock Dividend) 0			
33.3 Transferred from capital 0			
34. Net remittances from or (to) Home Office 0			
35. Dividends to stockholders 0			
36. Change in treasury stock 0			0
37. Aggregate write-ins for gains and losses in surplus 0	0	0	(197,332)
38. Change in surplus as regards policyholders (Lines 22 through 37) (170,207)	327,394	442,876	
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 9,087,505	9,142,229	9,257,712	
<b>DETAILS OF WRITE-INS</b>			
0501. 0			
0502. 0			
0503. 0			
0598. Summary of remaining write-ins for Line 5 from overflow page 0	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0	0	0	0
1401. Miscellaneous income or expense 0	0	0	0
1402. 0			
1403. 0			
1498. Summary of remaining write-ins for Line 14 from overflow page 0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0	0	0	0
3701. Miscellaneous gains / losses 0	0	0	(197,332)
3702. 0			
3703. 0			
3798. Summary of remaining write-ins for Line 37 from overflow page 0	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) 0	0	0	(197,332)

**STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY**  
**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	0	1,935,975	7,012,617
2. Net investment income .....	101,564	144,724	566,585
3. Miscellaneous income .....	0	(363)	(11,889)
4. Total (Lines 1 to 3) .....	101,564	2,080,336	7,567,313
5. Benefit and loss related payments .....	0	137,620	2,765,214
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	0	863,789	2,968,693
8. Dividends paid to policyholders .....	0	5,030	23,604
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	(1)	0	195,012
10. Total (Lines 5 through 9) .....	(1)	1,006,439	5,952,523
11. Net cash from operations (Line 4 minus Line 10) .....	101,565	1,073,897	1,614,790
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	447,207	950,636	4,964,587
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	0
12.7 Miscellaneous proceeds .....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	447,207	950,636	4,964,587
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	947,256	1,216,219	3,522,688
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	947,256	1,216,219	3,522,688
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(500,049)	(265,583)	1,441,898
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied) .....	(23,998)	(976,729)	(512,625)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	(23,998)	(976,729)	(512,625)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(422,482)	(168,415)	2,544,063
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	3,834,495	1,290,433	1,290,432
19.2 End of period (Line 18 plus Line 19.1) .....	3,412,013	1,122,018	3,834,495

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

20.0001. ....	.....	.....
	.....	134,372

# NOTES TO FINANCIAL STATEMENTS

**NOTE 1 Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

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

	SSAP #	F/S Page	F/S Line #	2022		2021	
<b>NET INCOME</b>							
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 116,236	\$	535,327	
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:							
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 116,236	\$	535,327	
<b>SURPLUS</b>							
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 9,087,510	\$	9,257,712	
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:							
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 9,087,510	\$	9,257,712	

**C. Accounting Policy****(2) Basis for Bonds and Amortization Schedule**

Bonds not back by other loans are stated at amortized cost using the scientific amortization method.

**(6) Basis for Loan-Backed Securities and Adjustment Methodology**

Loan-backed securities are stated in accordance with the guidance provided in SSAP No. 43R: Loan-backed and Structured Securities. The retrospective adjustment method is used to value these securities

**D. Going Concern**

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

**NOTE 2 Accounting Changes and Corrections of Errors**

Not Applicable

**NOTE 3 Business Combinations and Goodwill**

No significant changes

**NOTE 4 Discontinued Operations**

Not Applicable

**NOTE 5 Investments****A. Mortgage Loans, including Mezzanine Real Estate Loans**

Not Applicable

**B. Debt Restructuring**

Not Applicable

**C. Reverse Mortgages**

Not Applicable

**D. Loan-Backed Securities**

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

(2)-(3) Not Applicable

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

a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 116,380
2. 12 Months or Longer	\$ 65,932

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

1. Less than 12 Months	\$ 3,045,148
2. 12 Months or Longer	\$ 819,398

(5) The company performed an analysis of loan-backed securities and determined that exposure to credit risk was not a factor and did not warrant any other-than-temporary impairments.

**E. Dollar Repurchase Agreements and/or Securities Lending Transactions**

Not Applicable

**F. Repurchase Agreements Transactions Accounted for as Secured Borrowing**

Not Applicable

**G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing**

Not Applicable

**H. Repurchase Agreements Transactions Accounted for as a Sale**

Not Applicable

**I. Reverse Repurchase Agreements Transactions Accounted for as a Sale**

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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J. Real Estate  
Not Applicable

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

L. Restricted Assets  
No significant changes

M. Working Capital Finance Investments  
Not Applicable

N. Offsetting and Netting of Assets and Liabilities  
Not Applicable

O. 5GI Securities  
Not Applicable

P. Short Sales  
Not Applicable

Q. Prepayment Penalty and Acceleration Fees  
Not Applicable

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

**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies**

No significant changes

**NOTE 7 Investment Income**

No significant changes

**NOTE 8 Derivative Instruments**

Not Applicable

**NOTE 9 Income Taxes**

No significant changes

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

No significant changes

**NOTE 11 Debt**

B. FHLB (Federal Home Loan Bank) Agreements  
Not Applicable

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

A. Defined Benefit Plan  
No Significant Changes

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

No significant changes

**NOTE 14 Liabilities, Contingencies and Assessments**

No significant changes

**NOTE 15 Leases**

No significant changes

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

Not Applicable

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

A. Transfers of Receivables Reported as Sales  
Not Applicable

B. Transfer and Servicing of Financial Assets  
Not Applicable

C. Wash Sales  
Not Applicable

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

Not Applicable

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

Not Applicable

# NOTES TO FINANCIAL STATEMENTS

**NOTE 20 Fair Value Measurements****A. Fair Value Measurements****(1) Fair Value Measurements at Reporting Date**

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

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

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

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

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Total assets at fair value/NAV	\$ -	\$ -	\$ -	\$ -	\$ -

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

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

Not Applicable

**(3) Policies when Transfers Between Levels are Recognized**

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

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

Not Applicable

**(5) Fair Value Disclosures**

Not Applicable

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

Not Applicable

**C. Fair Value Level**

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 18,148,718	\$ 18,461,701		\$ 18,148,718			

Bonds and Common Stocks

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

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

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

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

**D. Not Practicable to Estimate Fair Value**

Not Applicable

**E. NAV Practical Expedient Investments**

Not Applicable

**NOTE 21 Other Items**

No significant changes

**NOTE 22 Events Subsequent**

Subsequent events have been considered through May 10, 2022 for these statutory financial statements which are to be issued on May 13, 2022. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

# NOTES TO FINANCIAL STATEMENTS

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**NOTE 23 Reinsurance**

No significant changes

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**

## F. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [ ] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year  
Not applicable

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.  
Not applicable

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

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

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

Not applicable

**NOTE 26 Intercompany Pooling Arrangements**

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

Effective January 1, 2022, the Company and its affiliates intercompany pooling percentages changed as noted in the below table.

	NAIC Company Code	Pooling Percentage	
		2022	2021
Lead Entity and all Affiliated Entities			
Motorists Mutual Insurance Company (Lead Entity)	14621	24.1%	32.4%
BrickStreet Mutual Insurance Company	12372	48.2%	48.0%
Motorists Commercial Mutual Insurance Company	13331	13.4%	10.3%
Consumers Insurance USA, Inc.	10204	1.9%	2.1%
Iowa Mutual Insurance Company	14338	1.9%	1.7%
PinnaclePoint Insurance Company	15137	1.7%	0.8%
SummitPoint Insurance Company	15136	1.7%	0.8%
MICO Insurance Company	40932	1.7%	%
Phenix Mutual Fire Insurance Company	23175	1.4%	1.6%
AlleghenyPoint Insurance Company	13016	1.4%	%
Wilson Mutual Insurance Company	19950	1.3%	1.7%
NorthStone Insurance Company	13045	1.3%	%
Iowa American Insurance Company	31577	%	0.6%

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

No significant changes

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

No significant changes

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

No significant changes

## E. Explanation of Discrepancies Between Entries of Pooled Business

No significant changes

## F. Description of Intercompany Sharing

No significant changes

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

No significant changes

**NOTE 27 Structured Settlements**

Not Applicable

**NOTE 28 Health Care Receivables**

Not Applicable

**NOTE 29 Participating Policies**

Not Applicable

**NOTE 30 Premium Deficiency Reserves**

No significant changes

**NOTE 31 High Deductibles**

Not Applicable

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

No Applicable

**NOTE 33 Asbestos/Environmental Reserves**

No significant changes

**NOTE 34 Subscriber Savings Accounts**

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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**NOTE 35 Multiple Peril Crop Insurance**

Not Applicable

**NOTE 36 Financial Guaranty Insurance**

B. Schedule of insured financial obligations at the end of the period

Not Applicable

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

**GENERAL**

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]

1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]

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

2.2 If yes, date of change: \_\_\_\_\_

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

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [ X ]

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

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

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

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ] If yes, attach an explanation.

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

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

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

6.4 By what department or departments?

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

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

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

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]

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

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

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

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

**STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [  ] No [  ]  
 (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
 (c) Compliance with applicable governmental laws, rules and regulations;  
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
 (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

9.2 Has the code of ethics for senior managers been amended? ..... Yes [  ] No [  ]

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

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

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

**FINANCIAL**

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

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

**INVESTMENT**

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [  ] No [  ]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....

13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [  ] No [  ]

14.2 If yes, please complete the following:

	<b>1</b> Prior Year-End Book/Adjusted Carrying Value	<b>2</b> Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....	\$ .....
14.22 Preferred Stock .....	\$ .....	\$ .....
14.23 Common Stock .....	\$ .....	\$ .....
14.24 Short-Term Investments .....	\$ .....	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ .....	\$ .....
14.26 All Other .....	\$ .....	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) .....	\$ .....	\$ .....
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....	\$ .....

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [  ] No [  ]

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

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

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

**STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

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

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

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

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [  ] No [  ]

17.4 If yes, give full information relating thereto:

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

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

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

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets? ..... Yes [  ] No [  ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? ..... Yes [  ] No [  ]

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

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

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

18.2 If no, list exceptions:

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

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

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

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

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

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

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

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

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

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY & CASUALTY INTERROGATORIES**

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? ..... Yes [  ] No [  ] N/A [  ]  
 If yes, attach an explanation.

See Note 26 for the Company's updated pooling percentage.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [  ] No [  ]  
 If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [  ] No [  ]

3.2 If yes, give full and complete information thereto.

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? ..... Yes [  ] No [  ]

4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Discount Rate	TOTAL DISCOUNT			DISCOUNT TAKEN DURING PERIOD				
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL
			TOTAL	0	0	0	0	0	0	0

5. Operating Percentages:

5.1 A&H loss percent ..... %

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses ..... %

6.1 Do you act as a custodian for health savings accounts? ..... Yes [  ] No [  ]

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

6.3 Do you act as an administrator for health savings accounts? ..... Yes [  ] No [  ]

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

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

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

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

## **SCHEDULE F - CEDED REINSURANCE**

Showing All New Reinsurers - Current Year to Date

**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

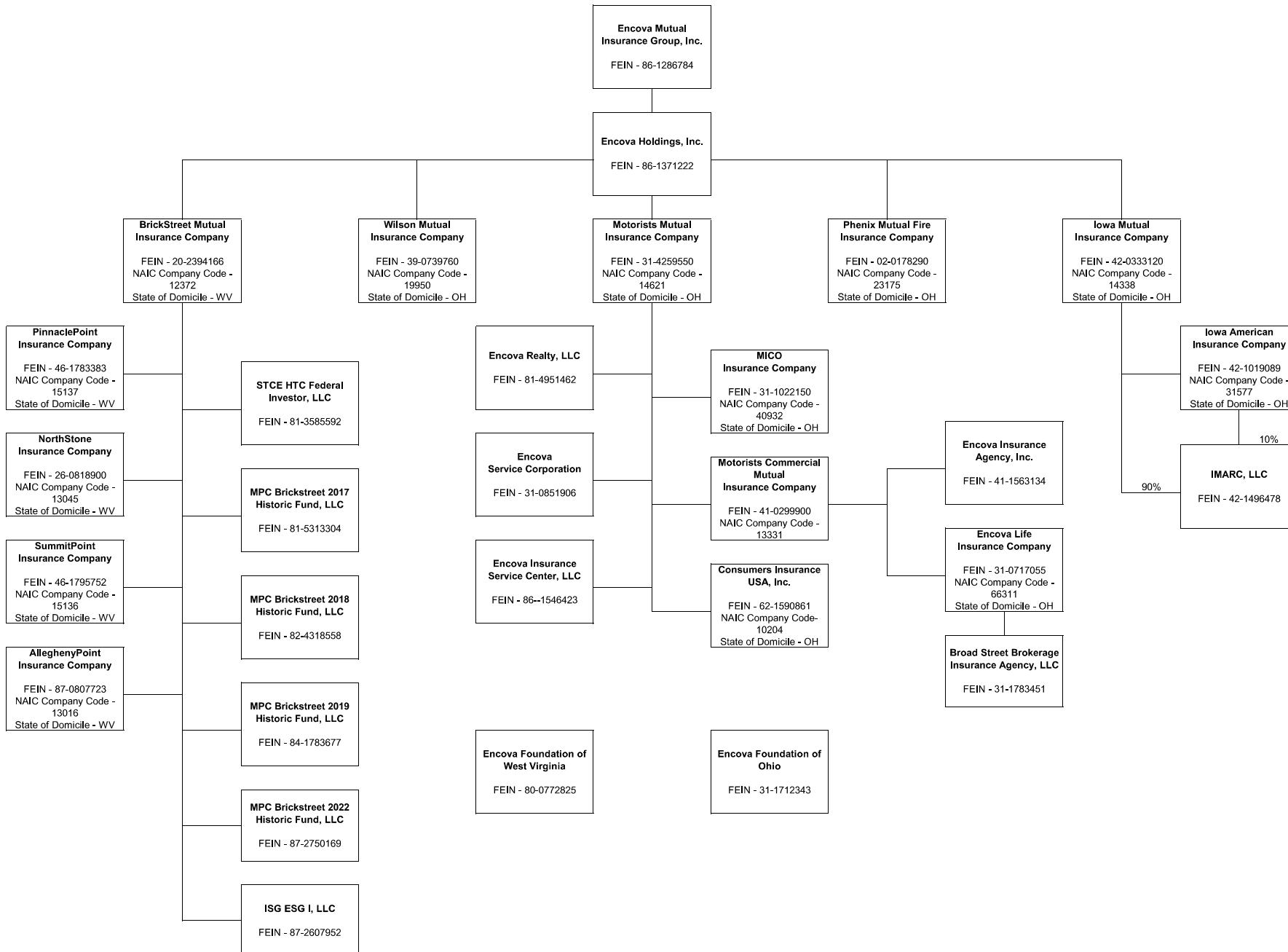
States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama .....	AL	N	0	0	0	0	0
2. Alaska .....	AK	N	0	0	0	0	0
3. Arizona .....	AZ	N	0	0	0	0	0
4. Arkansas .....	AR	N	0	0	0	0	0
5. California .....	CA	N	0	0	0	0	0
6. Colorado .....	CO	N	0	0	0	0	0
7. Connecticut .....	CT	N	0	0	0	0	0
8. Delaware .....	DE	N	0	0	0	0	0
9. District of Columbia .....	DC	N	0	0	0	0	0
10. Florida .....	FL	N	0	0	0	0	0
11. Georgia .....	GA	N	0	0	0	0	0
12. Hawaii .....	HI	N	0	0	0	0	0
13. Idaho .....	ID	N	0	0	0	0	0
14. Illinois .....	IL	L	0	0	(48,916)	164,093	4,527,887
15. Indiana .....	IN	N	0	0	0	0	0
16. Iowa .....	IA	L	0	0	64,225	23,299	1,073,795
17. Kansas .....	KS	N	0	0	0	0	0
18. Kentucky .....	KY	N	0	0	0	0	0
19. Louisiana .....	LA	N	0	0	0	0	0
20. Maine .....	ME	N	0	0	0	0	0
21. Maryland .....	MD	N	0	0	0	0	0
22. Massachusetts .....	MA	N	0	0	0	0	0
23. Michigan .....	MI	N	0	0	0	0	0
24. Minnesota .....	MN	N	0	0	0	0	0
25. Mississippi .....	MS	N	0	0	0	0	0
26. Missouri .....	MO	N	0	0	0	0	0
27. Montana .....	MT	N	0	0	0	0	0
28. Nebraska .....	NE	L	0	0	552,369	54,403	806,716
29. Nevada .....	NV	N	0	0	0	0	0
30. New Hampshire .....	NH	N	0	0	0	0	0
31. New Jersey .....	NJ	N	0	0	0	0	0
32. New Mexico .....	NM	N	0	0	0	0	0
33. New York .....	NY	N	0	0	0	0	0
34. North Carolina .....	NC	N	0	0	0	0	0
35. North Dakota .....	ND	L	0	0	0	0	0
36. Ohio .....	OH	L	0	0	0	0	0
37. Oklahoma .....	OK	N	0	0	0	0	0
38. Oregon .....	OR	N	0	0	0	0	0
39. Pennsylvania .....	PA	N	0	0	0	0	0
40. Rhode Island .....	RI	N	0	0	0	0	0
41. South Carolina .....	SC	N	0	0	0	0	0
42. South Dakota .....	SD	L	0	0	0	0	0
43. Tennessee .....	TN	N	0	0	0	0	0
44. Texas .....	TX	N	0	0	0	0	0
45. Utah .....	UT	N	0	0	0	0	0
46. Vermont .....	VT	N	0	0	0	0	0
47. Virginia .....	VA	N	0	0	0	0	0
48. Washington .....	WA	N	0	0	0	0	0
49. West Virginia .....	WV	N	0	0	0	0	0
50. Wisconsin .....	WI	N	0	0	0	0	0
51. Wyoming .....	WY	N	0	0	0	0	0
52. American Samoa .....	AS	N	0	0	0	0	0
53. Guam .....	GU	N	0	0	0	0	0
54. Puerto Rico .....	PR	N	0	0	0	0	0
55. U.S. Virgin Islands .....	VI	N	0	0	0	0	0
56. Northern Mariana Islands .....	MP	N	0	0	0	0	0
57. Canada .....	CAN	N	0	0	0	0	0
58. Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59. Totals	XXX	0	0	567,678	241,795	6,408,398	11,673,013
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0

(a) Active Status Counts:

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

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

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



## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tionship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
						Broad Street Brokerage Insurance Agency, LLC									
.0291	Encova Mutual Insurance Group	10204	31-1783451 62-1590861 42-1496478			Consumers Insurance USA, Inc.		.OH.	.N/A.	Encova Life Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	31577	42-1019089			IMARC, LLC		.IA.	.N/A.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	14338	42-0333120			Iowa American Insurance Company		.OH.	.RE.	Iowa Mutual Insurance Company	Ownership.	90.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		41-1563134			Iowa Mutual Insurance Company		.OH.	.UDP.	Encova Holdings, Inc.	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	40932	31-1022150			Encova Insurance Agency, Inc.		.MN.	.N/A.	Motorists Commercial Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	13331	41-0299900			MICO Insurance Company		.OH.	.IA.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	66311	31-0717055			Motorists Commercial Mutual Insurance Company		.OH.	.IA.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	14621	31-4259550			Encova Life Insurance Company		.OH.	.IA.	Motorists Commercial Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		31-0851906			Motorists Mutual Insurance Company		.OH.	.IA.	Encova Holdings, Inc.	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	23175	02-0178290			Encova Service Corporation		.OH.	.N/A.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	19950	39-0739760			Phenix Mutual Fire Insurance Company		.OH.	.IA.	Encova Holdings, Inc.	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		81-4951462			Wilson Mutual Insurance Company		.OH.	.IA.	Encova Holdings, Inc.	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		31-1712343			Encova Realty, LLC		.OH.	.N/A.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	12372	20-2394166			Encova Foundation of Ohio		.OH.	.N/A.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	15137	46-1783383			BrickStreet Mutual Insurance Company		.WV.	.IA.	Encova Holdings, Inc.	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	13045	26-0818900			PinnaclePoint Insurance Company		.WV.	.IA.	BrickStreet Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	15136	46-1795752			NorthStone Insurance Company		.WV.	.IA.	BrickStreet Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group	13016	87-0807723			SummitPoint Insurance Company		.WV.	.IA.	BrickStreet Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		80-0772825			AlleghenyPoint Insurance Company		.WV.	.IA.	BrickStreet Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		81-3585592			Encova Foundation of West Virginia, Inc.		.WV.	.N/A.	BrickStreet Mutual Insurance Company	Board		Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		81-5313304			STCE HTC Federal Investor, LLC		.GA.	.N/A.	BrickStreet Mutual Insurance Company	Ownership.	99.99	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		82-4318558			MPC Brickstreet 2017 Historic Fund, LLC		.GA.	.N/A.	BrickStreet Mutual Insurance Company	Ownership.	99.99	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		84-1783677			MPC Brickstreet 2018 Historic Fund, LLC		.GA.	.N/A.	BrickStreet Mutual Insurance Company	Ownership.	99.99	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		87-2750169			MPC Brickstreet 2019 Historic Fund, LLC		.GA.	.N/A.	BrickStreet Mutual Insurance Company	Ownership.	99.99	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		87-2607952			MPC Brickstreet 2020 Historic Fund, LLC		.GA.	.N/A.	BrickStreet Mutual Insurance Company	Ownership.	99.99	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		86-1546423			ISG ESG I, LLC		.GA.	.N/A.	BrickStreet Mutual Insurance Company	Ownership.	50.00	Encova Mutual Insurance Group, Inc.	YES	
.0291	Encova Mutual Insurance Group		86-1371222			Encova Insurance Service Center, LLC		.OH.	.N/A.	Motorists Mutual Insurance Company	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	
.0291	Encova Mutual Insurance Group		86-1286784			Encova Holdings, Inc.		.OH.	.UIP.	Encova Mutual Insurance Group, Inc.	Ownership.	100.00	Encova Mutual Insurance Group, Inc.	NO	

NONE

Asterisk		

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**PART 1 - LOSS EXPERIENCE**

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire .....			0.0	0.0
2.1 Allied Lines .....			0.0	0.0
2.2 Multiple peril crop .....			0.0	0.0
2.3 Federal flood .....			0.0	0.0
2.4 Private crop .....			0.0	0.0
2.5 Private flood .....			0.0	0.0
3. Farmowners multiple peril .....			0.0	0.0
4. Homeowners multiple peril .....			0.0	0.0
5. Commercial multiple peril .....		(25)	0.0	0.0
6. Mortgage guaranty .....			0.0	0.0
8. Ocean marine .....			0.0	0.0
9. Inland marine .....			0.0	0.0
10. Financial guaranty .....			0.0	0.0
11.1 Medical professional liability - occurrence .....			0.0	0.0
11.2 Medical professional liability - claims-made .....			0.0	0.0
12. Earthquake .....			0.0	0.0
13.1 Comprehensive (hospital and medical) individual .....			0.0	0.0
13.2 Comprehensive (hospital and medical) group .....			0.0	0.0
14. Credit accident and health .....			0.0	0.0
15.1 Vision only .....			0.0	0.0
15.2 Dental only .....			0.0	0.0
15.3 Disability income .....			0.0	0.0
15.4 Medicare supplement .....			0.0	0.0
15.5 Medicaid Title XIX .....			0.0	0.0
15.6 Medicare Title XVIII .....			0.0	0.0
15.7 Long-term care .....			0.0	0.0
15.8 Federal employees health benefits plan .....			0.0	0.0
15.9 Other health .....			0.0	0.0
16. Workers' compensation .....		50,676	0.0	0.0
17.1 Other liability - occurrence .....		(408,670)	0.0	0.0
17.2 Other liability - claims-made .....			0.0	0.0
17.3 Excess workers' compensation .....			0.0	0.0
18.1 Products liability - occurrence .....			0.0	0.0
18.2 Products liability - claims-made .....			0.0	0.0
19.1 Private passenger auto no-fault (personal injury protection) .....			0.0	0.0
19.2 Other private passenger auto liability .....			0.0	0.0
19.3 Commercial auto no-fault (personal injury protection) .....			0.0	0.0
19.4 Other commercial auto liability .....		(42,100)	0.0	0.0
21.1 Private passenger auto physical damage .....			0.0	0.0
21.2 Commercial auto physical damage .....			0.0	0.0
22. Aircraft (all perils) .....			0.0	0.0
23. Fidelity .....			0.0	0.0
24. Surety .....			0.0	0.0
26. Burglary and theft .....			0.0	0.0
27. Boiler and machinery .....			0.0	0.0
28. Credit .....			0.0	0.0
29. International .....			0.0	0.0
30. Warranty .....			0.0	0.0
31. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business .....	0	0	0.0	0.0
35. Totals .....	0	(400,119)	0.0	0.0
<b>DETAILS OF WRITE-INS</b>				
3401. ....				
3402. ....				
3403. ....				
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0.0	0.0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0.0	0.0

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**PART 2 - DIRECT PREMIUMS WRITTEN**

Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire .....	0		0
2.1 Allied Lines .....	0		
2.2 Multiple peril crop .....	0		
2.3 Federal flood .....	0		
2.4 Private crop .....	0		
2.5 Private flood .....	0		
3. Farmowners multiple peril .....	0		0
4. Homeowners multiple peril .....	0		0
5. Commercial multiple peril .....	0		0
6. Mortgage guaranty .....	0		0
8. Ocean marine .....	0		0
9. Inland marine .....	0		0
10. Financial guaranty .....	0		0
11.1 Medical professional liability - occurrence .....	0		0
11.2 Medical professional liability - claims-made .....	0		0
12. Earthquake .....	0		0
13.1 Comprehensive (hospital and medical) individual .....	0		
13.2 Comprehensive (hospital and medical) group .....	0		
14. Credit accident and health .....	0		0
15.1 Vision only .....	0		
15.2 Dental only .....	0		
15.3 Disability income .....	0		
15.4 Medicare supplement .....	0		
15.5 Medicaid Title XIX .....	0		
15.6 Medicare Title XVIII .....	0		
15.7 Long-term care .....	0		
15.8 Federal employees health benefits plan .....	0		
15.9 Other health .....	0		
16. Workers' compensation .....	0		0
17.1 Other liability - occurrence .....	0		0
17.2 Other liability - claims-made .....	0		0
17.3 Excess workers' compensation .....	0		0
18.1 Products liability - occurrence .....	0		0
18.2 Products liability - claims-made .....	0		0
19.1 Private passenger auto no-fault (personal injury protection) .....	0		
19.2 Other private passenger auto liability .....	0		
19.3 Commercial auto no-fault (personal injury protection) .....	0		
19.4 Other commercial auto liability .....	0		
21.1 Private passenger auto physical damage .....	0		
21.2 Commercial auto physical damage .....	0		
22. Aircraft (all perils) .....	0		0
23. Fidelity .....	0		0
24. Surety .....	0		0
26. Burglary and theft .....	0		0
27. Boiler and machinery .....	0		0
28. Credit .....	0		0
29. International .....	0		0
30. Warranty .....	0		0
31. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business .....	0	0	0
35. Totals .....	0	0	0
<b>DETAILS OF WRITE-INS</b>			
3401. ....			
3402. ....			
3403. ....			
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0

## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**PART 3 (000 omitted)**

## LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

Years in Which Losses Occurred	1 Prior Year-End Known Case Loss and LAE Reserves	2 Prior Year-End IBNR Loss and LAE Reserves	3 Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	4 2022 Loss and LAE Payments on Claims Reported as of Prior Year-End	5 2022 Loss and LAE Payments on Claims Unreported as of Prior Year-End	6 Total 2022 Loss and LAE Payments (Cols. 4+5)	7 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	8 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	9 Q.S. Date IBNR Loss and LAE Reserves	10 Total Q.S. Loss and LAE Reserves (Cols. 7+8+9)	11 Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4+7 minus Col. 1)	12 Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	13 Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2019 + Prior .....			0			0				0	0	0	0
2. 2020 .....			0			0				0	0	0	0
3. Subtotals 2020 + Prior .....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2021 .....			0			0				0	0	0	0
5. Subtotals 2021 + Prior .....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2022 .....	XXX	XXX	XXX	XXX		0	XXX	0	0	0	XXX	XXX	XXX
7. Totals .....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Prior Year-End Surplus As Regards Policyholders	9,258									Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7	
										1. 0.0	2. 0.0	3. 0.0	Col. 13, Line 7 As a % of Col. 1 Line 8
													4. 0.0

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

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

**AUGUST FILING**

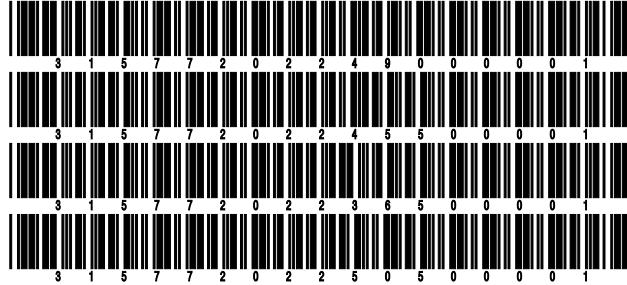
5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
---	-----

Explanations:

- 1.
- 2.
- 3.
- 4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]



2. Supplement A to Schedule T [Document Identifier 455]



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



4. Director and Officer Supplement [Document Identifier 505]



STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY  
**OVERFLOW PAGE FOR WRITE-INS**

## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**SCHEDULE A - VERIFICATION**

Real Estate

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

**NONE****SCHEDULE B - VERIFICATION**

Mortgage Loans

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

**NONE****SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	500	2,670
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		
2.2 Additional investment made after acquisition .....	0	
3. Capitalized deferred interest and other .....		0
4. Accrual of discount .....		0
5. Unrealized valuation increase (decrease) .....		(2,170)
6. Total gain (loss) on disposals .....		
7. Deduct amounts received on disposals .....		
8. Deduct amortization of premium and depreciation .....		0
9. Total foreign exchange change in book/adjusted carrying value .....		0
10. Deduct current year's other than temporary impairment recognized .....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	500	500
12. Deduct total nonadmitted amounts .....	500	500
13. Statement value at end of current period (Line 11 minus Line 12) .....	0	0

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	17,978,804	19,492,995
2. Cost of bonds and stocks acquired .....	947,256	3,657,060
3. Accrual of discount .....	2,079	17,435
4. Unrealized valuation increase (decrease) .....	3,871	1,110
5. Total gain (loss) on disposals .....	0	43,448
6. Deduct consideration for bonds and stocks disposed of .....	447,207	5,104,419
7. Deduct amortization of premium .....	23,102	134,286
8. Total foreign exchange change in book/adjusted carrying value .....	0	
9. Deduct current year's other than temporary impairment recognized .....	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	0	5,460
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	18,461,700	17,978,804
12. Deduct total nonadmitted amounts .....	0	
13. Statement value at end of current period (Line 11 minus Line 12) .....	18,461,700	17,978,804

## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a) .....	17,185,951	947,256	1,057,207	83,249	17,159,249	0	0	17,185,951
2. NAIC 2 (a) .....	1,402,849	0	0	(100,397)	1,302,452	0	0	1,402,849
3. NAIC 3 (a) .....	0	0	0	0	0	0	0	0
4. NAIC 4 (a) .....	0	0	0	0	0	0	0	0
5. NAIC 5 (a) .....	0	0	0	0	0	0	0	0
6. NAIC 6 (a) .....	0	0	0	0	0	0	0	0
7. Total Bonds .....	18,588,800	947,256	1,057,207	(17,148)	18,461,701	0	0	18,588,800
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....	0	0	0	0	0	0	0	0
9. NAIC 2 .....	0	0	0	0	0	0	0	0
10. NAIC 3 .....	0	0	0	0	0	0	0	0
11. NAIC 4 .....	0	0	0	0	0	0	0	0
12. NAIC 5 .....	0	0	0	0	0	0	0	0
13. NAIC 6 .....	0	0	0	0	0	0	0	0
14. Total Preferred Stock .....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock .....	18,588,800	947,256	1,057,207	(17,148)	18,461,701	0	0	18,588,800

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ .....0 ; NAIC 2 \$ .....0 ; NAIC 3 \$ .....0 NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0

SI02

Schedule DA - Part 1 - Short-Term Investments

**N O N E**

Schedule DA - Verification - Short-Term Investments

**N O N E**

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

**N O N E**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

**N O N E**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

**N O N E**

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	3,834,495	1,290,901
2. Cost of cash equivalents acquired	1,011,744	6,679,605
3. Accrual of discount	5	2
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	1,434,230	4,136,012
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	3,412,014	3,834,495
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	3,412,014	3,834,495

Schedule A - Part 2 - Real Estate Acquired and Additions Made  
**N O N E**

Schedule A - Part 3 - Real Estate Disposed  
**N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made  
**N O N E**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid  
**N O N E**

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made  
**N O N E**

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid  
**N O N E**

## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation, NAIC Designation Modifier and SVO Adminis- trative Symbol
010392-FU-7	ALABAMA POWER CO		.02/24/2022	PERSHING DIV OF DLJ SEC LNDNG	88,236	100,000		.657	1.E FE
010392-FX-1	ALABAMA POWER CO		.03/02/2022	MITSUBISHI UFJ SECURITIES	99,931	100,000		0	1.E FE
17327C-AN-3	CITI GROUP INC		.01/18/2022	Citigroup (SSB)	100,000	100,000		0	1.G FE
24422E-IA-3	JOHN DEERE CAPITAL CORP		.01/04/2022	RBC CAPITAL MARKETS	174,900	175,000		0	1.F FE
38141G-ZK-3	GOLDMAN SACHS GROUP INC		.01/19/2022	GOLDMAN	75,000	75,000		0	1.F FE
437076-CA-8	HOME DEPOT INC		.03/14/2022	CREDIT SUISSE SECURITIES	148,245	150,000		1,573	1.F FE
747525-AU-7	QUALCOMM INC		.02/08/2022	Various	260,944	250,000		1,806	1.F FE
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					947,256	950,000		4,035	XXX
2509999997. Total - Bonds - Part 3					947,256	950,000		4,035	XXX
2509999998. Total - Bonds - Part 5					XXX	XXX		XXX	XXX
2509999999. Total - Bonds					947,256	950,000		4,035	XXX
4509999997. Total - Preferred Stocks - Part 3					0	XXX		0	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX		XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX		0	XXX
5989999997. Total - Common Stocks - Part 3					0	XXX		0	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX		XXX	XXX
5989999999. Total - Common Stocks					0	XXX		0	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX		0	XXX
6009999999 - Totals					947,256	XXX		4,035	XXX

## STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

## SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1 CUSIP Ident- ification	2 Description	3 For- eign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consid- eration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Con- tractual Maturity Date	22 NAIC Design- nation, NAIC Design- nation Modifi- cation and SVO Adminis- trative Symbol	
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amor- tization)/ Accretion	13 Other Than Temporary Impairment Recogn- ized	14 Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value								
.361760-CR-2	GN 762680 - RMBS	.....	03/01/2022	Paydown .....	10,778	10,778	11,134	11,140	0	(362)	0	(362)	0	0	10,778	0	0	0	0	45	02/15/2041	1.A .....
.362006-YU-3	GN 750523 - RMBS	.....	03/01/2022	Paydown .....	28,850	28,850	29,741	30,088	0	(1,238)	0	(1,238)	0	0	28,850	0	0	0	0	286	11/15/2040	1.A .....
0109999999. Subtotal - Bonds - U.S. Governments					39,628	39,628	40,875	41,228	0	(1,600)	0	(1,600)	0	0	39,628	0	0	0	0	331	XXX	XXX
.358775-4X-9	FRISCO TEX	.....	02/15/2022	Call @ 100.00 .....	100,000	100,000	111,036	100,360	0	(360)	0	(360)	0	0	100,000	0	0	0	0	2,500	02/15/2024	1.A FE .....
0709999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					100,000	100,000	111,036	100,360	0	(360)	0	(360)	0	0	100,000	0	0	0	0	2,500	XXX	XXX
.196707-JII-4	COLORADO ST BRD GOVERNORS UNIV ENTERPRIS	.....	03/01/2022	Call @ 100.00 .....	100,000	100,000	111,438	100,491	0	(491)	0	(491)	0	0	100,000	0	0	0	0	2,500	03/01/2027	1. FE .....
.3131XT-N6-3	FH ZM0413 - RMBS	.....	03/01/2022	Paydown .....	2,089	2,089	2,162	2,173	0	(84)	0	(84)	0	0	2,089	0	0	0	0	12	11/01/2045	1.A .....
.31329K-LR-3	FH ZA2136 - RMBS	.....	03/01/2022	Paydown .....	320	320	336	330	0	(10)	0	(10)	0	0	320	0	0	0	0	3	09/01/2029	1.A .....
.313245-E4-3	FH ZS4655 - RMBS	.....	03/01/2022	Paydown .....	1,733	1,733	1,808	1,845	0	(112)	0	(112)	0	0	1,733	0	0	0	0	10	03/01/2046	1.A .....
.31324C-SR-2	FH ZT0528 - RMBS	.....	03/01/2022	Paydown .....	3,790	3,790	3,892	3,887	0	(97)	0	(97)	0	0	3,790	0	0	0	0	21	08/01/2046	1.A .....
.3133L8-ED-3	FH RC1932 - RMBS	.....	03/01/2022	Paydown .....	14,487	14,487	14,966	14,946	0	(459)	0	(459)	0	0	14,487	0	0	0	0	45	04/01/2036	1.A .....
.31371N-KK-6	FN 257282 - RMBS	.....	03/01/2022	Paydown .....	460	460	456	457	0	4	0	4	0	0	460	0	0	0	0	4	07/01/2028	1.A .....
.3137A5-SG-0	FH 3786 HE - CMO/RMBS	.....	01/18/2022	Paydown .....	171	171	178	171	0	0	0	0	0	0	171	0	0	0	0	0	03/15/2038	1.A .....
.3138WJ-YB-8	FN AS8805 - RMBS	.....	03/01/2022	Paydown .....	12,691	12,691	13,179	13,147	0	(456)	0	(456)	0	0	12,691	0	0	0	0	76	02/01/2042	1.A .....
.3138X3-BX-9	FN AU3653 - RMBS	.....	03/01/2022	Paydown .....	1,158	1,158	1,217	1,202	0	(45)	0	(45)	0	0	1,158	0	0	0	0	8	09/01/2043	1.A .....
.3138Y6-NY-7	FN AX4974 - RMBS	.....	03/01/2022	Paydown .....	1,836	1,836	1,946	1,908	0	(72)	0	(72)	0	0	1,836	0	0	0	0	11	12/01/2044	1.A .....
.31397S-RW-6	FNR 2011-24 EY - CMO/RMBS	.....	03/01/2022	Paydown .....	12,114	12,114	10,746	11,818	0	296	0	296	0	0	12,114	0	0	0	0	61	04/25/2026	1.A .....
.3140EV-4E-4	FN BC1720 - RMBS	.....	03/01/2022	Paydown .....	2,386	2,386	2,506	2,482	0	(97)	0	(97)	0	0	2,386	0	0	0	0	8	01/01/2046	1.A .....
.3140QA-NN-6	FN CA3096 - RMBS	.....	03/01/2022	Paydown .....	27,230	27,230	28,546	29,365	0	(2,135)	0	(2,135)	0	0	27,230	0	0	0	0	187	02/01/2049	1.A .....
.3140QE-S6-0	FN CA6840 - RMBS	.....	03/01/2022	Paydown .....	14,243	14,243	14,930	14,882	0	(640)	0	(640)	0	0	14,243	0	0	0	0	45	09/01/2035	1.A .....
.3140X8-KJ-5	FN FM4796 - RMBS	.....	03/01/2022	Paydown .....	10,067	10,067	10,494	10,481	0	(414)	0	(414)	0	0	10,067	0	0	0	0	26	01/01/2050	1.A .....
.31416X-FA-3	FN AB1960 - RMBS	.....	03/01/2022	Paydown .....	1,872	1,872	2,004	1,981	0	(109)	0	(109)	0	0	1,872	0	0	0	0	10	12/01/2040	1.A .....
.31418D-6L-1	FN MA4474 - RMBS	.....	03/01/2022	Paydown .....	4,684	4,684	4,788	4,785	0	(101)	0	(101)	0	0	4,684	0	0	0	0	16	11/01/2041	1.A .....
0909999999. Subtotal - Bonds - U.S. Special Revenues					211,330	211,330	225,591	216,351	0	(5,022)	0	(5,022)	0	0	211,330	0	0	0	0	3,043	XXX	XXX
.143140-AB-0	CARMX 2021-2 A2A - ABS	.....	03/15/2022	Paydown .....	52,183	52,183	52,179	52,181	0	2	0	2	0	0	52,183	0	0	0	0	23	06/17/2024	1.A FE .....
.55389T-AA-9	MW10T 211W A - RMBS	.....	03/20/2022	Paydown .....	7,090	7,090	7,088	7,088	0	2	0	2	0	0	7,090	0	0	0	0	13	01/22/2041	1.A FE .....
.58769K-AC-8	MBALT 2021-B A2 - ABS	.....	03/15/2022	Paydown .....	34,064	34,064	34,061	34,063	0	1	0	1	0	0	34,064	0	0	0	0	12	01/16/2024	1.A FE .....
.82653E-AA-5	SFPC 2019-1 A - RMBS	.....	03/20/2022	Paydown .....	2,913	2,913	2,913	2,913	0	0	0	0	0	0	2,913	0	0	0	0	15	01/22/2036	1.A FE .....
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					96,249	96,249	96,241	96,245	0	5	0	5	0	0	96,249	0	0	0	0	63	XXX	XXX
2509999997. Total - Bonds - Part 4					447,207	447,207	473,743	454,184	0	(6,977)	0	(6,977)	0	0	447,207	0	0	0	0	5,936	XXX	XXX
2509999998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2509999997. Total - Bonds					447,207	447,207	473,743	454,184	0	(6,977)	0	(6,977)	0	0	447,207	0	0	0	0	5,936	XXX	XXX
4509999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals					447,207	XXX	473,743	454,184	0	(6,977)	0	(6,977)	0	0	447,207	0	0	0	0	5,936	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open  
**N O N E**

Schedule DB - Part B - Section 1 - Futures Contracts Open  
**N O N E**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made  
**N O N E**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open  
**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By  
**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To  
**N O N E**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees  
**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned  
**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned  
**N O N E**

Schedule E - Part 1 - Month End Depository Balances  
**N O N E**

STATEMENT AS OF MARCH 31, 2022 OF THE IOWA AMERICAN INSURANCE COMPANY

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0109999999. Total - U.S. Government Bonds						0	0	0
0309999999. Total - All Other Government Bonds						0	0	0
0509999999. Total - U.S. States, Territories and Possessions Bonds						0	0	0
0709999999. Total - U.S. Political Subdivisions Bonds						0	0	0
0909999999. Total - U.S. Special Revenues Bonds						0	0	0
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						0	0	0
1309999999. Total - Hybrid Securities						0	0	0
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds						0	0	0
1909999999. Subtotal - Unaffiliated Bank Loans						0	0	0
2419999999. Total - Issuer Obligations						0	0	0
2429999999. Total - Residential Mortgage-Backed Securities						0	0	0
2439999999. Total - Commercial Mortgage-Backed Securities						0	0	0
2449999999. Total - Other Loan-Backed and Structured Securities						0	0	0
2459999999. Total - SVO Identified Funds						0	0	0
2469999999. Total - Affiliated Bank Loans						0	0	0
2479999999. Total - Unaffiliated Bank Loans						0	0	0
2509999999. Total Bonds						0	0	0
000000-00-0	FIDELITY	SD...	12/06/2021	.0,000		75,001	0	2
316175-10-8	FIDELITY IMM:GOVT I		03/28/2022	.0,130		1,736,752	88	35
316175-10-8	FIDELITY IMM:GOVT I	SD...	12/06/2021	.0,130		1,600,262	82	40
8309999999. Subtotal - All Other Money Market Mutual Funds						3,412,014	171	77
8609999999 - Total Cash Equivalents						3,412,014	171	77