



ANNUAL STATEMENT

For the Year Ended December 31, 2015
of the Condition and Affairs of the

EVERGREEN NATIONAL INDEMNITY COMPANY

NAIC Group Code.....4765, 4765 <small>(Current Period) (Prior Period)</small>	NAIC Company Code..... 12750	Employer's ID Number..... 36-2467238
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... December 30, 1939	Commenced Business..... January 1, 1940	
Statutory Home Office	6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US 44124 <small>(Street and Number) (City or Town, State, Country and Zip Code)</small>	
Main Administrative Office	6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US..... 44124 440-229-3420 <small>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</small>	
Mail Address	6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US 44124 <small>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</small>	
Primary Location of Books and Records	6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US 44124440-229-3403 <small>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</small>	
Internet Web Site Address		
Statutory Statement Contact	DAVID ALAN CANZONE <small>(Name)</small> dcanzone@evergreen-national.com <small>(E-Mail Address)</small>	440-229-3403 <small>(Area Code) (Telephone Number) (Extension)</small> 440-229-3421 <small>(Fax Number)</small>

OFFICERS

Name	Title	Name	Title
1. MATTHEW TRACY TUCKER	PRESIDENT	2. DAVID ALAN CANZONE	CFO/TREASURER
3. WAN CHEN COLLIER	SECRETARY	4. ROBERT WILLARD SHEPARD	VICE PRESIDENT OF FINANCE

OTHER

DIRECTORS OR TRUSTEES

CHARLES KYLE SLATERY	MATTHEW TRACY TUCKER	ROBERT WILLARD SHEPARD	JAMES DONALD LACKIE
DAVID ALAN CANZONE	EMMEL BERNHARDT GOLDEN III #		

State of..... Ohio
County of..... Cuyahoga

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

(Signature) MATTHEW TRACY TUCKER	(Signature) DAVID ALAN CANZONE	(Signature) WAN CHEN COLLIER
1. (Printed Name) PRESIDENT	2. (Printed Name) CFO/TREASURER	3. (Printed Name) SECRETARY
(Title)	(Title)	(Title)
Subscribed and sworn to before me This _____ day of _____ 2016	a. Is this an original filing? b. If no	Yes [X] No [] 1. State the amendment number 2. Date filed 3. Number of pages attached

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	18,324,350		18,324,350	19,927,610
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	4,966,395		4,966,395	4,215,923
2.2 Common stocks.....	8,079,036		8,079,036	9,631,168
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	830,870		830,870	840,736
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....4,040,360, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....1,934,702, Schedule DA).....	5,975,062		5,975,062	6,375,255
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	2,857,205		2,857,205	2,554,997
9. Receivables for securities.....	19,770		19,770	52,285
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	41,052,688	0	41,052,688	43,597,974
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	320,891		320,891	290,942
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,966,454		1,966,454	2,062,101
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	379,847	62,365	317,482	315,130
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....	1,520,261	626,265	893,996	479,241
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	7,864	2,999	4,865	9,508
21. Furniture and equipment, including health care delivery assets (\$.....0).....	1,015	1,015	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	8,183	8,183	0	4,611
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	45,257,203	700,827	44,556,376	46,759,508
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTALS (Lines 26 and 27).....	45,257,203	700,827	44,556,376	46,759,508
DETAILS OF WRITE-INS				
1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Miscellaneous Receivable.....			0	4,611
2502. Prepaid Insurance.....	8,183	8,183	0	
2503.			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	8,183	8,183	0	4,611

EVERGREEN NATIONAL INDEMNITY COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....	2,736,418	2,543,335
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....	912,611	943,087
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....	323,026	171,356
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	281,123	189,245
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	105,420	96,011
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....11,901,530 and including warranty reserves of \$.....82,823 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	4,991,067	4,871,404
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	3,448,330	3,526,692
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....		
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	1,212,670	1,209,044
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	14,010,665	13,550,174
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	14,010,665	13,550,174
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	3,018,004	3,018,004
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.....	25,841,820	25,841,820
35. Unassigned funds (surplus).....	1,685,887	4,349,510
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	30,545,711	33,209,334
38. TOTALS (Page 2, Line 28, Col. 3).....	44,556,376	46,759,508

DETAILS OF WRITE-INS		
2501. Unrestricted Collateral.....	925,499	945,719
2502. Pledged as Collateral.....	287,171	263,325
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	1,212,670	1,209,044
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

EVERGREEN NATIONAL INDEMNITY COMPANY
STATEMENT OF INCOME

UNDERWRITING INCOME		1	2
		Current Year	Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4).....	11,346,499	12,096,591
DEDUCTIONS			
2.	Losses incurred (Part 2, Line 35, Column 7).....	193,298	301,251
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	(44,205)	(274,267)
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	8,813,430	10,721,074
5.	Aggregate write-ins for underwriting deductions.....	0	0
6.	Total underwriting deductions (Lines 2 through 5).....	8,962,523	10,748,058
7.	Net income of protected cells.....		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	2,383,976	1,348,533
INVESTMENT INCOME			
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17).....	1,455,780	849,340
10.	Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....	(385,999)	454,783
11.	Net investment gain (loss) (Lines 9 + 10).....	1,069,781	1,304,123
OTHER INCOME			
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0	
13.	Finance and service charges not included in premiums.....		
14.	Aggregate write-ins for miscellaneous income.....	522	627
15.	Total other income (Lines 12 through 14).....	522	627
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	3,454,279	2,653,283
17.	Dividends to policyholders.....		
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).....	3,454,279	2,653,283
19.	Federal and foreign income taxes incurred.....	1,135,519	748,122
20.	Net income (Line 18 minus Line 19) (to Line 22).....	2,318,760	1,905,161
CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	33,209,334	33,860,860
22.	Net income (from Line 20).....	2,318,760	1,905,161
23.	Net transfers (to) from Protected Cell accounts.....		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	(2,965,912)	(149,889)
25.	Change in net unrealized foreign exchange capital gain (loss).....		
26.	Change in net deferred income tax.....	882,992	(105,820)
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....	(449,463)	172,091
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29.	Change in surplus notes.....		
30.	Surplus (contributed to) withdrawn from protected cells.....		
31.	Cumulative effect of changes in accounting principles.....		
32.	Capital changes:		
32.1	Paid in.....		
32.2	Transferred from surplus (Stock Dividend).....		
32.3	Transferred to surplus.....		
33.	Surplus adjustments:		
33.1	Paid in.....		
33.2	Transferred to capital (Stock Dividend).....		
33.3.	Transferred from capital.....		
34.	Net remittances from or (to) Home Office.....		
35.	Dividends to stockholders.....	(2,450,000)	(2,450,000)
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37.	Aggregate write-ins for gains and losses in surplus.....	0	(23,068)
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37).....	(2,663,623)	(651,525)
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	30,545,711	33,209,334
DETAILS OF WRITE-INS			
0501.	.....	
0502.	.....	
0503.	.....	
0598.	Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0
1401.	Miscellaneous Income.....	522	627
1402.	.....	
1403.	.....	
1498.	Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	522	627
3701.	Misc Surplus Change.....		(23,068)
3702.	.....	
3703.	.....	
3798.	Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799.	Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	(23,068)

EVERGREEN NATIONAL INDEMNITY COMPANY
CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	11,483,447	12,184,934
2. Net investment income.....	1,443,529	906,106
3. Miscellaneous income.....	522	627
4. Total (Lines 1 through 3).....	12,927,498	13,091,667
5. Benefit and loss related payments.....	2,567	61,643
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	8,555,768	10,833,497
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	1,126,110	880,000
10. Total (Lines 5 through 9).....	9,684,445	11,775,140
11. Net cash from operations (Line 4 minus Line 10).....	3,243,053	1,316,527
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	5,734,736	13,109,237
12.2 Stocks.....	3,334,227	5,404,345
12.3 Mortgage loans.....	9,866	
12.4 Real estate.....		
12.5 Other invested assets.....	(266,496)	
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....	32,515	
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	8,844,848	18,513,583
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	4,724,044	13,604,549
13.2 Stocks.....	5,163,848	17,953,789
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....	181,857	2,054,997
13.6 Miscellaneous applications.....		52,285
13.7 Total investments acquired (Lines 13.1 to 13.6).....	10,069,750	33,665,619
14. Net increase (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(1,224,902)	(15,152,037)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....	2,450,000	2,450,000
16.6 Other cash provided (applied).....	31,656	37,022
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(2,418,344)	(2,412,978)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(400,193)	(16,248,488)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	6,375,255	22,623,743
19.2 End of year (Line 18 plus Line 19.1).....	5,975,062	6,375,255

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

20.0001
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EVERGREEN NATIONAL INDEMNITY COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business		1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums December 31 Prior Year- per Col. 3, Last Year's Part 1	3 Unearned Premiums December 31 Current Year- per Col. 5, Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire.....				.....0
2.	Allied lines.....				.....0
3.	Farmowners multiple peril.....				.....0
4.	Homeowners multiple peril.....				.....0
5.	Commercial multiple peril.....				.....0
6.	Mortgage guaranty.....				.....0
8.	Ocean marine.....				.....0
9.	Inland marine.....				.....0
10.	Financial guaranty.....				.....0
11.1	Medical professional liability - occurrence.....				.....0
11.2	Medical professional liability - claims-made.....				.....0
12.	Earthquake.....				.....0
13.	Group accident and health.....				.....0
14.	Credit accident and health (group and individual).....				.....0
15.	Other accident and health.....				.....0
16.	Workers' compensation.....				.....0
17.1	Other liability - occurrence.....				.....0
17.2	Other liability - claims-made.....				.....0
17.3	Excess workers' compensation.....				.....0
18.1	Products liability - occurrence.....				.....0
18.2	Products liability - claims-made.....				.....0
19.1, 19.2	Private passenger auto liability.....				.....0
19.3, 19.4	Commercial auto liability.....				.....0
21.	Auto physical damage.....				.....0
22.	Aircraft (all perils).....				.....0
23.	Fidelity.....				.....0
24.	Surety.....	.....11,380,692	.....4,759,390	.....4,852,340	.....11,287,742
26.	Burglary and theft.....				.....0
27.	Boiler and machinery.....				.....0
28.	Credit.....				.....0
29.	International.....				.....0
30.	Warranty.....	.....85,470	.....112,014	.....138,727	.....58,757
31.	Reinsurance - nonproportional assumed property.....				.....0
32.	Reinsurance - nonproportional assumed liability.....				.....0
33.	Reinsurance - nonproportional assumed financial lines.....				.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....11,466,162	.....4,871,404	.....4,991,067	.....11,346,499

DETAILS OF WRITE-INS

3401.	.....	.....	.....	.....	.....0
3402.	.....	.....	.....	.....	.....0
3403.	.....	.....	.....	.....	.....0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0

EVERGREEN NATIONAL INDEMNITY COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

		1	2	3	4	5
Line of Business		Amount Unearned (Running One Year or Less from Date of Policy) (a)	Amount Unearned (Running More Than One Year from Date of Policy) (a)	Earned But Unbilled Premium	Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1.	Fire.....					.0
2.	Allied lines.....					.0
3.	Farmowners multiple peril.....					.0
4.	Homeowners multiple peril.....					.0
5.	Commercial multiple peril.....					.0
6.	Mortgage guaranty.....					.0
8.	Ocean marine.....					.0
9.	Inland marine.....					.0
10.	Financial guaranty.....					.0
11.1	Medical professional liability - occurrence.....					.0
11.2	Medical professional liability - claims-made.....					.0
12.	Earthquake.....					.0
13.	Group accident and health.....					.0
14.	Credit accident and health (group and individual).....					.0
15.	Other accident and health.....					.0
16.	Workers' compensation.....					.0
17.1	Other liability - occurrence.....					.0
17.2	Other liability - claims-made.....					.0
17.3	Excess workers' compensation.....					.0
18.1	Products liability - occurrence.....					.0
18.2	Products liability - claims-made.....					.0
19.1, 19.2	Private passenger auto liability.....					.0
19.3, 19.4	Commercial auto liability.....					.0
21.	Auto physical damage.....					.0
22.	Aircraft (all perils).....					.0
23.	Fidelity.....					.0
24.	Surety.....	4,852,340				4,852,340
26.	Burglary and theft.....					.0
27.	Boiler and machinery.....					.0
28.	Credit.....					.0
29.	International.....					.0
30.	Warranty.....	138,727				138,727
31.	Reinsurance - nonproportional assumed property.....					.0
32.	Reinsurance - nonproportional assumed liability.....					.0
33.	Reinsurance - nonproportional assumed financial lines.....					.0
34.	Aggregate write-ins for other lines of business.....	0	.0	.0	.0	.0
35.	TOTALS.....	4,991,067	.0	.0	.0	4,991,067
36.	Accrued retrospective premiums based on experience.....					
37.	Earned but unbilled premiums.....					.0
38.	Balance (sum of Lines 35 through 37).....					4,991,067

DETAILS OF WRITE-INS

3401.	.....					.0
3402.	.....					.0
3403.	.....					.0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	.0	.0	.0	.0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	.0	.0	.0	.0

(a) State here basis of computation used in each case: Monthly pro-rata

EVERGREEN NATIONAL INDEMNITY COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written (Cols. 1 + 2 + 3 - 4 - 5)
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire.....						.....0
2. Allied lines.....						.....0
3. Farmowners multiple peril.....						.....0
4. Homeowners multiple peril.....						.....0
5. Commercial multiple peril.....						.....0
6. Mortgage guaranty.....						.....0
8. Ocean marine.....						.....0
9. Inland marine.....						.....0
10. Financial guaranty.....						.....0
11.1 Medical professional liability - occurrence.....						.....0
11.2 Medical professional liability - claims-made.....						.....0
12. Earthquake.....						.....0
13. Group accident and health.....						.....0
14. Credit accident and health (group and individual).....						.....0
15. Other accident and health.....						.....0
16. Workers' compensation.....						.....0
17.1 Other liability - occurrence.....						.....0
17.2 Other liability - claims-made.....						.....0
17.3 Excess workers' compensation.....						.....0
18.1 Products liability - occurrence.....						.....0
18.2 Products liability - claims-made.....						.....0
19.1, 19.2 Private passenger auto liability.....						.....0
19.3, 19.4 Commercial auto liability.....						.....0
21. Auto physical damage.....						.....0
22. Aircraft (all perils).....						.....0
23. Fidelity.....						.....0
24. Surety.....	34,015,583		3,660,840		26,295,731	11,380,692
26. Burglary and theft.....						.....0
27. Boiler and machinery.....						.....0
28. Credit.....						.....0
29. International.....						.....0
30. Warranty.....	47,905		37,565			85,470
31. Reinsurance - nonproportional assumed property.....	XXX					.....0
32. Reinsurance - nonproportional assumed liability.....	XXX					.....0
33. Reinsurance - nonproportional assumed financial lines.....	XXX					.....0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	.....0
35. TOTALS.....	34,063,488	0	3,698,405	0	26,295,731	11,466,162

DETAILS OF WRITE-INS						
3401. ....						.....0
3402. ....						.....0
3403. ....						.....0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	.....0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	.....0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]
If yes: 1. The amount of such installment premiums \$......0.
2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$......0.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business		Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
		1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1.	Fire.....				.0			.0	0.0
2.	Allied lines.....				.0			.0	0.0
3.	Farmowners multiple peril.....				.0			.0	0.0
4.	Homeowners multiple peril.....				.0			.0	0.0
5.	Commercial multiple peril.....				.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.	Group accident and health.....				.0			.0	0.0
14.	Credit accident and health (group and individual).....				.0			.0	0.0
15.	Other accident and health.....				.0			.0	0.0
16.	Workers' compensation.....	541,929	3,015	544,944	.0			.0	0.0
17.1	Other liability - occurrence.....				.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, 19.2	Private passenger auto liability.....				.0			.0	0.0
19.3, 19.4	Commercial auto liability.....				.0			.0	0.0
21.	Auto physical damage.....				.0			.0	0.0
22.	Aircraft (all perils).....				.0			.0	0.0
23.	Fidelity.....				.0			.0	0.0
24.	Surety.....	(6,000)		(6,215)	215	2,736,418	2,543,335	193,298	1.7
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			.0			.0	0.0
32.	Reinsurance - nonproportional assumed liability.....	XXX			.0			.0	0.0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			.0			.0	0.0
34.	Aggregate write-ins for other lines of business.....	.0	.0	.0	.0	.0	.0	.0	0.0
35.	TOTALS.....	535,929	3,015	538,729	215	2,736,418	2,543,335	193,298	1.7

DETAILS OF WRITE-INS

3401.	.....				.0			.0	0.0
3402.	.....				.0			.0	0.0
3403.	.....				.0			.0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	.0	.0	.0	.0	.0	.0	.0	XXX
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	.0	.0	.0	.0	.0	.0	.0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire.....				.....0	.....	.....	.....	.....0	.....
2.	Allied lines.....				.....0	.....	.....	.....	.....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.	Group accident and health.....				.....0	.....	.....	.....	(a).....0	.....
14.	Credit accident and health (group and individual).....				.....0	.....	.....	.....	.....0	.....
15.	Other accident and health.....				.....0	.....	.....	.....	(a).....0	.....
16.	Workers' compensation.....	.....5,255,224	.....16,850	.....5,272,074	.....0	.....2,526,439	.....34,952	.....2,561,391	.....0	.....
17.1	Other liability - occurrence.....				.....0	.....4,886	.....	.....4,886	.....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, 19.2	Private passenger auto liability.....				.....0	.....	.....	.....	.....0	.....
19.3, 19.4	Commercial auto liability.....				.....0	.....	.....	.....	.....0	.....
21.	Auto physical damage.....				.....0	.....	.....	.....	.....0	.....
22.	Aircraft (all perils).....				.....0	.....	.....	.....	.....0	.....
23.	Fidelity.....				.....0	.....	.....	.....	.....0	.....
24.	Surety.....	.....90,040		.....30	.....90,010	.....8,007,322	.....1,377,154	.....6,738,068	.....2,736,418	.....912,611
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			.....0	.....XXX	.....	.....	.....0	.....
32.	Reinsurance - nonproportional assumed liability.....	.....XXX			.....0	.....XXX	.....	.....	.....0	.....
33.	Reinsurance - nonproportional assumed financial lines.....	.....XXX			.....0	.....XXX	.....	.....	.....0	.....
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....5,345,264	.....16,850	.....5,272,104	.....90,010	.....10,538,647	.....1,412,106	.....9,304,345	.....2,736,418	.....912,611

DETAILS OF WRITE-INS

3401.	.....	.....	.....	.....0	.....	.....	.....	.....0	.....
3402.	.....	.....	.....	.....0	.....	.....	.....	.....0	.....
3403.	.....	.....	.....	.....0	.....	.....	.....	.....0	.....
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

(a) Including \$.....0 for present value of life indemnity claims.

EVERGREEN NATIONAL INDEMNITY COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct.....	(164,981)			(164,981)
1.2 Reinsurance assumed.....	41,926			41,926
1.3 Reinsurance ceded.....	(78,850)			(78,850)
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	(44,205)	0	0	(44,205)
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		16,327,479		16,327,479
2.2 Reinsurance assumed, excluding contingent.....		1,943,793		1,943,793
2.3 Reinsurance ceded, excluding contingent.....		13,063,369		13,063,369
2.4 Contingent - direct.....				0
2.5 Contingent - reinsurance assumed.....				0
2.6 Contingent - reinsurance ceded.....				0
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	5,207,903	0	5,207,903
3. Allowances to manager and agents.....				0
4. Advertising.....		49,569		49,569
5. Boards, bureaus and associations.....		115,979		115,979
6. Surveys and underwriting reports.....				0
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....		1,324,702	20,173	1,344,875
8.2 Payroll taxes.....		87,067	1,326	88,393
9. Employee relations and welfare.....		219,988	3,350	223,338
10. Insurance.....		67,580		67,580
11. Directors' fees.....				0
12. Travel and travel items.....		258,234	3,932	262,166
13. Rent and rent items.....		178,557	2,719	181,276
14. Equipment.....		27,701	422	28,123
15. Cost or depreciation of EDP equipment and software.....		11,846	180	12,026
16. Printing and stationery.....		13,064	199	13,263
17. Postage, telephone and telegraph, exchange and express.....		43,503	662	44,165
18. Legal and auditing.....		206,276	3,141	209,417
19. Totals (Lines 3 to 18).....	0	2,604,066	36,104	2,640,170
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....		683,725		683,725
20.2 Insurance department licenses and fees.....		151,801		151,801
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....		12,344		12,344
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	847,870	0	847,870
21. Real estate expenses.....				0
22. Real estate taxes.....				0
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	153,591	241,657	395,248
25. Total expenses incurred.....	(44,205)	8,813,430	277,761	(a).....9,046,986
26. Less unpaid expenses - current year.....	912,611	585,462	18,686	1,516,759
27. Add unpaid expenses - prior year.....	943,087	340,278	19,071	1,302,436
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	(13,729)	8,568,246	278,146	8,832,663

DETAILS OF WRITE-INS

2401. Other Outside Services.....		72,745	241,657	314,402
2402. Data Processing.....		76,161		76,161
2403. Other.....		4,685		4,685
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	153,591	241,657	395,248

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....106,140	.....94,768
1.1 Bonds exempt from U.S. tax.....	(a).....175,254	.....183,380
1.2 Other bonds (unaffiliated).....	(a).....551,921	.....564,809
1.3 Bonds of affiliates.....	(a).....	.....
2.1 Preferred stocks (unaffiliated).....	(b).....356,805	.....351,167
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....418,391	.....428,351
2.21 Common stocks of affiliates.....	.....	.....
3. Mortgage loans.....	(c).....52,961	.....68,693
4. Real estate.....	(d).....	.....
5. Contract loans.....	.....	.....
6. Cash, cash equivalents and short-term investments.....	(e).....1,993	.....2,246
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....40,127	.....40,127
9. Aggregate write-ins for investment income.....	.....0	.....0
10. Total gross investment income.....	.....1,703,593	.....1,733,541
11. Investment expenses.....		(g).....277,761
12. Investment taxes, licenses and fees, excluding federal income taxes.....		(g).....
13. Interest expense.....		(h).....
14. Depreciation on real estate and other invested assets.....		(i).....0
15. Aggregate write-ins for deductions from investment income.....		.....0
16. Total deductions (Lines 11 through 15).....		.....277,761
17. Net investment income (Line 10 minus Line 16).....		.....1,455,780

DETAILS OF WRITE-INS		
0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page.....		.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....		.....0
(a) Includes \$.....57,089 accrual of discount less \$.....71,468 amortization of premium and less \$.....48,134 paid for accrued interest on purchases.		
(b) Includes \$.....0 accrual of discount less \$.....3,704 amortization of premium and less \$.....5,272 paid for accrued dividends on purchases.		
(c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.		
(e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.		
(g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.		
(h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.		
(i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.		

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....130	.....	.....130	.....	.....
1.1 Bonds exempt from U.S. tax.....	.....8,188	.....	.....8,188	.....(26,400)	.....
1.2 Other bonds (unaffiliated).....	.....(83,399)	.....	.....(83,399)	.....(476,708)	.....
1.3 Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....	.....(14,268)	.....	.....(14,268)	.....(59,716)	.....
2.11 Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2 Common stocks (unaffiliated).....	.....(296,650)	.....	.....(296,650)	.....(2,256,944)	.....
2.21 Common stocks of affiliates.....	.....	.....	.....0	.....	.....
3. Mortgage loans.....	.....	.....	.....0	.....	.....
4. Real estate.....	.....	.....	.....0	.....	.....
5. Contract loans.....	.....	.....	.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....	.....	.....	.....0	.....	.....
7. Derivative instruments.....	.....	.....	.....0	.....	.....
8. Other invested assets.....	.....	.....	.....0	.....(146,144)	.....
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....(385,999)	.....0	.....(385,999)	.....(2,965,912)	.....0

DETAILS OF WRITE-INS					
0901. ....			.....0		
0902. ....			.....0		
0903. ....			.....0		
0998. Summary of remaining write-ins for Line 9 from overflow page..	.....0	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0	.....0

EVERGREEN NATIONAL INDEMNITY COMPANY
EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			.....0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			.....0
2.2 Common stocks.....			.....0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			.....0
3.2 Other than first liens.....			.....0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			.....0
4.2 Properties held for the production of income.....			.....0
4.3 Properties held for sale.....			.....0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			.....0
6. Contract loans.....			.....0
7. Derivatives (Schedule DB).....			.....0
8. Other invested assets (Schedule BA).....			.....0
9. Receivables for securities.....			.....0
10. Securities lending reinvested collateral assets (Schedule DL).....			.....0
11. Aggregate write-ins for invested assets.....	.....0	.....0	.....0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	.....0	.....0	.....0
13. Title plants (for Title insurers only).....			.....0
14. Investment income due and accrued.....			.....0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			.....0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			.....0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			.....0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....	.....62,365	.....62,365	.....0
16.2 Funds held by or deposited with reinsured companies.....			.....0
16.3 Other amounts receivable under reinsurance contracts.....			.....0
17. Amounts receivable relating to uninsured plans.....			.....0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.....0
18.2 Net deferred tax asset.....	.....626,265	.....158,027	.....(468,238)
19. Guaranty funds receivable or on deposit.....			.....0
20. Electronic data processing equipment and software.....	.....2,999	.....8,996	.....5,997
21. Furniture and equipment, including health care delivery assets.....	.....1,015	.....2,405	.....1,391
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.....0
23. Receivables from parent, subsidiaries and affiliates.....			.....0
24. Health care and other amounts receivable.....			.....0
25. Aggregate write-ins for other than invested assets.....	.....8,183	.....19,570	.....11,387
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	.....700,826	.....251,363	.....(449,463)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.....0
28. TOTALS (Lines 26 and 27).....	.....700,826	.....251,363	.....(449,463)

DETAILS OF WRITE-INS

1101. ....			.....0
1102. ....			.....0
1103. ....			.....0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.....0	.....0	.....0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.....0	.....0	.....0
2501. Prepaid Insurance.....	.....8,183	.....19,570	.....11,387
2502. ....			.....0
2503. ....			.....0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.....0	.....0	.....0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.....8,183	.....19,570	.....11,387

NOTES TO FINANCIAL STATEMENTS

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

A. Accounting Practices

The financial statements of Evergreen National Indemnity Company (Company) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (Department).

The Department recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under Ohio insurance law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. In addition, the Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices.

	State of Domicile	2015	2014
NET INCOME			
(1) EVERGREEN NATIONAL INDEMNITY COMPANY state basis (Page 4, Line 20, Columns 1 & 2)	OH	\$ 2,318,760	\$ 1,905,160
(2) State Prescribed Practices that increase/decrease NAIC SAP			
(3) State Permitted Practices that increase/decrease NAIC SAP			
(4) NAIC SAP (1 – 2 – 3 = 4)	OH	\$ 2,318,760	\$ 1,905,160
SURPLUS			
(5) EVERGREEN NATIONAL INDEMNITY COMPANY state basis (Page 3, line 37, Columns 1 & 2)	OH	\$ 30,545,711	\$ 33,209,334
(6) State Prescribed Practices that increase/decrease NAIC SAP			
(7) State Permitted Practices that increase/decrease NAIC SAP			
(8) NAIC SAP (5 – 6 – 7 = 8)	OH	\$ 30,545,711	\$ 33,209,334

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

The preparation of financial statements in conformity with Statutory Accounting Principles (SAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

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

Expenses incurred with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- Short-term investments are stated at amortized cost.
- Bonds not backed by other loans are stated at amortized cost using the interest method.
- Common stocks are stated at fair market value.
- Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32.
- The mortgage loan on real estate is stated at purchase price less principal payments received.
- Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value such securities.
- The Company has limited investments in subsidiaries, controlled and affiliated entities. See Schedule BA and paragraph 8 of this disclosure.
- Investments in partnerships, joint ventures, and limited liability companies (Schedule BA assets) are stated at the underlying U.S. tax equity value, as the audited GAAP equity is not available at the time of preparation of these financial statements, per SSAP 48. Refer to Schedule BA for detail.
- The Company does not invest in derivatives.
- The Company does not have any premium deficiencies.
- Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are based on assumptions and

NOTES TO FINANCIAL STATEMENTS

estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.

12. The Company has not modified its capitalization policy from prior period.
13. The Company does not have any pharmaceutical rebate receivables.

D. Going Concern

No going concern issues.

NOTE 2 – ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

Not applicable.

NOTE 3 – BUSINESS COMBINATIONS AND GOODWILL

- A. Statutory Purchase Method
- Not applicable.
- B. Statutory Merger
- Not applicable.
- C. Impairment Loss
- Not applicable.

NOTE 4 – DISCONTINUED OPERATIONS

Not applicable.

NOTE 5 – INVESTMENTS

- A. Mortgage Loans, including Mezzanine Real Estate Loans
- (1) The Company has one mortgage loan. The nominal annual interest rate is 7.5%..
- (2) The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgage was 76%.
- (3) There were no taxes, assessments or any amounts advanced and not included in the mortgage loan.
- (4) Age Analysis of Mortgage Loans:

		Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other			
a.	Current Year							
	1. Recorded Investment (All)							
	(a) Current	\$	\$	\$	\$ 830,870	\$	\$ 830,870	
	(b) 30-59 Days Past Due							
	(c) 60-89 Days Past Due							
	(d) 90-179 Days Past Due							
	(e) 180+ Days Past Due							
	2. Accruing Interest 90-179 Days Past Due							
	(a) Recorded Investment	\$	\$	\$	\$	\$	\$	
	(b) Interest Accrued							
	3. Accruing Interest 180+ Days Past Due							
	(a) Recorded Investment	\$	\$	\$	\$	\$	\$	
	(b) Interest Accrued							
	4. Interest Reduced							
	(a) Recorded Investment	\$	\$	\$	\$	\$	\$	
	(b) Number of Loans							
	(c) Percent Reduced	%	%	%	%	%	%	%
b.	Prior Year							
	1. Recorded Investment (All)							
	(a) Current	\$	\$	\$	\$ 840,736	\$	\$ 840,736	
	(b) 30-59 Days Past Due							

NOTES TO FINANCIAL STATEMENTS

	(c)	60-89 Days Past Due						
	(d)	90-179 Days Past Due						
	(e)	180+ Days Past Due						
2.	Accruing Interest 90-179 Days Past Due							
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Interest Accrued						
3.	Accruing Interest 180+ Days Past Due							
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Interest Accrued						
4.	Interest Reduced							
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Number of Loans						
	(c)	Percent Reduced	%	%	%	%	%	%

(5) - (6) There were no impaired mortgage loans as of December 31, 2015.

- (7)

Allowance for Credit Losses

Not applicable.
- (8)

Mortgage loans derecognized

Not applicable.
- (9)

Interest Income on Impaired Loans

Not applicable

B. Debt Restructuring

Not applicable.

C. Reverse Mortgages

Not applicable.

D. Loan-Backed Securities

- (1) Prepayment assumptions were determined from independent security information service providers or the Company's external investment advisory firm.
- (2) - (5) Not applicable.

E. Repurchase Agreements

Not applicable.

F. Real Estate

Not applicable.

G. Investments in Low-Income Housing Trade Credits (LIHTC)

Not applicable.

H. Other Disclosures and Unusual Items

- (1) Restricted Assets (Including Pledged)

	Gross Restricted							Percentage		
	Current Period					6	7	8	9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Restricted Assets (a)	Total Protected Cell Restricted Assets	Protected Cell Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Period Admitted Restricted	Gross Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown										
b. Collateral held under security lending arrangements										
c. Subject to repurchase agreements										
d. Subject to reverse repurchase agreements										
e. Subject to dollar repurchase										

NOTES TO FINANCIAL STATEMENTS

	agreements										
f.	Subject to dollar reverse repurchase agreements										
g.	Placed under option contracts										
h.	Letter stock or securities restricted as to sale-excluding FHLB capital stock										
i.	FHLB capital stock										
j.	On deposit with state	5,136,187				5,136,187	5,117,017	19,170	5,136,187	11.349	11.527
k.	On deposit with other regulatory bodies										
l.	Pledged as collateral to FHLB (including assets backing funding agreements)										
m.	Pledged as collateral not captured in other categories	287,171				287,171	263,325	23,846	287,171	0.635	0.645
n.	Other restricted assets										
o.	Total Restricted Assets	\$ 5,423,358	\$	\$	\$	\$ 5,423,358	\$ 5,380,342	\$ 43,016	\$ 5,423,358	11.983	12.172

(a) Subset of column 1

(b) Subset of column 3

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contacts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate)

	Gross Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Other Restricted Assets	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) 5 minus 6)	Total Current Year Admitted Restricted	Gross Restricted to Total Assets
Warranty Business Pledged	287,171				287,171	263,325	23,846	287,171	0.635	0.645
Total	287,171				287,171	263,325	23,846	287,171	0.635	0.645

(a) Subset of column 1

(b) Subset of column 3

(3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate)

Collateral Agreement	Gross Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
0										
Total										

(a) Subset of column 1

(b) Subset of column 3

I. Working Capital Finance Investments

Not applicable.

J. Offsetting and Netting of Assets and Liabilities

Not applicable.

K. Structured Notes

Not applicable.

NOTE 6 – JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

A. Detail for Those Greater than 10% of Admitted Assets

The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

B. Write-downs for Impairment of Joint Ventures, Partnerships and LLCs

The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

NOTE 7 – INVESTMENT INCOME

A. Accrued Investment Income

The Company non-admits investment income due and accrued if amounts are over 90 days past due.

B. Amounts Nonadmitted

At December 31, 2015 and 2014, the Company did not have any investment income amounts due and accrued over 90 days past due.

NOTE 8 – DERIVATIVE INSTRUMENTS

Not applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 9 – INCOME TAXES

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	2015			2014			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Gross deferred tax assets	\$ 538,949	\$ 990,175	\$ 1,529,124	\$ 518,913	\$ 127,218	\$ 646,131	\$ 20,036	\$ 862,957	\$ 882,993
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax assets (1a-1b)	538,949	990,175	1,529,124	518,913	127,218	646,131	20,036	862,957	882,993
d. Deferred tax assets nonadmitted	33,188	593,077	626,265	30,809	127,218	158,027	2,379	465,859	468,238
e. Subtotal net admitted deferred tax asset (1c-1d)	505,761	397,098	902,859	488,104		488,104	17,657	397,098	414,755
f. Deferred tax liabilities		8,863	8,863		8,863	8,863			
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$ 505,761	\$ 388,235	\$ 893,996	\$ 488,104	\$ (8,863)	\$ 479,241	\$ 17,657	\$ 397,098	\$ 414,755

2. Admission Calculation Components

	2015			2014			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 505,761	\$ 397,098	\$ 902,859	\$ 488,104		\$ 488,104	\$ 17,657	\$ 397,098	\$ 414,755
b. Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below:									
Adjusted gross deferred tax assets expected to be realized following the balance sheet date									
Adjusted gross deferred tax assets allowed per limitation threshold									
c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities									
d. Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c)	\$ 505,761	\$ 397,098	\$ 902,859	\$ 488,104		\$ 488,104	\$ 17,657	\$ 397,098	\$ 414,755

3. Other Admissibility Criteria

NOTES TO FINANCIAL STATEMENTS

		2015	2014
a.	Ratio percentage used to determine recovery period and threshold limitation amount	1,272.160%	1,110.700%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 29,651,715	\$ 32,730,093

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	12/31/15		12/31/14		Change	
	1	2	3	4	5	6
	Ordinary	Capital	Ordinary	Capital	(Col. 1-3) Ordinary	(Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 538,949	\$ 990,175	\$ 518,913	\$ 127,218	\$ 20,036	\$ 862,957
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 505,761	\$ 397,098	\$ 488,104		\$ 17,657	\$ 397,098
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

(b) Does the company's tax planning strategies include the use of reinsurance? NO

B. Deferred Tax Liabilities Not Recognized

Not applicable

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3
	2015	2014	(Col 1-2) Change
a. Federal	\$ 1,135,519	\$ 748,122	\$ 387,397
b. Foreign			
c. Subtotal	\$ 1,135,519	\$ 748,122	\$ 387,397
d. Federal income tax on net capital gains			
e. Utilization of capital loss carry-forwards			
f. Other			
g. Federal and Foreign income taxes incurred	\$ 1,135,519	\$ 748,122	\$ 387,397

2. Deferred Tax Assets

	1	2	3
	2015	2014	(Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	\$ 47,412	\$ 44,012	\$ 3,400
2. Unearned premium reserve	339,392	331,256	8,136
3. Policyholder reserves			
4. Investments			
5. Deferred acquisition costs			
6. Policyholder dividends accrual			
7. Fixed assets	152,145	143,645	8,500
8. Compensation and benefits accrual			
9. Pension accrual			
10. Receivables - nonadmitted			
11. Net operating loss carry-forward			
12. Tax credit carry-forward			
13. Other (including items <5% of total ordinary tax assets)			
99. Subtotal	\$ 538,949	\$ 518,913	\$ 20,036
b. Statutory valuation allowance adjustment			
c. Nonadmitted	33,188	30,809	2,379
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	\$ 505,761	\$ 488,104	\$ 17,657
e. Capital:			
1. Investments	\$ 914,882	\$ 127,218	\$ 787,664
2. Net capital loss carry-forward	75,293		75,293

NOTES TO FINANCIAL STATEMENTS

3. Real estate			
4. Other (including items <5% of total capital tax assets)			
99. Subtotal	\$ 990,175	\$ 127,218	\$ 862,957
f. Statutory valuation allowance adjustment			
g. Nonadmitted	593,077	127,218	465,859
h. Admitted capital deferred tax assets (2e99-2f-2g)	397,098		397,098
i. Admitted deferred tax assets (2d+2h)	\$ 902,859	\$ 488,104	\$ 414,755

3. Deferred Tax Liabilities

	1 2015	2 2014	3 (Col 1–2) Change
a. Ordinary:			
1. Investments	\$	\$	\$
2. Fixed assets			
3. Deferred and uncollected premium			
4. Policyholder reserves			
5. Other (including items <5% of total ordinary tax liabilities)			
99. Subtotal	\$	\$	\$
b. Capital:			
1. Investments	\$ 8,863	\$ 8,863	\$
2. Real estate			
3. Other (including items <5% of total capital tax liabilities)			
99. Subtotal	8,863	8,863	
c. Deferred tax liabilities (3a99+3b99)	\$ 8,863	\$ 8,863	\$

4. Net Deferred Tax Assets (2i – 3c)	\$ 893,996	\$ 479,241	\$ 414,755
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D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate
Among the more significant book to tax adjustments were the following:

	Amount	Effective Tax Rate (34%)
Permanent Differences:		
Provision computed at statutory rate	\$ 3,454,279	1,174,455
Proration of tax exempt investment income		
Tax exempt income deduction, net	-155,873	-52,997
Dividends received deduction	-214,221	-72,835
Disallowed travel and entertainment	85,456	29,055
Other permanent differences	7,000	2,380
Temporary Differences:		
Total ordinary DTAs	\$ 58,933	20,037
Total ordinary DTLs		
Total capital DTAs	221,449	75,293
Total capital DTLs		
Other:		
Statutory valuation allowance adjustment	\$	
Accrual adjustment – prior year		-39,869
Other		
Totals	\$ 3,457,023	1,135,519
Federal and foreign income taxes incurred		1,135,519
Realized capital gains (losses) tax		
Change in net deferred income taxes		-414,755
Total statutory income taxes	\$	720,764

E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

At December 31, 2015, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

The following is income tax expense for 2015 and 2014 that is available for recoupment in the event of future net losses:

Year	Amount
2015	\$ 1,175,388
2014	\$ 769,240

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

F. Consolidated Federal Income Tax Return

Not applicable

G. Federal or Foreign Federal Income Tax Loss Contingencies

NOTES TO FINANCIAL STATEMENTS

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

NOTE 10 – INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES

A. Nature of Relationships

Approximately 65.06% of the outstanding voting shares are owned by ProAlliance Corporation (ProAlliance).

Effective August 1, 2014, ProAlliance Corporation and its shareholders entered into a stock purchase agreement with Stillwater Insurance Company (SIC). According to the agreement, SIC purchased 90% of the issued and outstanding capital stock of ProAlliance Corporation. The agreement was approved on July 29, 2014 by the Ohio Department of Insurance.

Total issued stock of the Company is comprised of the following: 30.35% by ProAlliance, a privately owned company incorporated in Ohio; 19.9% by Waste Management Holdings, Inc., a Delaware company; 19.9% Allied Waste North America, a Delaware company; 19.9% by Casella Waste Systems, Inc., a Delaware company; and 9.95% by Waste Connections, Inc., a Delaware company.

B. Detail of Transactions Greater than 1/2% of Admitted Assets

In 2014 and 2015, the Company declared and paid dividends as follows:

- a. Declared April 16, 2014 and paid April 28, 2014 – an ordinary cash dividend of \$1,250,000
- b. Declared October 10, 2014 and paid October 22, 2014 – an ordinary cash dividend of \$1,200,000
- c. Declared April 29, 2015 and paid May 11, 2015 – an ordinary cash dividend of \$1,250,000
- d. Declared October 27, 2015 and paid November 9, 2015 – an ordinary cash dividend of \$1,200,000

C. Change in Terms of Intercompany Agreements

Not applicable.

D. Amounts Due from or to Related Parties

None as of December 31, 2015.

E. Guarantees or Contingencies for Related Parties

Not applicable.

F. Management, Service Contracts, Cost Sharing Agreements

Not applicable.

G. Nature of Relationships that Could Affect Operations

Approximately 65.06% of outstanding voting shares of the Company are owned by ProAlliance.

H. Amount Deducted for Investment in Upstream Company

Not applicable.

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

Not applicable.

J. Writedown for Impairments of Investments in Subsidiary, Controlled or Affiliated Companies (SCA)

Not applicable.

K. Investment in foreign insurance Subsidiary.

Not applicable.

L. Investment in a downstream non-insurance holding company

Not applicable.

M. SCA balance sheet value of SCA non-insurance investments

Not applicable.

N. Investment in insurance SCA for which equity departs from the NAIC statutory accounting practices and procedures

Not applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 11 – DEBT

Not applicable.

NOTE 12 – RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

A. - D. Defined Benefit Plans

Not applicable.

E. Defined Contribution Plans

The Company sponsored a defined contribution plan covering substantially all employees of the Company. Contributions of 4% of each participating employee's compensation was made in 2014. In addition, the Company made voluntary profit sharing contributions to the plan in the amount of \$132,828 for 2014. The defined contribution plan was terminated effective December 31, 2014.

F. Multiemployer Plans

Not applicable.

G. Consolidated/Holding Company Plans

Not applicable.

H. Postemployment Benefits and Compensated Absences

Not applicable.

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

Not applicable.

NOTE 13 – CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS

1. Outstanding Shares

The Company has the following shares authorized, issued and outstanding at December 31, 2015:

- A shares (voting), \$500 par; 10,000 authorized; 6,000 issued and outstanding
- B shares (non-voting), \$1 par; 25,000 authorized; 18,000 issued and outstanding
- C shares (non-voting), \$1 par; 100 authorized; 3.5 issued and outstanding

The Company has no preferred stock authorized, issued, or outstanding.

2. Dividend Rate of Preferred Stock

Not applicable.

3., 4. and 5. Dividend Restrictions

The maximum dividend which can be paid by Ohio incorporated insurance companies is subject to restrictions relating to the maintenance of minimum assets and capital. For example, no company shall make any distribution of dividends or assets unless the value of assets remaining is at least equal to the aggregate amount of debts and liabilities, including capital. In addition, no company which is part of a holding company system may make a cumulative twelve month distribution which exceeds the greater of ten percent of policyholders surplus as of the prior year or its net income of the previous calendar year. Accordingly, the maximum cumulative dividend payout to shareholders that may be made without prior approval of the Ohio Department of Insurance in 2016 is \$3,054,571, representing 10% of the surplus as regards policyholders as of December 31, 2015.

In 2014 and 2015, the Company declared and paid dividends as follows:

- a. Declared April 16, 2014 and paid April 28, 2014 – an ordinary cash dividend of \$1,250,000
- b. Declared October 10, 2014 and paid October 22, 2014 – an ordinary cash dividend of \$1,200,000
- c. Declared April 29, 2015 and paid May 11, 2015 – an ordinary cash dividend of \$1,250,000
- d. Declared October 27, 2015 and paid November 9, 2015 – an ordinary cash dividend of \$1,200,000

6. Restrictions placed on the unassigned funds (surplus)

Not applicable.

7. Mutual Surplus Advances

Not applicable.

8. Company Stock Held for Special Purposes

Not applicable.

9. Changes in Special Surplus Funds

Not applicable.

NOTES TO FINANCIAL STATEMENTS

- 10The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is \$(3,171,010).
- 11Surplus Notes
- Not applicable
- 12 - 13Quasi-Reorganizations
- Not applicable

NOTE 14 – LIABILITIES, CONTINGENCIES AND ASSESSMENTS

- A.Contingent Commitments
- Not applicable
- B.Assessments

The Company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments should be accrued at the time of insolvencies. Other assessments should be accrued either at the time of assessments or in the case of premium based assessments, at the time the premiums were written, or, in the case of loss based assessments, at the time the losses are incurred.

The Company is not aware of any such insolvencies and has therefore, not accrued any liability for guaranty fund and other assessments as of December 31, 2015. This represents management's best estimate based on information received from the states in which the Company writes business and may change due to many factors including the Company's share of the ultimate cost of current insolvencies.

- C.Gain Contingencies
- Not applicable
- D.Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits
- Not applicable
- E.Product Warranties
- Not applicable
- F.Joint and Several Liabilities
- Not applicable
- G.All Other Contingencies

Various lawsuits against the Company may arise in the course of the Company's normal business operations. Contingent liabilities that have arisen from litigation are not considered material to the financial position of the Company. The Company has no asset that it considers impaired.

NOTE 15 – LEASES

- A.Lessee Operating Lease
- (1) The Company leases office facilities under various non-cancelable operating leases that expire November 30, 2016. The Company incurred rent expense of \$181,276 and \$154,541 in 2015 and 2014, respectively.
- (2)

a.	At January 1, 2016 the minimum aggregate rental commitments are as follows:		
		Year Ending December 31	Operating Leases
	1.	2016	\$ 167,068
	2.	2017	\$
	3.	2018	\$
	4.	2019	\$
	5.	2020	\$
	6.	Total	\$ 167,068

- (3) The Company has not entered into any sales-leaseback arrangements.

- B.Lessor Leasing Arrangements
- Not applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 16 – INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

The Company has no financial instruments with off-balance sheet risk.

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

The Company did not have any wash sales during the current year.

NOTE 18 – GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE PORTION OF PARTIALLY INSURED PLANS

A. ASO Plans

Not applicable

B. ASC Plans

Not applicable

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

Not applicable

NOTE 19 – DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS

Not applicable

NOTE 20 – FAIR VALUE MEASUREMENTS

A. Assets measured at Fair Value

(1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
Bonds	\$	\$ 4,197,211	\$	\$ 4,197,211
Preferred Stocks		2,208,045		2,208,045
Common Stocks	6,067,767	1,821,775	189,494	8,079,036
Total	\$ 6,067,767	\$ 8,227,031	\$ 189,494	\$ 14,484,292

Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
	\$	\$	\$	\$
Total	\$	\$	\$	\$

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

	Beginning Balance at 1/1/2015	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2015
a. Assets										
Common Stocks	\$ 189,494	\$	\$	\$	\$	\$	\$	\$	\$	\$ 189,494
Total	\$ 189,494	\$	\$	\$	\$	\$	\$	\$	\$	\$ 189,494

	Beginning Balance at 1/1/2015	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2015
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Transfers in (out) of Level 3

Not applicable

(4) Level 2 bonds, preferred stocks, and common stocks carried at fair value are determined by independent pricing services using observable inputs.

Level 3 fair value is derived as follows:

NOTES TO FINANCIAL STATEMENTS

Common Stock non-affiliates: Valuation is based on actual cost with quarterly internal analysis based on the following: Current year and history of earnings and EPS of common stock, Book value of common stock, Industry Price Earnings ratio, Industry Price to Book ratio, and general market factors.

(5) Derivative Assets and Liabilities

Not applicable

B. Other Fair Value Disclosures

Not applicable

C. Fair values for all financial instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	\$ 18,419,688	\$ 18,324,350	\$ 3,591,227	\$ 14,828,461	\$	\$
Preferred Stocks	5,017,795	4,966,395		5,017,795		
Common Stocks	8,079,036	8,079,036	6,067,767	1,821,775	189,494	
Mortgage Loan		830,870				
Cash & Short Term Investments	5,994,832	5,994,832	5,994,832			
Other Invested Assets	2,775,506	2,857,205	2,775,506			

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Mortgage Loan	\$ 830,870	0.075%	01/29/2016	Not available for public sale therefore market price not available.

NOTE 21 – OTHER ITEMS

A. Unusual or Infrequent Items

Not applicable

B. Troubled Debt Restructuring Debtors

Not applicable

C. Other Disclosures and Unusual Items

Not applicable

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-Transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

1. The Company does not engage in direct sub-prime residential mortgage lending. The Company’s exposure to sub-prime is limited to investments within the fixed income investment portfolio which contains securities collateralized by mortgages that have characteristics of sub-prime lending. Such characteristics include an interest rate above prime to borrowers who do not qualify for prime rate loans, borrowers w with low credit ratings (FICO scores), unconventionally high initial loan-to-value ratios, and borrowers with less than conventional documentation of their income and/or net assets.

The Company minimizes risk exposure by holding securities which carry higher credit ratings and by monitoring the underlying collateral performance on an ongoing basis.

2. Direct Exposure Through Investments in Subprime Mortgage Loans

Not applicable

3. Direct Exposure Through Other Investments

Not applicable

4. Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage

Not applicable

G. Insurance Linked Securities

NOTES TO FINANCIAL STATEMENTS

Not applicable

NOTE 22 – EVENTS SUBSEQUENT

- A. Type 1 – Recognized Subsequent Events:
There were no subsequent events meriting disclosure through February 24, 2016 for the statutory statements issued on February 25, 2016.
- B. Type 2 – Non-recognized Subsequent Events:
There were no subsequent events meriting disclosure through February 24, 2016 for the statutory statements issued on February 25, 2016.

NOTE 23 – REINSURANCE

- A. Unsecured Reinsurance Recoverables in excess of 3% of surplus

Name of Reinsurer	NAIC Code	Federal ID #	Amount
General Reinsurance Corp.	22039	13-2673100	\$ 8,046,000
Axis Reinsurance Co.	20370	51-0434766	5,527,000
Westchester Fire Ins. Co. (Ace)	21121	13-5481330	5,247,000
Ohio Indemnity Insurance Co.	26565	31-0620146	3,514,000
Swiss Reins America Corp.	25364	13-1675535	1,434,000
Endurance Reins Corp	11551	35-2293075	1,117,000
Partner Reins Co	38636	13-3031176	1,063,000

- B. Reinsurance Recoverable in Dispute
Not applicable

- C. Reinsurance Assumed and Ceded

(1) The follownig table summarizes ceded and assumed unearned premiums and the related commission equity at December 31, 2015

		Assumed Reinsurance		Ceded Reinsurance		Net	
		Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a.	Affiliates	\$	\$	\$	\$	\$	\$
b.	All Other	1,529,890	741,916	11,901,530	5,902,894	(10,371,640)	(5,160,978)
c.	Total	\$ 1,529,890	\$ 741,916	\$ 11,901,530	\$ 5,902,894	\$ (10,371,640)	\$ (5,160,978)
d.	Direct Unearned Premium Reserves			\$ 15,362,706			

(2) The additional or return commission, predicated on loss experience or on any other form of profit sharing arrangements in this annual statement as a result of existing contractual arrangements is accrued as follows

Not applicable

- (3) Risks attributable to protected cells

Not applicable

- D. Uncollectible Reinsurance

Not applicable

- E. Commutation of Ceded Reinsurance

Not applicable

- F. Retroactive Reinsurance

Not applicable

- G. Reinsurance Accounted for as a Deposit

Not applicable

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

Not applicable

- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable

- J. Reinsurance Agreements Qualifying for Reinsurance Aggregation

NOTES TO FINANCIAL STATEMENTS

Not applicable

NOTE 24 – RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDTERMINATION

Not applicable

NOTE 25 – CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

Reserves for incurred losses and loss adjustment expenses attributable to insured events of prior years decreased by \$2,417,000 from \$3,486,000 in 2014 to \$1,069,000 in 2015 as a result of re-estimation of unpaid losses and loss adjustment expenses principally on the surety line of insurance. This change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

NOTE 26 – INTERCOMPANY POOLING ARRANGEMENTS

Not applicable

NOTE 27 – STRUCTURED SETTLEMENTS

Not applicable

NOTE 28 – HEALTH CARE RECEIVABLES

Not applicable

NOTE 29 – PARTICIPATING POLICIES

Not applicable

NOTE 30 – PREMIUM DEFICIENCY RESERVES

1.	Liability carried for premium deficiency reserve:	\$0.00
2.	Date of most recent evaluation of this liability:	December 31, 2015
3.	Was anticipated investment income utilized in the calculation?	NO

NOTE 31 – HIGH DEDUCTIBLES

Not applicable

NOTE 32 – DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES

Not applicable

NOTE 33 – ASBESTOS/ENVIRONMENTAL RESERVES

Not applicable

NOTE 34 – SUBSCRIBER SAVINGS ACCOUNTS

Not applicable

NOTE 35 – MULTIPLE PERIL CROP INSURANCE

Not applicable

NOTE 36 – FINANCIAL GUARANTY INSURANCE

Not applicable

EVERGREEN NATIONAL INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

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

1.3

State regulating? OHIO

2.1

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

Yes [] No [X]

2.2

If yes, date of change:

3.1

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

12/31/2014

3.2

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

12/31/2009

3.3

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

02/11/2011

3.4

By what department or departments?
OHIO DEPARTMENT OF INSURANCE

3.5

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

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

3.6

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

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

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes [X] No []

4.12

renewals?

Yes [X] No []

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums of:

4.21

sales of new business?

Yes [] No [X]

4.22

renewals?

Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

5.2

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

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

6.1

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

Yes [] No [X]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,

7.21

State the percentage of foreign control

%

7.22

State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact).

1	2
Nationality	Type of Entity

8.1

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

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

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
PLANTE MORAN LLC, 10 SOUTH RIVERSIDE PLAZA, CHICAGO, IL 60606

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]

10.2

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

10.3

Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]

10.4

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

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

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

10.6

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

EVERGREEN NATIONAL INDEMNITY COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
TAPIO N. BOLES, FCAS, MAAA, WILLIS TOWERS WATSON, 345 CALIFORNIA STREET, SUITE 2000, SAN FRANCISCO, CA 94104-2612 ACTUARY/CONSULTANT

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes ☐ No ☒

12.11

Name of real estate holding company

12.12

Number of parcels involved

0

12.13

Total book/adjusted carrying value

\$0

12.2

If yes, provide explanation

13.

FOR UNITED STATES BRANCES OF ALIEN REPORTING ENTITIES ONLY:

13.1

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

13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes ☐ No ☐

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes ☐ No ☐

13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes ☐ No ☐ N/A ☐

14.1

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

Yes ☒ No ☐

(a)

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

(b)

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

(c)

Compliance with applicable governmental laws, rules and regulations;

(d)

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

(e)

Accountability for adherence to the code.

14.11

If the response to 14.1 is no, please explain:

14.2

Has the code of ethics for senior managers been amended?

Yes ☐ No ☒

14.21

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

14.3

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

Yes ☐ No ☒

14.31

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

15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes ☐ No ☒

15.2

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

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

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?

Yes ☒ No ☐

17.

Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors an all subordinator committees thereof?

Yes ☒ No ☐

18.

Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes ☒ No ☐

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes ☐ No ☒

20.1

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

20.11

To directors or other officers

\$0

20.12

To stockholders not officers

\$0

20.13

Trustees, supreme or grand (Fraternal only)

\$0

20.2

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

20.21

To directors or other officers

\$0

20.22

To stockholders not officers

\$0

20.23

Trustees, supreme or grand (Fraternal only)

\$0

21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reporting in the statement?

Yes ☐ No ☒

21.2

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

21.21

Rented from others

\$0

21.22

Borrowed from others

\$0

21.23

Leased from others

\$0

21.24

Other

\$0

22.1

Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments?

Yes ☐ No ☒

22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

\$0

22.22

Amount paid as expenses

\$0

22.23

Other amounts paid

\$0

23.1

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

Yes ☐ No ☒

23.2

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

\$0

INVESTMENT

EVERGREEN NATIONAL INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

24.01

Were all of the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes ☒ No ☐

24.02

If no, give full and complete information, relating thereto:

24.03

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

24.04

Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*?

Yes ☐ No ☐ N/A ☒

24.05

If answer to 24.04 is yes, report amount of collateral for conforming programs.

\$0

24.06

If answer to 24.04 is no, report amount of collateral for other programs

\$0

24.07

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes ☐ No ☐ N/A ☒

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes ☐ No ☐ N/A ☒

24.09.

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes ☐ No ☐ N/A ☒

24.10

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

24.101

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

\$0

24.102

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

\$0

24.103

Total payable for securities lending reported on the liability page:

\$0

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)

Yes ☒ No ☐

25.2

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

25.21

Subject to repurchase agreements

\$0

25.22

Subject to reverse repurchase agreements

\$0

25.23

Subject to dollar repurchase agreements

\$0

25.24

Subject to reverse dollar repurchase agreements

\$0

25.25

Placed under option agreements

\$0

25.26

Letter stock or securities restricted as sale – excluding FHLB Capital Stock

\$0

25.27

FHLB Capital Stock

\$0

25.28

On deposit with states

\$5,136,187

25.29

On deposit with other regulatory bodies

\$0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$287,171

25.31

Pledged as collateral to FHLB – including assets backing funding agreements

\$0

25.32

Other

\$0

25.3

For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

26.1

Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes ☐ No ☒

26.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes ☐ No ☐ N/A ☒

27.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes ☐ No ☒

27.2

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

\$0

28.

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 ☐

28.01

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
HUNTINGTON NATIONAL BANK	7 EASTON OVAL, COLUMBUS, OH 43219

28.02

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

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

28.03

Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes ☐ No ☒

28.04

If yes, give full and complete information relating thereto:

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

28.05

Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
	NFC INVESTMENTS, LLC	510 S. Mendenhall #200, Memphis, TN 38117

29.1

Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes ☐ No ☒

29.2

If yes, complete the following schedule:

EVERGREEN NATIONAL INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

1 CUSIP	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 TOTAL		

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holdings	4 Date of Valuation

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	20,259,052	18,419,698	(1,839,354)
30.2	Preferred Stocks	4,966,395	5,017,795	51,400
30.3	Totals	25,225,447	23,437,493	(1,787,954)

30.4 Describe the sources or methods utilized in determining fair values:
FAIR MARKET VALUES ARE OBTAINED FROM THE NAIC SECURITIES VALUATION OFFICE (SVO) AND WHEN NOT AVAILABLE, FROM INDUSTRY STANDARD VALUATION PROVIDERS, SUCH AS S&P OR FROM THE INVESTMENT CUSTODIANS.

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

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliance pricing source for purposes of disclosure of fair value for Schedule D:

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

32.2 If no, list exceptions:

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 59,701

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

1 Name	2 Amount Paid
A.M. BEST COMPANY	\$ 20,300
SURETY AND FIDELITY ASSOCIATION OF AMERICA	38,541

34.1 Amount of payments for legal expenses, if any? \$ 22,201

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

1 Name	2 Amount Paid
BAKER HOSTETLER	\$ 19,021

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 6,757

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

1 Name	2 Amount Paid
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA	\$ 6,757

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [☐]

No [☒ X]

1.2

If yes, indicate premium earned on U.S. business only.

\$

0

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$

0

1.31

Reason for excluding:

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.

\$

0

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

\$

0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$

0

1.62

Total incurred claims

\$

0

1.63

Number of covered lives

0

All years prior to most current three years:

1.64

Total premium earned

\$

0

1.65

Total incurred claims

\$

0

1.66

Number of covered lives

0

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$

0

1.72

Total incurred claims

\$

0

1.73

Number of covered lives

0

All years prior to most current three years:

1.74

Total premium earned

\$

0

1.75

Total incurred claims

\$

0

1.76

Number of covered lives

0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator

\$

0

\$

0

2.2

Premium Denominator

\$

11,346,499

\$

12,096,591

2.3

Premium Ratio (2.1/2.2)

2.4

Reserve Numerator

\$

0

\$

0

2.5

Reserve Denominator

\$

8,640,096

\$

8,357,826

2.6

Reserve Ratio (2.4/2.5)

3.1

Does the reporting entity issue both participating and non-participating policies?

Yes [☐]

No [☐ X]

3.2

If yes, state the amount of calendar year premiums written on:

3.21

Participating policies

\$

0

3.22

Non-participating policies

\$

0

4.

FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:

4.1

Does the reporting entity issue assessable policies?

Yes [☐]

No [☐]

4.2

Does the reporting entity issue non-assessable policies?

Yes [☐]

No [☐]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders?

%

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.

\$

0

5.

FOR RECIPROCAL EXCHANGES ONLY:

5.1

Does the exchange appoint local agents?

Yes [☐]

No [☐]

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation

Yes [☐]

No [☐]

N/A [☐]

5.22

As a direct expense of the exchange

Yes [☐]

No [☐]

N/A [☐]

5.3

What expenses of the exchange are not paid out of the compensation of the Attorney-in-fact?

5.4

Has any Attorney-in-fact compensation, contingent on fulfillments of certain conditions, been deferred?

Yes [☐]

No [☐]

5.5

If yes, give full information:

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
THE COMPANY DOES NOT CURRENTLY WRITE WORKERS COMPENSATION INSURANCE. ALL PREVIOUSLY WRITTEN WORKERS COMPENSATION INSURANCE IS 100% REINSURED.

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
THE COMPANY HAS ADOPTED THE SURETY & FIDELITY ASSOCIATION OF AMERICA'S INDUSTRY EXPERIENCE AND LOSS DEVELOPMENT

6.3

What provision has this reporting entity made (such as catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
THE COMPANY DOES NOT WRITE PROPERTY INSURANCE

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?

Yes [☐]

No [☐ X]

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss:
THE COMPANY DOES NOT HAVE ANY KNOWN EXPOSURE TO CATASTROPHIC RISK

7.1

Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?

Yes [☐]

No [☐ X]

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

7.2	If yes, indicate the number of reinsurance contracts containing such provisions.				0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes []	No []		
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes []	No [X]		
8.2	If yes, give full information				
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?			Yes []	No [X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.			Yes []	No [X]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.				
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?			Yes []	No [X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.				
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria: (a) The entity does not utilize reinsurance; or (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.			Yes []	No [X]
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes [X]	No []	N/A []	
11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes []	No [X]		
11.2	If yes, give full information				
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for: 12.11 Unpaid losses 12.12 Unpaid underwriting expenses (including loss adjustment expenses)			\$	0
				\$	0
12.2	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?			\$	0
12.3	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes []	No []	N/A [X]	
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement: 12.41 From 12.42 To			%	
				%	
12.5	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?			Yes []	No [X]
12.6	If yes, state the amount thereof at December 31 of current year: 12.61 Letters of Credit 12.62 Collateral and other funds			\$	0
				\$	0
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):			\$	3,054,571
13.2	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?			Yes []	No [X]
13.3	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.				2

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

14.1

Is the company a cedant in a multiple cedant reinsurance contract?

Yes ☒] No ☐]

14.2

If yes, please describe the method of allocating and recording reinsurance among the cedants:
DIRECT WRITTEN PREMIUM

14.3

If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?

Yes ☒] No ☐]

14.4

If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?

Yes ☐] No ☐]

14.5

If the answer to 14.4 is no, please explain:

15.1

Has the reporting entity guaranteed any financed premium accounts?

Yes ☐] No ☒]

15.2

If yes, give full information

16.1

Does the reporting entity write any warranty business?

Yes ☒] No ☐]

If yes, disclose the following information for each of the following types of warranty coverage: RECREATIONAL VEHICLES

		1	2	3	4	5
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium
		Incurred	Unpaid	Premium	Unearned	Earned
16.11	Home	\$ 0	\$ 0	\$ 0	\$ 0	0
16.12	Products	\$ 0	\$ 0	\$ 0	\$ 0	0
16.13	Automobile	\$ 0	\$ 0	\$ 0	\$ 0	0
16.14	Other*	\$ 0	\$ 0	47,905	82,823	37,872
* Disclose type of coverage:		<u>RECREATIONAL VEHICLES</u>				

17.1

Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5.
Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F – Part 5. Provide the following information for this exemption:

Yes ☐] No ☒]

17.11	Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.12	Unfunded portion of Interrogatory 17.11	\$ 0
17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$ 0
17.14	Case reserves portion of Interrogatory 17.11	\$ 0
17.15	Incurred but not reported portion of Interrogatory 17.11	\$ 0
17.16	Unearned premium portion of Interrogatory 17.11	\$ 0
17.17	Contingent commission portion of Interrogatory 17.11	\$ 0

Provide the following information for all other amounts included in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included above.		
17.18	Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.19	Unfunded portion of Interrogatory 17.18	\$ 0
17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$ 0
17.21	Case reserves portion of Interrogatory 17.18	\$ 0
17.22	Incurred but not reported portion of Interrogatory 17.18	\$ 0
17.23	Unearned premium portion of Interrogatory 17.18	\$ 0
17.24	Contingent commission portion of Interrogatory 17.18	\$ 0

18.1

Do you act as a custodian for health savings accounts?

Yes ☐] No ☒]

18.2

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

\$ 0

18.3

Do you act as an administrator for health savings accounts?

Yes ☐] No ☒]

18.4

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

\$ 0

FIVE-YEAR HISTORICAL DATA

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

	1 2015	2 2014	3 2013	4 2012	5 2011
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....					100,000
2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	37,761,893	37,180,800	37,742,152	36,771,457	35,641,317
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
6. Total (Line 35).....	37,761,893	37,180,800	37,742,152	36,771,457	35,741,317
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....					100,000
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	11,466,162	11,996,557	12,367,020	11,897,509	10,709,336
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
12. Total (Line 35).....	11,466,162	11,996,557	12,367,020	11,897,509	10,809,336
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8).....	2,383,976	1,348,532	3,056,581	2,920,340	3,526,184
14. Net investment gain (loss) (Line 11).....	1,069,781	1,304,123	909,916	1,152,776	2,367,788
15. Total other income (Line 15).....	522	627	10,252	17,674	167
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	1,135,519	748,122	1,309,962	1,291,129	1,479,666
18. Net income (Line 20).....	2,318,760	1,905,160	2,666,787	2,799,661	4,414,473
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	44,556,376	46,759,508	47,613,215	50,763,235	50,759,040
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	1,966,454	2,062,101	2,112,328	1,954,182	1,863,537
20.2 Deferred and not yet due (Line 15.2).....					
20.3 Accrued retrospective premiums (Line 15.3).....					
21. Total liabilities excluding protected cell business (Page 3, Line 26).....	14,010,665	13,550,174	13,752,355	17,111,404	16,989,770
22. Losses (Page 3, Line 1).....	2,736,418	2,543,335	2,251,851	2,311,041	2,521,295
23. Loss adjustment expenses (Page 3, Line 3).....	912,611	943,087	1,214,168	1,299,825	1,483,882
24. Unearned premiums (Page 3, Line 9).....	4,991,067	4,871,404	4,971,438	4,486,557	4,256,991
25. Capital paid up (Page 3, Lines 30 & 31).....	3,018,004	3,018,004	3,018,004	3,018,004	3,018,004
26. Surplus as regards policyholders (Page 3, Line 37).....	30,545,711	33,209,334	33,860,860	33,651,831	33,769,270
Cash Flow (Page 5)					
27. Net cash from operations (Line 11).....	3,243,053	1,316,527	(1,170,758)	2,667,276	6,481,839
Risk-Based Capital Analysis					
28. Total adjusted capital.....	30,545,711	33,209,334	33,860,860	33,651,831	33,769,270
29. Authorized control level risk-based capital.....	2,401,088	2,990,008	1,914,054	2,090,155	2,032,423
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	44.6	45.7	43.6	43.8	54.5
31. Stocks (Lines 2.1 & 2.2).....	31.8	31.8	2.6	3.7	4.5
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....	2.0	1.9	1.9		1.1
33. Real estate (Lines 4.1, 4.2 & 4.3).....					
34. Cash, cash equivalents and short-term investments (Line 5).....	14.6	14.6	50.8	52.4	40.0
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					
37. Other invested assets (Line 8).....	7.0	5.9	1.1		
38. Receivable for securities (Line 9).....	0.0	0.1			
39. Securities lending reinvested collateral assets (Line 10).....					
40. Aggregate write-ins for invested assets (Line 11).....					
41. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....					
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....					
46. Affiliated mortgage loans on real estate.....					
47. All other affiliated.....	1,022,205				
48. Total of above lines 42 to 47.....	1,022,205	0	0	0	0
49. Total investment in parent included in Lines 42 to 47 above.....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0).....	3.3				

EVERGREEN NATIONAL INDEMNITY COMPANY
FIVE-YEAR HISTORICAL DATA

(Continued)

	1	2	3	4	5
	2015	2014	2013	2012	2011
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24).....	(2,965,912)	(149,889)	(38,123)	94,686	(1,016,111)
52. Dividends to stockholders (Line 35).....	(2,450,000)	(2,450,000)	(2,450,000)	(3,100,000)	(2,250,000)
53. Change in surplus as regards policyholders for the year (Line 38).....	(2,663,623)	(651,526)	209,029	(117,439)	1,289,592
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)...	544,944	466,641	1,007,133	813,896	922,889
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	(6,000)	39,068	(4,490)	3,208	(162)
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
59. Total (Line 35).....	538,944	505,709	1,002,643	817,104	922,727
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)...					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	215	9,767	(1,122)	802	(875)
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
65. Total (Line 35).....	215	9,767	(1,122)	802	(875)
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2).....	1.7	2.5	(0.5)	(1.8)	0.3
68. Loss expenses incurred (Line 3).....	(0.4)	(2.3)	(0.9)	(1.6)	(0.7)
69. Other underwriting expenses incurred (Line 4).....	77.7	88.6	75.6	78.4	69.9
70. Net underwriting gain (loss) (Line 8).....	21.0	11.1	25.7	25.0	30.5
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....	76.9	89.4	72.6	76.7	74.2
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	1.3	0.2	(1.4)	(3.4)	(0.4)
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0).....	37.5	36.1	36.5	35.4	32.0
One Year Loss Development (000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	(2,257)	(2,229)	(1,848)	(2,030)	(1,908)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100).....	(6.8)	(6.6)	(5.5)	(6.0)	(5.9)
Two Year Loss Development (000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	(2,491)	(2,599)	(2,440)	(2,387)	(2,146)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0).....	(7.4)	(7.7)	(7.2)	(7.3)	(6.5)

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

Yes [] No []

If no, please explain:

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 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.....	.....545	.....545	.....41	.....39	.....1	.....	.....2	.....3	.....XXX.....
2. 2006.....	.....33,475	.....24,660	.....8,815	.....920	.....843	.....435	.....166	.....209	.....120	.....430	.....435	.....XXX.....
3. 2007.....	.....36,715	.....25,786	.....10,929	.....480	.....429	.....139	.....71	.....81	.....58	.....106	.....142	.....XXX.....
4. 2008.....	.....38,469	.....27,646	.....10,823	.....521	.....517	.....50	.....36	.....39	.....34	.....36	.....23	.....XXX.....
5. 2009.....	.....37,555	.....26,962	.....10,593	.....212	.....115	.....57	.....20	.....20	.....8	.....144	.....146	.....XXX.....
6. 2010.....	.....37,197	.....25,789	.....11,408			.....8	(2)	.....2		.....9	.....12	.....XXX.....
7. 2011.....	.....37,435	.....25,964	.....11,471	.....17	.....13	.....8	.....3	.....3		.....6	.....12	.....XXX.....
8. 2012.....	.....36,055	.....24,387	.....11,668	.....25	.....18	.....27	.....8	.....9	.....3	.....22	.....32	.....XXX.....
9. 2013.....	.....36,569	.....24,687	.....11,882								.....0	.....XXX.....
10. 2014.....	.....37,327	.....25,231	.....12,096								.....0	.....XXX.....
11. 2015.....	.....37,368	.....26,021	.....11,347								.....0	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,720	.....2,480	.....765	.....341	.....364	.....223	.....755	.....805	.....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	22			
	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.....	.....5,362	.....5,272	.....2,562	.....2,562	.....2				.....1			.....93	.....XXX.....
2. 2006....			.....3	.....2			.....1					.....2	.....XXX.....
3. 2007....			.....2	.....1			.....2		.....1			.....4	.....XXX.....
4. 2008....			.....3	.....1			.....2		.....2			.....6	.....XXX.....
5. 2009....												.....0	.....XXX.....
6. 2010....			.....37	.....27			.....39	.....29	.....15	.....10		.....25	.....XXX.....
7. 2011....			.....85	.....64	.....1	.....1	.....92	.....69	.....35	.....23		.....56	.....XXX.....
8. 2012....			.....194	.....146			.....209	.....157	.....80	.....52		.....128	.....XXX.....
9. 2013....			.....424	.....318			.....458	.....343	.....173	.....114		.....280	.....XXX.....
10. 2014....			.....720	.....540			.....777	.....583	.....295	.....194		.....475	.....XXX.....
11. 2015...			.....7,920	.....5,643			.....799	.....599	.....303	.....200		.....2,580	.....XXX.....
12. Totals..	.....5,362	.....5,272	.....11,950	.....9,304	.....3	.....1	.....2,379	.....1,780	.....905	.....593	.....0	.....3,649	.....XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and	27	28	29 Direct and	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36 Loss Expenses
	Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....			.....XXX.....	.....90	.....3
2. 2006..	.....1,568	.....1,131	.....437	.....4.7	.....4.6	.....5.0				.....1	.....1
3. 2007..	.....705	.....559	.....146	.....1.9	.....2.2	.....1.3				.....1	.....3
4. 2008..	.....617	.....588	.....29	.....1.6	.....2.1	.....0.3				.....2	.....4
5. 2009..	.....289	.....143	.....146	.....0.8	.....0.5	.....1.4				.....0	.....0
6. 2010..	.....101	.....64	.....37	.....0.3	.....0.2	.....0.3				.....10	.....15
7. 2011..	.....241	.....173	.....68	.....0.6	.....0.7	.....0.6				.....21	.....35
8. 2012..	.....544	.....384	.....160	.....1.5	.....1.6	.....1.4				.....48	.....80
9. 2013..	.....1,055	.....775	.....280	.....2.9	.....3.1	.....2.4				.....106	.....174
10. 2014..	.....1,792	.....1,317	.....475	.....4.8	.....5.2	.....3.9				.....180	.....295
11. 2015..	.....9,022	.....6,442	.....2,580	.....24.1	.....24.8	.....22.7				.....2,277	.....303
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....2,736	.....913

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

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	One Year	Two Year
1. Prior.....	.....1,080	.....1,402	.....1,548	.....1,557	.....1,348	.....1,399	.....1,350	.....1,351	.....1,353	.....1,369	.....16	.....18
2. 2006.....	.....1,593	.....403	.....377	.....498	.....312	.....275	.....305	.....331	.....318	.....348	.....30	.....17
3. 2007.....	.....XXX	.....1,945	.....603	.....610	.....409	.....253	.....203	.....181	.....129	.....122	.....(7)	.....(59)
4. 2008.....	.....XXX	.....XXX	.....1,922	.....599	.....462	.....316	.....166	.....106	.....36	.....22	.....(14)	.....(84)
5. 2009.....	.....XXX	.....XXX	.....XXX	.....1,641	.....674	.....516	.....387	.....258	.....155	.....134	.....(21)	.....(124)
6. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....2,008	.....546	.....415	.....283	.....37	.....30	.....(7)	.....(253)
7. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,953	.....402	.....308	.....155	.....53	.....(102)	.....(255)
8. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,749	.....311	.....195	.....126	.....(69)	.....(185)
9. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,787	.....309	.....221	.....(88)	.....(1,566)
10. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,369	.....374	.....(1,995)	.....XXX
11. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,477	.....XXX	.....XXX
12. Totals.....											.....(2,257)	.....(2,491)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
1. Prior.....	.....000	.....429	.....713	.....1,351	.....1,236	.....1,267	.....1,273	.....1,274	.....1,275	.....1,277	.....XXX	.....XXX
2. 2006.....	.....3	.....38	.....101	.....173	.....241	.....246	.....278	.....316	.....316	.....346	.....XXX	.....XXX
3. 2007.....	.....XXX	.....1	.....16	.....88	.....97	.....112	.....113	.....113	.....113	.....119	.....XXX	.....XXX
4. 2008.....	.....XXX	.....XXX	.....2	.....17	.....(7)	.....(3)	.....(1)	.....1	.....15	.....18	.....XXX	.....XXX
5. 2009.....	.....XXX	.....XXX	.....XXX	.....	.....126	.....134	.....134	.....134	.....134	.....134	.....XXX	.....XXX
6. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1	.....4	.....10	.....10	.....10	.....10	.....XXX	.....XXX
7. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....	.....3	.....5	.....9	.....9	.....XXX	.....XXX
8. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....	.....11	.....19	.....26	.....XXX	.....XXX
9. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....	.....	.....	.....XXX	.....XXX
10. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....	.....	.....XXX	.....XXX
11. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....	.....XXX	.....XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior.....	.....779	.....339	.....262	.....169	.....76	.....55	.....	.....	.....	.....
2. 2006.....	.....1,593	.....363	.....272	.....316	.....70	.....28	.....27	.....15	.....2	.....2
3. 2007.....	.....XXX	.....1,925	.....580	.....517	.....310	.....140	.....90	.....68	.....16	.....3
4. 2008.....	.....XXX	.....XXX	.....1,920	.....541	.....468	.....319	.....165	.....105	.....21	.....4
5. 2009.....	.....XXX	.....XXX	.....XXX	.....1,635	.....545	.....382	.....253	.....124	.....21	.....
6. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....2,007	.....542	.....405	.....273	.....27	.....20
7. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,953	.....393	.....297	.....146	.....44
8. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,749	.....299	.....175	.....100
9. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,787	.....309	.....221
10. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,363	.....374
11. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,477

EVERGREEN NATIONAL INDEMNITY COMPANY
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
		2	3						
	Active Status	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges not Included in Premiums	Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
1. Alabama.....AL	L	676,578	526,003			38,659	142,356		
2. Alaska.....AK	L	1,100	621			560	642		
3. Arizona.....AZ	L	103,371	111,764			(9,234)	23,448		
4. Arkansas.....AR	L	303,712	413,591			(119,116)	66,671		
5. California.....CA	L	1,495,190	1,765,807		3,000	(38,375)	344,157		
6. Colorado.....CO	L	224,426	228,949			5,824	75,187		
7. Connecticut.....CT	L	216,830	238,860		35,058	(48,710)	285,763		
8. Delaware.....DE	L	5,355	5,334			126	1,158		
9. District of Columbia.....DC	L	60,989	37,423			8,990	14,667		
10. Florida.....FL	L	1,152,435	962,944			(28,005)	253,685		
11. Georgia.....GA	L	274,720	257,503			(345)	57,316		
12. Hawaii.....HI	N								
13. Idaho.....ID	L	4,575	3,618			457	958		
14. Illinois.....IL	L	660,409	658,266			551	226,385		
15. Indiana.....IN	L	1,309,815	1,315,296			20,406	274,590		
16. Iowa.....IA	L	171,549	171,701			2,973	37,303		
17. Kansas.....KS	L	95,310	105,535			(13,301)	23,269		
18. Kentucky.....KY	L	1,675,119	1,592,330		413,071	(1,174,887)	6,647,205		
19. Louisiana.....LA	L	1,053,829	1,072,993			40,081	224,965		
20. Maine.....ME	L	696,690	674,647			19,544	145,823		
21. Maryland.....MD	L	331,971	239,169			202,500	144,831		
22. Massachusetts.....MA	L	990,574	1,028,500			(7,793)	217,857		
23. Michigan.....MI	L	1,682,125	1,619,487		(9,000)	67,061	354,594		
24. Minnesota.....MN	L	143,203	158,612			(22,778)	32,210		
25. Mississippi.....MS	L	282,318	286,923			1,335	59,651		
26. Missouri.....MO	L	666,670	661,731		82,506	(92,434)	854,876		
27. Montana.....MT	L	30,703	30,440			(7,732)	7,118		
28. Nebraska.....NE	L	392,237	323,549			112,489	161,447		
29. Nevada.....NV	L	27,729	37,416			(15,131)	6,145		
30. New Hampshire.....NH	L	568,807	584,536			8,735	131,480		
31. New Jersey.....NJ	L	106,533	165,070			(113,185)	40,986		
32. New Mexico.....NM	L	57,511	60,797			(114)	13,105		
33. New York.....NY	L	2,876,294	2,801,488			56,750	680,510		
34. North Carolina.....NC	E					(1,219)			
35. North Dakota.....ND	L	4,781	4,684			(3,081)	2,102		
36. Ohio.....OH	L	3,334,963	3,266,018			(2,629)	971,196		
37. Oklahoma.....OK	L	390,270	394,677			3,825	81,684		
38. Oregon.....OR	L	308,030	314,350			(87)	61,728		
39. Pennsylvania.....PA	L	5,429,642	5,568,029			112,215	1,174,601		
40. Rhode Island.....RI	L	79,738	79,573			46,001	46,188		
41. South Carolina.....SC	L	275,100	275,346			161	61,312		
42. South Dakota.....SD	L	3,631	3,631			70	760		
43. Tennessee.....TN	L	609,298	620,647		9,574	27,834	157,715		
44. Texas.....TX	L	1,377,761	1,358,384			(31,845)	415,655		
45. Utah.....UT	L	40,600	40,587			984	8,330		
46. Vermont.....VT	L	660,745	476,602			161,165	243,909		
47. Virginia.....VA	L	1,209,735	1,308,822		1,720	(11,134)	686,507		
48. Washington.....WA	L	126,029	123,767			67	24,977		
49. West Virginia.....WV	E					(26,146)	4,886		
50. Wisconsin.....WI	L	1,873,621	1,815,887			58,723	392,003		
51. Wyoming.....WY	L	865	779						
52. American Samoa.....AS	N								
53. Guam.....GU	N								
54. Puerto Rico.....PR	N								
55. US Virgin Islands.....VI	N								
56. Northern Mariana Islands..MP	N								
57. Canada.....CAN	N								
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0	0	0
59. Totals.....	(a) 48	34,063,486	33,792,685	0	535,929	(769,195)	15,883,911	0	0

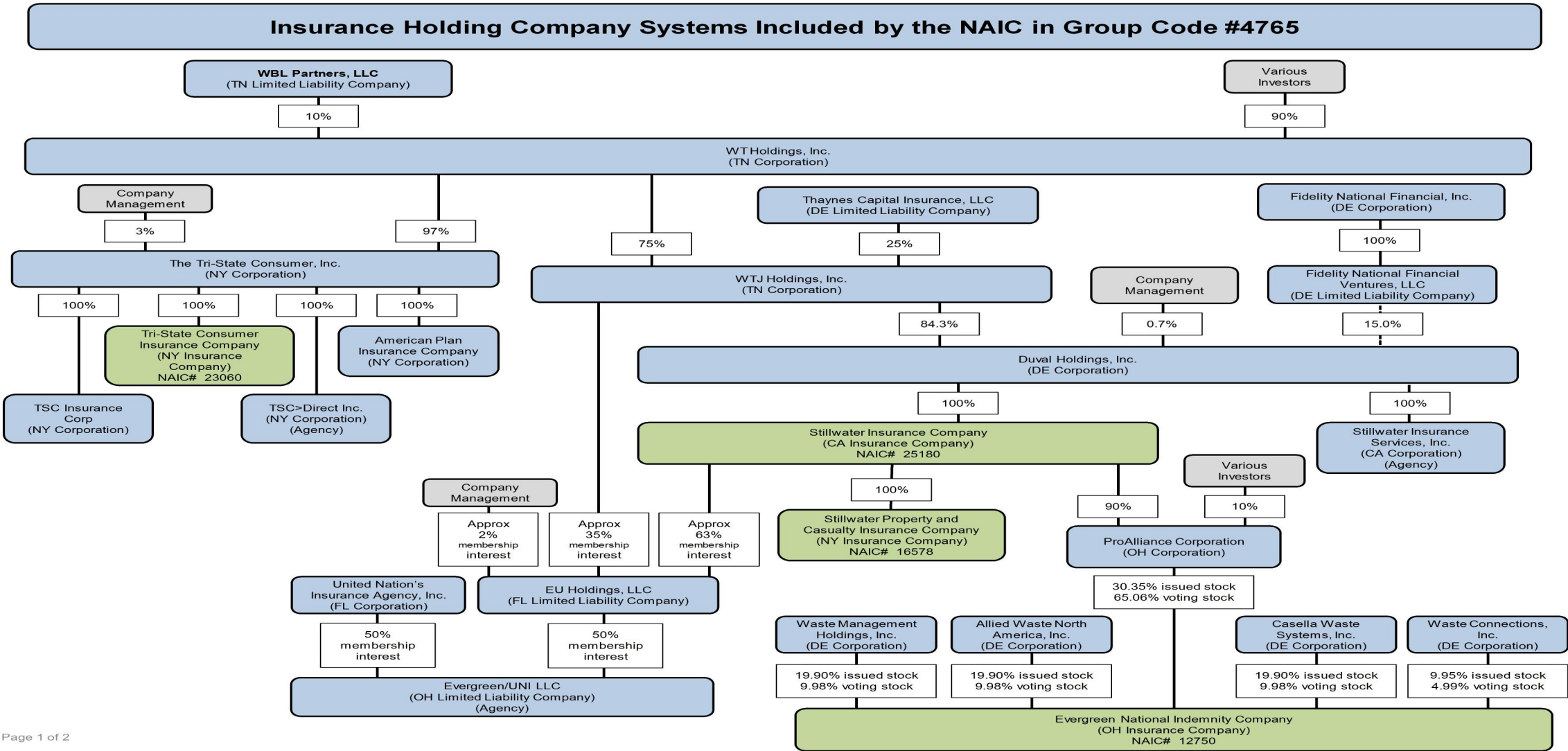
DETAILS OF WRITE-INS

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

(a) Insert the number of "L" responses except for Canada and Other Alien.
(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.
Explanation of Basis of Allocation of Premiums by States, etc.

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

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

Insurance Holding Company Systems Included by the NAIC in Group Code #4765



SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

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