



ANNUAL STATEMENT

For the Year Ended December 31, 2016  
of the Condition and Affairs of the

EVERGREEN NATIONAL INDEMNITY COMPANY

NAIC Group Code.....4869, 4869 <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	a. Is this an original filing?	Yes [ X ] No [ ]
This _____ day of _____ 2017	b. If 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).....	22,015,973		22,015,973	18,324,350
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	4,825,199		4,825,199	4,966,395
2.2 Common stocks.....	8,943,358		8,943,358	8,079,036
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	830,870		830,870	830,870
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 (\$.....4,501,775, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....735,541, Schedule DA).....	5,237,316		5,237,316	5,975,062
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	3,240,059		3,240,059	2,857,205
9. Receivables for securities.....			0	19,770
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).....	45,092,775	0	45,092,775	41,052,688
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	287,668		287,668	320,891
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,590,276		1,590,276	1,966,454
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.....	140,297		140,297	317,482
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.....	901,910	464,775	437,135	893,996
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	3,356		3,356	4,865
21. Furniture and equipment, including health care delivery assets (\$.....0).....	514	514	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.....	13,499	13,499	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	48,030,295	478,788	47,551,507	44,556,376
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	48,030,295	478,788	47,551,507	44,556,376

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 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Miscellaneous Receivable.....	5,248	5,248	0	
2502. Prepaid Insurance.....	8,251	8,251	0	
2503. ....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	13,499	13,499	0	0

EVERGREEN NATIONAL INDEMNITY COMPANY  
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....	3,338,356	2,736,418
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).....	950,697	912,611
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....	266,051	323,026
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	126,640	281,123
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	109,522	105,420
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 \$.....11,022,588 and including warranty reserves of \$.....110,926 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	5,392,890	4,991,067
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	2,686,913	3,448,330
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.....	120,078	
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.....	1,277,140	1,212,670
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	14,268,287	14,010,665
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	14,268,287	14,010,665
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).....	4,423,396	1,685,887
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).....	33,283,220	30,545,711
38. TOTAL (Page 2, Line 28, Col. 3).....	47,551,507	44,556,376

DETAILS OF WRITE-INS

2501. Unrestricted Collateral.....	934,006	925,499
2502. Pledged as Collateral.....	343,134	287,171
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	1,277,140	1,212,670
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above).....	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above).....	0	0

EVERGREEN NATIONAL INDEMNITY COMPANY  
STATEMENT OF INCOME

			1	2
UNDERWRITING INCOME			Current Year	Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4).....		11,647,020	11,346,499
DEDUCTIONS:				
2.	Losses incurred (Part 2, Line 35, Column 7).....		617,404	193,298
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		37,173	(44,205)
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2).....		8,496,248	8,813,430
5.	Aggregate write-ins for underwriting deductions.....		0	0
6.	Total underwriting deductions (Lines 2 through 5).....		9,150,825	8,962,523
7.	Net income of protected cells.....			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....		2,496,195	2,383,976
INVESTMENT INCOME				
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17).....		1,508,030	1,455,780
10.	Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....		(776,611)	(385,999)
11.	Net investment gain (loss) (Lines 9 + 10).....		731,419	1,069,781
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.....		1,137	522
15.	Total other income (Lines 12 through 14).....		1,137	522
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....		3,228,751	3,454,279
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).....		3,228,751	3,454,279
19.	Federal and foreign income taxes incurred.....		1,223,153	1,135,519
20.	Net income (Line 18 minus Line 19) (to Line 22).....		2,005,598	2,318,760
CAPITAL AND SURPLUS ACCOUNT				
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....		30,545,711	33,209,334
22.	Net income (from Line 20).....		2,005,598	2,318,760
23.	Net transfers (to) from Protected Cell accounts.....			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$....891,211.....		2,687,014	(2,965,912)
25.	Change in net unrealized foreign exchange capital gain (loss).....			
26.	Change in net deferred income tax.....		272,859	882,992
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....		222,038	(449,463)
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	0
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37).....		2,737,509	(2,663,623)
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....		33,283,220	30,545,711
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 through 0503 plus 0598) (Line 5 above).....		0	0
1401.	Miscellaneous Income.....		1,137	522
1402.	.....			
1403.	.....			
1498.	Summary of remaining write-ins for Line 14 from overflow page.....		0	0
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above).....		1,137	522
3701.	Misc Surplus Change.....			
3702.	.....			
3703.	.....			
3798.	Summary of remaining write-ins for Line 37 from overflow page.....		0	0
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above).....		0	0

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	11,663,604	11,483,447
2. Net investment income.....	1,547,299	1,443,529
3. Miscellaneous income.....	1,137	522
4. Total (Lines 1 through 3).....	13,212,040	12,927,498
5. Benefit and loss related payments.....	(224,084)	2,567
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	8,711,636	8,555,768
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	1,219,051	1,126,110
10. Total (Lines 5 through 9).....	9,706,603	9,684,445
11. Net cash from operations (Line 4 minus Line 10).....	3,505,437	3,243,053
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	2,621,292	5,734,736
12.2 Stocks.....	9,738,687	3,334,227
12.3 Mortgage loans.....		9,866
12.4 Real estate.....		
12.5 Other invested assets.....	584,332	(266,496)
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....	19,770	32,515
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	12,964,081	8,844,848
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	5,918,449	4,724,044
13.2 Stocks.....	8,450,730	5,163,848
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....	572,324	181,857
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	14,941,503	10,069,750
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).....	(1,977,422)	(1,224,902)
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).....	184,239	31,656
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(2,265,761)	(2,418,344)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	(737,746)	(400,193)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	5,975,062	6,375,255
19.2 End of year (Line 18 plus Line 19.1).....	5,237,316	5,975,062

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	.....	.....0	.....0
2.	Allied lines.....	.....0	.....	.....0	.....0
3.	Farmowners multiple peril.....	.....0	.....	.....0	.....0
4.	Homeowners multiple peril.....	.....0	.....	.....0	.....0
5.	Commercial multiple peril.....	.....0	.....	.....0	.....0
6.	Mortgage guaranty.....	.....0	.....	.....0	.....0
8.	Ocean marine.....	.....0	.....	.....0	.....0
9.	Inland marine.....	.....0	.....	.....0	.....0
10.	Financial guaranty.....	.....0	.....	.....0	.....0
11.1	Medical professional liability - occurrence.....	.....0	.....	.....0	.....0
11.2	Medical professional liability - claims-made.....	.....0	.....	.....0	.....0
12.	Earthquake.....	.....0	.....	.....0	.....0
13.	Group accident and health.....	.....0	.....	.....0	.....0
14.	Credit accident and health (group and individual).....	.....0	.....	.....0	.....0
15.	Other accident and health.....	.....0	.....	.....0	.....0
16.	Workers' compensation.....	.....0	.....	.....0	.....0
17.1	Other liability - occurrence.....	.....0	.....	.....0	.....0
17.2	Other liability - claims-made.....	.....0	.....	.....0	.....0
17.3	Excess workers' compensation.....	.....0	.....	.....0	.....0
18.1	Products liability - occurrence.....	.....0	.....	.....0	.....0
18.2	Products liability - claims-made.....	.....0	.....	.....0	.....0
19.1, 19.2	Private passenger auto liability.....	.....0	.....	.....0	.....0
19.3, 19.4	Commercial auto liability.....	.....0	.....	.....0	.....0
21.	Auto physical damage.....	.....0	.....	.....0	.....0
22.	Aircraft (all perils).....	.....0	.....	.....0	.....0
23.	Fidelity.....	.....0	.....	.....0	.....0
24.	Surety.....	.....11,925,544	.....4,852,340	.....5,195,263	.....11,582,621
26.	Burglary and theft.....	.....0	.....	.....0	.....0
27.	Boiler and machinery.....	.....0	.....	.....0	.....0
28.	Credit.....	.....0	.....	.....0	.....0
29.	International.....	.....0	.....	.....0	.....0
30.	Warranty.....	.....123,300	.....138,727	.....197,627	.....64,400
31.	Reinsurance - nonproportional assumed property.....	.....0	.....	.....0	.....0
32.	Reinsurance - nonproportional assumed liability.....	.....0	.....	.....0	.....0
33.	Reinsurance - nonproportional assumed financial lines.....	.....0	.....	.....0	.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....12,048,844	.....4,991,067	.....5,392,890	.....11,647,021

DETAILS OF WRITE-INS

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

EVERGREEN NATIONAL INDEMNITY COMPANY  
UNDERWRITING AND INVESTMENT EXHIBIT  
PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business		1	2	3	4	5
		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.....	.....5,195,263	.....	.....	.....	.....5,195,263
26.	Burglary and theft.....	.....	.....	.....	.....	.....0
27.	Boiler and machinery.....	.....	.....	.....	.....	.....0
28.	Credit.....	.....	.....	.....	.....	.....0
29.	International.....	.....	.....	.....	.....	.....0
30.	Warranty.....	.....197,627	.....	.....	.....	.....197,627
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.....	.....5,392,890	.....0	.....0	.....0	.....5,392,890
36.	Accrued retrospective premiums based on experience.....					.....
37.	Earned but unbilled premiums.....					.....0
38.	Balance (sum of Lines 35 through 37).....					.....5,392,890

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 through 3403 plus 3498) (Line 34 above).....	.....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.....	.....33,632,536		.....2,747,472		.....24,454,464	.....11,925,544
26. Burglary and theft.....						.....0
27. Boiler and machinery.....						.....0
28. Credit.....						.....0
29. International.....						.....0
30. Warranty.....	.....81,500		.....41,800			.....123,300
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.....	.....33,714,036	.....0	.....2,789,272	.....0	.....24,454,464	.....12,048,844

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 through 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

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire.....				0	0		0	0.0
2.	Allied lines.....				0	0		0	0.0
3.	Farmowners multiple peril.....				0	0		0	0.0
4.	Homeowners multiple peril.....				0	0		0	0.0
5.	Commercial multiple peril.....				0	0		0	0.0
6.	Mortgage guaranty.....				0	0		0	0.0
8.	Ocean marine.....				0	0		0	0.0
9.	Inland marine.....				0	0		0	0.0
10.	Financial guaranty.....				0	0		0	0.0
11.1	Medical professional liability - occurrence.....				0	0		0	0.0
11.2	Medical professional liability - claims-made.....				0	0		0	0.0
12.	Earthquake.....				0	0		0	0.0
13.	Group accident and health.....				0	0		0	0.0
14.	Credit accident and health (group and individual).....				0	0		0	0.0
15.	Other accident and health.....				0	0		0	0.0
16.	Workers' compensation.....	514,003	1,445	515,448	0	0		0	0.0
17.1	Other liability - occurrence.....				0	0		0	0.0
17.2	Other liability - claims-made.....				0	0		0	0.0
17.3	Excess workers' compensation.....				0	0		0	0.0
18.1	Products liability - occurrence.....				0	0		0	0.0
18.2	Products liability - claims-made.....				0	0		0	0.0
19.1, 19.2	Private passenger auto liability.....				0	0		0	0.0
19.3, 19.4	Commercial auto liability.....				0	0		0	0.0
21.	Auto physical damage.....				0	0		0	0.0
22.	Aircraft (all perils).....				0	0		0	0.0
23.	Fidelity.....				0	0		0	0.0
24.	Surety.....	15,466			15,466	3,338,356	2,736,418	617,404	5.3
26.	Burglary and theft.....				0	0		0	0.0
27.	Boiler and machinery.....				0	0		0	0.0
28.	Credit.....				0	0		0	0.0
29.	International.....				0	0		0	0.0
30.	Warranty.....				0	0		0	0.0
31.	Reinsurance - nonproportional assumed property.....	XXX			0	0		0	0.0
32.	Reinsurance - nonproportional assumed liability.....	XXX			0	0		0	0.0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			0	0		0	0.0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35.	TOTALS.....	529,469	1,445	515,448	15,466	3,338,356	2,736,418	617,404	5.3
DETAILS OF WRITE-INS									
3401.	.....				0	0		0	0.0
3402.	.....				0	0		0	0.0
3403.	.....				0	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 through 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.....	4,682,292	16,329	4,698,621	0	2,167,498	31,142	2,198,640	0	
17.1	Other liability - occurrence.....				0	2,338		2,338	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.....	110,040		30	110,010	9,115,383	1,530,821	7,417,858	3,338,356	950,697
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.....	4,792,332	16,329	4,698,651	110,010	11,285,219	1,561,963	9,618,836	3,338,356	950,697
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	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	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.....	103,148			103,148
1.2 Reinsurance assumed.....	93,670			93,670
1.3 Reinsurance ceded.....	159,645			159,645
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	37,173	0	0	37,173
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		15,919,781		15,919,781
2.2 Reinsurance assumed, excluding contingent.....		1,346,263		1,346,263
2.3 Reinsurance ceded, excluding contingent.....		12,180,919		12,180,919
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	5,085,125	0	5,085,125
3. Allowances to manager and agents.....				0
4. Advertising.....		104,065		104,065
5. Boards, bureaus and associations.....		42,885		42,885
6. Surveys and underwriting reports.....				0
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....		1,243,477	18,934	1,262,411
8.2 Payroll taxes.....		84,899	1,293	86,192
9. Employee relations and welfare.....		219,844	3,348	223,192
10. Insurance.....		52,766		52,766
11. Directors' fees.....				0
12. Travel and travel items.....		236,259	3,598	239,857
13. Rent and rent items.....		174,772	2,662	177,434
14. Equipment.....		21,592	329	21,921
15. Cost or depreciation of EDP equipment and software.....		3,716	57	3,773
16. Printing and stationery.....		14,235	217	14,452
17. Postage, telephone and telegraph, exchange and express.....		44,241	674	44,915
18. Legal and auditing.....		303,251	4,616	307,867
19. Totals (Lines 3 to 18).....	0	2,546,002	35,728	2,581,730
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....		514,461		514,461
20.2 Insurance department licenses and fees.....		146,433		146,433
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....		7,000		7,000
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	667,894	0	667,894
21. Real estate expenses.....				0
22. Real estate taxes.....				0
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	197,227	245,522	442,749
25. Total expenses incurred.....	37,173	8,496,248	281,250	(a) 8,814,671
26. Less unpaid expenses - current year.....	950,697	369,162	23,529	1,343,388
27. Add unpaid expenses - prior year.....	912,611	585,462	18,686	1,516,759
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).....	(913)	8,712,548	276,407	8,988,042

DETAILS OF WRITE-INS				
2401. Other Outside Services.....		82,637	245,522	328,159
2402. Data Processing.....		57,722		57,722
2403. Other.....		56,868		56,868
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above).....	0	197,227	245,522	442,749

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

EVERGREEN NATIONAL INDEMNITY COMPANY  
EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds.....	(a).....82,993	.....83,022
1.1	Bonds exempt from U.S. tax.....	(a).....224,436	.....229,515
1.2	Other bonds (unaffiliated).....	(a).....617,299	.....606,451
1.3	Bonds of affiliates.....	(a).....	.....
2.1	Preferred stocks (unaffiliated).....	(b).....279,613	.....279,613
2.11	Preferred stocks of affiliates.....	(b).....	.....
2.2	Common stocks (unaffiliated).....	.....360,789	.....349,041
2.21	Common stocks of affiliates.....	.....	.....
3.	Mortgage loans.....	(c).....2,217	.....2,217
4.	Real estate.....	(d).....	.....
5.	Contract loans.....	.....	.....
6.	Cash, cash equivalents and short-term investments.....	(e).....5,581	.....5,578
7.	Derivative instruments.....	(f).....	.....
8.	Other invested assets.....	.....233,842	.....233,842
9.	Aggregate write-ins for investment income.....	.....0	.....0
10.	Total gross investment income.....	.....1,806,771	.....1,789,280
11.	Investment expenses.....		(g).....281,250
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).....		.....281,250
17.	Net investment income (Line 10 minus Line 16).....		.....1,508,030

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 through 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 through 1503 plus 1598) (Line 15 above).....		.....0

- (a) Includes \$.....78,801 accrual of discount less \$.....75,801 amortization of premium and less \$.....22,454 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....4,203 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....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.....	.....72	.....	.....72	.....4,023	.....
1.1	Bonds exempt from U.S. tax.....	.....104,315	.....	.....104,315	.....558,131	.....
1.2	Other bonds (unaffiliated).....	.....(275,074)	.....	.....(275,074)	.....	.....
1.3	Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1	Preferred stocks (unaffiliated).....	.....(5,868)	.....	.....(5,868)	.....12,549	.....
2.11	Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2	Common stocks (unaffiliated).....	.....(219,447)	.....(380,609)	.....(600,055)	.....2,608,660	.....
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	.....394,862	.....
9.	Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses).....	.....(396,002)	.....(380,609)	.....(776,611)	.....3,578,225	.....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
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....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
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.....	464,775	626,265	161,490
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....		2,999	2,999
21. Furniture and equipment, including health care delivery assets.....	514	1,015	500
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.....	13,499	8,183	(5,316)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	478,788	700,826	222,038
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	478,788	700,826	222,038

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 through 1103 plus 1198) (Line 11 above).....	0	0	0
2501. Prepaid Insurance.....	8,251	8,183	(68)
2502. Miscellaneous Receivable.....	5,248		(5,248)
2503. ....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	13,499	8,183	(5,316)

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, 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.

	SSAP #	F/S Page	F/S Line #	2016	2015
<b>NET INCOME</b>					
(1) EVERGREEN NATIONAL INDEMNITY COMPANY state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 2,005,598	\$ 2,318,760
(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)	XXX	XXX	XXX	\$ 2,005,598	\$ 2,318,760
<b>SURPLUS</b>					
(5) EVERGREEN NATIONAL INDEMNITY COMPANY state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 33,283,220	\$ 30,545,711
(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)	XXX	XXX	XXX	\$ 33,283,220	\$ 30,545,711

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:

1. Short-term investments are stated at amortized cost.
2. Bonds not backed by other loans are stated at amortized cost using the interest method.
3. Common stocks are stated at fair market value.
4. Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32.
5. The mortgage loan on real estate is stated at purchase price less principal payments received.
6. 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.
7. The Company has limited investments in subsidiaries, controlled and affiliated entities. See Schedule BA and paragraph 8 of this disclosure.
8. 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.
9. The Company does not invest in derivatives.
10. The Company does not have any premium deficiencies.
11. 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 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.

NOTES TO FINANCIAL STATEMENTS

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 89.9%.
- (3)   There were no taxes, assessments or any amounts advanced and not included in the mortgage loan.
- (4)   Age Analysis of Mortgage Loans:

			Residential		Commercial		Mezzanine	Total
		Farm	Insured	All Other	Insured	All Other		
a.	Current Year							
	1. Recorded Investment (All)							
	(a) Current	\$	\$	\$	\$	\$	\$	\$
	(b) 30-59 Days Past Due							
	(c) 60-89 Days Past Due							
	(d) 90-179 Days Past Due							
	(e) 180+ Days Past Due					830,870		830,870
	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	\$	\$	\$	\$	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							

NOTES TO FINANCIAL STATEMENTS

	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$	\$
	(b)	Interest Accrued							
4.		Interest Reduced							
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$	\$
	(b)	Number of Loans							
	(c)	Percent Reduced	%	%	%	%	%	%	%

- (5)

Investment in Impaired Loans With or Without Allowance for Credit Losses:  
Not applicable
- (6)

Investment in Impaired Loans  
Not applicable
- (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 (e.g., Bloomberg) or the Company's external investment advisory firm.
2.

The Company did not recognize any other-than-temporary impairments on loan-backed or structured securities during the current year due to an intent to sell or an inability or lack of intent to retain the investment until recovery.
3.

The Company did not recognize any other-than-temporary impairments on loan-backed or structured securities during the current year due to the present value of cash flows expected to be less than amortized cost.

4.

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

a.	The aggregate amount of unrealized losses:	1.	Less than 12 Months	\$	37,964
		2.	12 Months or Longer	\$	9,473
b.	The aggregate related fair value of securities with unrealized losses:	1.	Less than12 Months	\$	1,160,155
		2.	12 Months or Longer	\$	262,356

5.

All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether other-than-temporary impairments should be recognized. The Company asserts that it has the intent and ability to hold these securities long enough to allow the cost basis of these securities to be recovered. These conclusions are supported by a detail analysis of the underlying credit and cash flows of each security. Unrealized losses are primarily attributable to credit spread widening and increased liquidity discounts. It is possible that the Company could recognize other-than-temporary impairments in the future on some of the securities, if future events, information and the passage of time causes it to conclude that declines in value are other-than-temporary.

E. Repurchase Agreements and/or Securities Lending Transactions  
Not applicable

F. Real Estate  
Not applicable

G. Investments in Low-Income Housing Trade Credits (LIHTC)  
Not applicable

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted							Current Year			
	Current Year							8	9	Percentage	
	1	2	3	4	5	6	7			10	11
	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 Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown											
b. Collateral held under security											



NOTES TO FINANCIAL STATEMENTS

lending arrangements												
c. Subject to repurchase agreements												
d. Subject to reverse repurchase agreements												
e. Subject to dollar repurchase agreements												
f. Subject to dollar reverse repurchase agreements												
g. Placed under option contracts												
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock												
i. FHLB capital stock												
j. On deposit with states	5,137,530				5,137,530	5,136,187	1,343		5,137,530	10.696	10.804	
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	343,134				343,134	287,171	55,963		343,134	0.714	0.722	
n. Other restricted assets	120,078				120,078		120,078		120,078	0.250	0.253	
o. Total Restricted Assets	\$ 5,600,742	\$	\$	\$	\$ 5,600,742	\$ 5,423,358	\$ 177,384		\$ 5,600,742	11.661	11.778%	

- (a) Subset of column 1  
(b) Subset of column 3  
(c) Column 5 divided by Asset Page, Column 1, Line 28  
(d) Column 9 divided by Asset Page, Column 3, Line 28

(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)

Description of Assets	Gross (Admitted & Nonadmitted) 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 (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Warranty Business Pledged	\$ 343,134	\$	\$	\$	\$ 343,134	\$ 287,171	\$ 55,963	\$ 343,134	0.714	0.722
Total (c)	\$ 343,134	\$	\$	\$	\$ 343,134	\$ 287,171	\$ 55,963	\$ 343,134	0.714	0.722

- (a) Subset of column 1  
(b) Subset of column 3  
(c) Total Line for Columns 1 through 7 should equal 5H(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)m Columns 9 through 11 respectively.

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

Description of Assets	Gross (Admitted & Nonadmitted) 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 (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Retained for Others	\$ 120,078	\$	\$	\$	\$ 120,078	\$	\$ 120,078	\$ 120,078	0.250	0.253
Total (c)	\$ 120,078	\$	\$	\$	\$ 120,078	\$	\$ 120,078	\$ 120,078	0.250	0.253

- (a) Subset of column 1  
(b) Subset of column 3  
(c) Total Line for Columns 1 through 7 should equal 5H(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)n Columns 9 through 11 respectively.

(4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

	1	2	3	4
Collateral Assets	Book/Adjusted Carrying Value (BACV)	Fair Value	% of BACV to Total Assets (Admitted and Nonadmitted)*	% of BACV to Total Admitted Assets**
a. Cash	\$ 343,134	\$ 343,134	0.714%	0.722%
b. Schedule D, Part 1			%	%
c. Schedule D, Part 2, Sec. 1			%	%

NOTES TO FINANCIAL STATEMENTS

d. Schedule D, Part 2, Sec. 2			%	%
e. Schedule B			%	%
f. Schedule A			%	%
g. Schedule BA, Part 1			%	%
h. Schedule DL, Part 1			%	%
i. Other			%	%
j. Total Collateral Assets (a+b+c+d+e+f+g+i)	\$ 343,134	\$ 343,134	0.714%	0.722%

\*. Column 1 divided by Asset Page, Line 26 (Column 1)  
\*\* Column 1 divided by Asset Page, Line 26 (Column 3)

	1	2
	Amount	% of Liability to Total Liabilities
k. Recognized Obligation to Return Collateral Asset	\$ 343,134	2.405%

\* Column 1 divided by Liability Page, Line 26 (Column 1)

I. Working Capital Finance Investments  
Not applicable

J. Offsetting and Netting of Assets and Liabilities  
Not applicable

K. Structured Notes  
Not applicable

L. 5\* Securities

Investment	Number of 5* Securities		Aggregate BACV		Aggregate Fair Value	
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) Bonds – AC	1	1	\$ 400,000	\$ 400,000	\$ 410,676	\$ 418,968
(2) Bonds – FV			\$	\$	\$	\$
(3) LB & SS – AC			\$	\$	\$	\$
(4) LB & SS – FV			\$	\$	\$	\$
(5) Preferred Stock – AC			\$	\$	\$	\$
(6) Preferred Stock – FV			\$	\$	\$	\$
(7) Total (1+2+3+4+5+6)	1	1	\$ 400,000	\$ 400,000	\$ 410,676	\$ 418,968

AC – Amortized Cost                      FV – Fair Value

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, 2016 and 2015, the Company did not have any investment income amounts due and accrued over 90 days past due.

Note 8 – Derivative Instruments

Not applicable

Note 9 – Income Taxes

A. Deferred Tax Assets/(Liabilities)

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

	2016			2015			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
a. Gross deferred tax assets	\$ 579,534	\$ 428,254	\$ 1,007,788	\$ 538,949	\$ 990,175	\$ 1,529,124	\$ 40,585	\$ (561,921)	\$ (521,336)
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax	579,534	428,254	1,007,788	538,949	990,175	1,529,124	40,585	(561,921)	(521,336)

**NOTES TO FINANCIAL STATEMENTS**

assets (1a-1b)									
d. Deferred tax assets nonadmitted	36,521	428,254	464,775	33,188	593,077	626,265	3,333	(164,823)	(161,490)
e. Subtotal net admitted deferred tax asset (1c-1d)	543,013		543,013	505,761	397,098	902,859	37,252	(397,098)	(359,846)
f. Deferred tax liabilities		105,878	105,878		8,863	8,863		97,015	97,015
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$ 543,013	\$ (105,878)	\$ 437,135	\$ 505,761	\$ 388,235	\$ 893,996	\$ 37,252	\$ (494,113)	\$ (456,861)

2. Admission Calculation Components

	2016			2015			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	\$ 543,013	\$	\$ 543,013	\$ 505,761	\$ 397,098	\$ 902,859	\$ 37,252	\$ (397,098)	\$ (359,846)
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)	\$ 543,013	\$	\$ 543,013	\$ 505,761	\$ 397,098	\$ 902,859	\$ 37,252	\$ (397,098)	\$ (359,846)

3. Other Admissibility Criteria

		2016	2015
a.	Ratio percentage used to determine recovery period and threshold limitation amount	1,434.700%	1,272.160%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 32,846,085	\$ 29,651,715

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.

	12/31/2016		12/31/2015		Change	
	1 Ordinary	2 Capital	3 Ordinary	4 Capital	5 (Col. 1-3) Ordinary	6 (Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 579,534	\$ 428,254	\$ 538,949	\$ 990,175	\$ 40,585	\$ (561,921)
2. Percentage of adjusted gross	%	%	%	%	%	%

NOTES TO FINANCIAL STATEMENTS

	DTAs by tax character attributable to the impact of tax planning strategies						
3.	Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 543,013	\$	\$ 505,761	\$ 397,098	\$ 37,252	\$ (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 2016	2 2015	3 (Col 1-2) Change
a. Federal	\$ 1,223,153	\$ 1,135,519	\$ 87,634
b. Foreign			
c. Subtotal	\$ 1,223,153	\$ 1,135,519	\$ 87,634
d. Federal income tax on net capital gains			
e. Utilization of capital loss carry-forwards			
f. Other			
g. Federal and Foreign income taxes incurred	\$ 1,223,153	\$ 1,135,519	\$ 87,634

2. Deferred Tax Assets

	1 2016	2 2015	3 (Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	\$ 52,172	\$ 47,412	\$ 4,760
2. Unearned premium reserve	366,717	339,392	27,325
3. Policyholder reserves			
4. Investments			
5. Deferred acquisition costs			
6. Policyholder dividends accrual			
7. Fixed assets	160,645	152,145	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	\$ 579,534	\$ 538,949	\$ 40,585
b. Statutory valuation allowance adjustment			
c. Nonadmitted	36,521	33,188	3,333
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	\$ 543,013	\$ 505,761	\$ 37,252
e. Capital:			
1. Investments	\$ 221,003	\$ 914,882	\$ (693,879)
2. Net capital loss carry-forward	207,251	75,293	131,958
3. Real estate			
4. Other (including items <5% of total capital tax assets)			
99. Subtotal	\$ 428,254	\$ 990,175	\$ (561,921)
f. Statutory valuation allowance adjustment			
g. Nonadmitted	428,254	593,077	(164,823)
h. Admitted capital deferred tax assets (2e99-2f-2g)		397,098	(397,098)
i. Admitted deferred tax assets (2d+2h)	\$ 543,013	\$ 902,859	\$ (359,846)

3. Deferred Tax Liabilities

	1 2016	2 2015	3 (Col 1–2) Change
a. Ordinary:			
1. Investments	\$	\$	\$
2. Fixed assets			
3. Deferred and uncollected premium			

NOTES TO FINANCIAL STATEMENTS

4. Policyholder reserves			
5. Other (including items <5% of total ordinary tax liabilities)			
99. Subtotal	\$	\$	\$
b. Capital:			
1. Investments	\$ 105,878	\$ 8,863	\$ 97,015
2. Real estate			
3. Other (including items <5% of total capital tax liabilities)			
99. Subtotal	105,878	8,863	97,015
c. Deferred tax liabilities (3a99+3b99)	\$ 105,878	\$ 8,863	\$ 97,015
4. Net Deferred Tax Assets (2i – 3c)	\$ 437,135	\$ 893,996	\$ (456,861)

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	\$ 1,097,775	34.00%
Proration of tax exempt investment income		%
Tax exempt income deduction, net	-66,330	-2.05%
Dividends received deduction, net	-62,420	-1.93%
Disallowed travel and entertainment	23,532	0.73%
Other permanent differences	2,380	0.07%
Temporary Differences:		
Total ordinary DTAs	\$	%
Total ordinary DTLs		%
Total capital DTAs		%
Total capital DTLs		%
Other:		
Statutory valuation allowance adjustment	\$	%
Accrual adjustment – prior year	-47,326	-1.47%
Other	2,682	0.08%
Totals	\$ 950,293	29.43%
Federal and foreign income taxes incurred	1,223,153	37.88%
Realized capital gains (losses) tax		%
Change in net deferred income taxes	-272,860	-8.45%
Total statutory income taxes	\$ 950,293	29.43%

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

At December 31, 2016, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

The following is income tax expense for 2016 and 2015 that is available for recoupment in the event of future net losses:

Year	Amount
2016	\$ 1,270,479
2015	\$ 1,175,388

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

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

NOTES TO FINANCIAL STATEMENTS

In 2016 and 2015, the Company declared and paid dividends as follows:

- a. Declared May 12, 2016 and paid May 23, 2016 – an ordinary cash dividend of \$1,250,000
- b. Declared November 10, 2016 and paid November 21, 2016 – 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, 2016

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. All SCA investments

Not applicable

N. Investment in Insurance SCAs

Not applicable

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 Plan

Not applicable

E. Defined Contribution Plans

Not applicable

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

NOTES TO FINANCIAL STATEMENTS

The Company has the following shares authorized, issued and outstanding at December 31, 2016:

- 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

- 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 2017 is \$3,328,322, representing 10% of the surplus as regards policyholders as of December 31, 2016.

- In 2016 and 2015, the Company declared and paid dividends as follows:
- a. Declared May 12, 2016 and paid May 23, 2016 – an ordinary cash dividend of \$1,250,000
  - b. Declared November 10, 2016 and paid November 21, 2016 – 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
- 10. The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is: \$407,215
- 11. Surplus Notes  
Not applicable
- 12. - 13. Quasi-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, 2016. 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 have arisen in the course of the Company's normal business operations. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company. The Company has no asset that it considers to be impaired.

Note 15 – Leases

- A. Lessee Operating Lease

NOTES TO FINANCIAL STATEMENTS

(1) The Company leases office facilities under various non-cancelable operating leases that expire November 30, 2021. The Company incurred rent expense of \$177,434 and \$181,276 in 2016 and 2015, respectively.

(2)

a.	At January 1, 2016 the minimum aggregate rental commitments are as follows:		
		Year Ending December 31	Operating Leases
	1.	2016	\$ 82,132
	2.	2017	\$ 83,769
	3.	2018	\$ 85,464
	4.	2019	\$ 87,192
	5.	2020	\$ 81,378
	6.	Total	\$ 419,935

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

B. Lessor Leasing Arrangements  
Not applicable

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  
Not applicable

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	\$	\$ 5,655,568	\$	\$ 5,655,568
Preferred Stocks		3,149,146		3,149,146
Common Stocks	5,476,720	3,277,144	189,494	8,943,358
Total	\$ 5,476,720	\$ 12,081,858	\$ 189,494	\$ 17,748,072

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 1/1/2016	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 12/31/2016
a. Assets										
Common Stocks	\$ 189,494	\$	\$	\$	\$	\$	\$	\$	\$	\$ 189,494
Total	\$ 189,494	\$	\$	\$	\$	\$	\$	\$	\$	\$ 189,494

	Beginning Balance at 1/1/2016	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 12/31/2016
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Transfers in (out) of Level 3  
Not applicable



NOTES TO FINANCIAL STATEMENTS

- (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:

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	\$ 22,028,772	\$ 22,015,973	\$ 3,576,049	\$ 18,452,723	\$	\$
Preferred Stocks	4,909,374	4,825,199		4,909,374		
Common Stocks	8,943,358	8,943,358	5,476,720	3,277,144	189,494	
Mortgage Loans		830,870				
Cash & Short Term Investments	5,237,316	5,237,316	5,237,316			
Other Invested Assets	3,240,059	3,240,059		3,240,059		

- 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	7.500 %	01/29/2016	Not available for public sale therefore price not available.

Note 21 – Other Items

- A. Unusual or Infrequent Items  
Not applicable
- B. Troubled Debt Restructuring Debtors  
Not applicable
- C. Other Disclosures  
Not applicable
- D. Business Interruption Insurance Recoveries  
Not applicable
- E. State Transferable and Non-Transferable Tax Credits  
Not applicable
- F. Subprime Mortgage Related Risk Exposure  
Not applicable
- G. Insurance-Linked Securities (ILS) Contracts  
Not applicable

Note 22 – Events Subsequent

- A. Type 1 – Recognized Subsequent Events:  
There were no subsequent events meriting disclosure through February 23, 2017 for the statutory statements issued on February 24, 2017.
- B. Type 2 – Non-recognized Subsequent Events:  
There were no subsequent events meriting disclosure through February 23, 2017 for the statutory statements issued on February 24, 2017.

Note 23 – Reinsurance

- A. Unsecured Reinsurance Recoverables

Name of Reinsurer	NAIC Code	Federal ID #	Amount
General Reinsurance Corp.	22039	13-2673100	\$ 6,936,000
Axis Reinsurance Co.	20370	51-0434766	5,604,000
Westchester Fire Ins. Co. (Ace)	21121	13-5481330	5,323,000
Ohio Indemnity Insurance Co.	26565	31-0620146	3,767,000
Swiss Reins America Corp.	25364	13-1675535	1,461,000
Endurance Reins Corp	11551	35-2293075	1,118,000
Partner Reins Co	38636	13-3031176	1,091,000

- B. Reinsurance Recoverable in Dispute

NOTES TO FINANCIAL STATEMENTS

Not applicable

C. Reinsurance Assumed and Ceded

(1) The following table summarizes ceded and assumed premiums and the related commission equity at December 31, 2016:

		Assumed Reinsurance		Ceded Reinsurance		Net	
		Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a.	Affiliates	\$	\$	\$	\$	\$	\$
b.	All Other	1,133,279	521,461	11,022,588	5,484,265	(9,889,309)	(4,962,804)
c.	Total	\$ 1,133,279	\$ 521,461	\$ 11,022,588	\$ 5,484,265	\$ (9,889,309)	\$ (4,962,804)
d.	Direct Unearned Premium Reserves			\$ 15,282,200			

(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 Reinsurer Aggregation  
Not applicable

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**  
Not applicable

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

Reserves as of December 31, 2015 were \$3.65 million. As of December 31, 2016, zero has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1.09 million as a result of re-estimation of unpaid claims and claim adjustment expenses principally on the surety lines of insurance. Therefore, there has been a \$2.56 million favorable prior year development since December 31, 2015 to December 31, 2016. The 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-
2.

Date of most recent evaluation of this liability:

December 31, 2016
3.

Was anticipated investment income utilized in the calculation?

Yes [ X ]    No [   ]

**Note 31 – High Deductibles**  
Not applicable

**Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**  
Not applicable

**Note 33 – Asbestos/Environmental Reserves**

NOTES TO FINANCIAL STATEMENTS

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.

12/31/2014

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).

05/19/2016

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 the 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 NAIC Company Code	3 State of Domicile
Name of Entity		

6.1

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

Yes [ ]No [X]

6.2

If yes, give full information:

7.1

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

Yes [ ]No [X]

7.2

If yes,

7.21

State the percentage of foreign control

%

7.22

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

1 Nationality	2 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 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 BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1

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

13.2

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

Yes [ ☐ ] No [ ☐ ]

13.3

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

Yes [ ☐ ] No [ ☐ ]

13.4

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

Yes [ ☐ ] No [ ☐ ] N/A [ ☐ ]

14.1

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

Yes [ ☒ ] 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

BOARD OF DIRECTORS

16.

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

Yes [ ☒ ] No [ ☐ ]

17.

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

Yes [ ☒ ] 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 [ ☐ ]

FINANCIAL

19.

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

Yes [ ☐ ] No [ ☒ ]

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

\$

21.22

Borrowed from others

\$

21.23

Leased from others

\$

21.24

Other

\$

22.1

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

Yes [ ☐ ] No [ ☒ ]

22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

\$

22.22

Amount paid as expenses

\$

22.23

Other amounts paid

\$

23.1

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

Yes [ ☐ ] No [ ☒ ]

23.2

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

\$

0

15.1

EVERGREEN NATIONAL INDEMNITY COMPANY  
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

INVESTMENT

24.01

Were all of 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.

\$

24.06

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

\$

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 31 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

\$5,137,530

25.29

On deposit with other regulatory bodies

\$0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$343,134

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 31 of the current year:

\$

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's 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

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

1 Name of Firm or Individual	2 Affiliation
NFC INVESTMENTS, LLC	A

EVERGREEN NATIONAL INDEMNITY COMPANY  
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets? Yes [ ] No [ ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [ ] No [ ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
132844	NFC INVESTMENTS, LLC		SEC	NO

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 [X]

29.2 If yes, complete the following schedule:

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 Holding	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	22,751,514	22,764,313	12,799
30.2	Preferred Stocks	4,825,199	4,909,374	84,175
30.3	Totals	27,576,713	27,673,687	96,974

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

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 reliable 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? \$ 42,701

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	\$ 23,758

34.1 Amount of payments for legal expenses, if any? \$ 7,915

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
RECTOR AND ASSOC, INC	\$ 4,950

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 17,236

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 ASSOC OF AMERICA	\$ 17,236

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1

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

Yes [ ☐ ]

No [ ☒ ]

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

\$

11,647,020

\$

11,346,499

2.3

Premium Ratio (2.1/2.2)

2.4

Reserve Numerator

\$

0

\$

0

2.5

Reserve Denominator

\$

9,681,943

\$

8,640,096

2.6

Reserve Ratio (2.4/2.5)

3.1

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

Yes [ ☐ ]

No [ ☒ ]

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 fulfillment 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 [ ☒ ]

6.5

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

16



GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	<div><div></div><div>0</div></div>	
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 [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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, <i>Property and Casualty Reinsurance</i> , 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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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 [ <input checked="" type="checkbox"/> X ]	No [ <input type="checkbox"/> ] N/A [ <input type="checkbox"/> ]
11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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 [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> 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	<div><div></div><div>%</div></div> <div><div></div><div>%</div></div>	
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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> 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):	\$	3,055,000

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

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 [ ☒ ]

13.3

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

2

14.1

Is the reporting entity 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:

		1	2	3	4	5
		Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	Direct Premium 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	81,500	\$ 110,926	\$ 53,397

\* Disclose type of coverage: RECREATIONAL VEHICLES

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 2016	2 2015	3 2014	4 2013	5 2012
<b>Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 &amp; 3)</b>					
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).....					
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).....	36,503,308	37,761,893	37,180,800	37,742,152	36,771,457
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
6. Total (Line 35).....	36,503,308	37,761,893	37,180,800	37,742,152	36,771,457
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
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).....					
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).....	12,048,844	11,466,162	11,996,557	12,367,020	11,897,509
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
12. Total (Line 35).....	12,048,844	11,466,162	11,996,557	12,367,020	11,897,509
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8).....	2,496,195	2,383,976	1,348,532	3,056,581	2,920,340
14. Net investment gain (loss) (Line 11).....	731,419	1,069,781	1,304,123	909,916	1,152,776
15. Total other income (Line 15).....	1,137	522	627	10,252	17,674
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	1,223,153	1,135,519	748,122	1,309,962	1,291,129
18. Net income (Line 20).....	2,005,598	2,318,760	1,905,160	2,666,787	2,799,661
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	47,551,507	44,556,376	46,759,508	47,613,215	50,763,235
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	1,590,276	1,966,454	2,062,101	2,112,328	1,954,182
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).....	14,268,287	14,010,665	13,550,174	13,752,355	17,111,404
22. Losses (Page 3, Line 1).....	3,338,356	2,736,418	2,543,335	2,251,851	2,311,041
23. Loss adjustment expenses (Page 3, Line 3).....	950,697	912,611	943,087	1,214,168	1,299,825
24. Unearned premiums (Page 3, Line 9).....	5,392,890	4,991,067	4,871,404	4,971,438	4,486,557
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).....	33,283,220	30,545,711	33,209,334	33,860,860	33,651,831
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11).....	3,505,437	3,243,053	1,316,527	(1,170,758)	2,667,276
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital.....	33,283,220	30,545,711	33,209,334	33,860,860	33,651,831
29. Authorized control level risk-based capital.....	2,319,873	2,401,088	2,990,008	1,914,054	2,090,155
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	48.8	44.6	45.7	43.6	43.8
31. Stocks (Lines 2.1 & 2.2).....	30.5	31.8	31.8	2.6	3.7
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....	1.8	2.0	1.9	1.9	
33. Real estate (Lines 4.1, 4.2 & 4.3).....					
34. Cash, cash equivalents and short-term investments (Line 5).....	11.6	14.6	14.6	50.8	52.4
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					
37. Other invested assets (Line 8).....	7.2	7.0	5.9	1.1	
38. Receivables 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
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
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.....	1,497,110	1,022,205			
48. Total of above lines 42 to 47.....	1,497,110	1,022,205	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).....	4.5	3.3			

EVERGREEN NATIONAL INDEMNITY COMPANY  
FIVE-YEAR HISTORICAL DATA

(Continued)

	1	2	3	4	5
	2016	2015	2014	2013	2012
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24).....	2,687,014	(2,965,912)	(149,889)	(38,123)	94,686
52. Dividends to stockholders (Line 35).....	(2,450,000)	(2,450,000)	(2,450,000)	(2,450,000)	(3,100,000)
53. Change in surplus as regards policyholders for the year (Line 38).....	2,737,509	(2,663,623)	(651,526)	209,029	(117,439)
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
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).....	515,448	544,944	466,641	1,007,133	813,896
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).....	15,466	(6,000)	39,068	(4,490)	3,208
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
59. Total (Line 35).....	530,914	538,944	505,709	1,002,643	817,104
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
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).....	15,466	215	9,767	(1,122)	802
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
65. Total (Line 35).....	15,466	215	9,767	(1,122)	802
<b>Operating Percentages (Page 4)</b> (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).....	5.3	1.7	2.5	(0.5)	(1.8)
68. Loss expenses incurred (Line 3).....	0.3	(0.4)	(2.3)	(0.9)	(1.6)
69. Other underwriting expenses incurred (Line 4).....	72.9	77.7	88.6	75.6	78.4
70. Net underwriting gain (loss) (Line 8).....	21.4	21.0	11.1	25.7	25.0
<b>Other Percentages</b>					
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).....	70.5	76.9	89.4	72.6	76.7
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	5.6	1.3	0.2	(1.4)	(3.4)
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).....	36.2	37.5	36.1	36.5	35.4
<b>One Year Loss Development (000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	(2,457)	(2,257)	(2,229)	(1,848)	(2,030)
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).....	(8.0)	(6.8)	(6.6)	(5.5)	(6.0)
<b>Two Year Loss Development (000 omitted)</b>					
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).....	(2,535)	(2,491)	(2,599)	(2,440)	(2,387)
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).....	(7.6)	(7.4)	(7.7)	(7.2)	(7.3)

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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....515	.....515	.....57	.....57	.....	.....	.....2	.....0	.....XXX.....
2. 2007.....	.....36,715	.....25,786	.....10,929	.....480	.....429	.....139	.....71	.....81	.....58	.....106	.....142	.....XXX.....
3. 2008.....	.....38,469	.....27,646	.....10,823	.....521	.....517	.....52	.....37	.....40	.....35	.....36	.....24	.....XXX.....
4. 2009.....	.....37,555	.....26,962	.....10,593	.....212	.....115	.....57	.....20	.....20	.....8	.....144	.....146	.....XXX.....
5. 2010.....	.....37,197	.....25,789	.....11,408	.....	.....	.....8	.....(2)	.....2	.....	.....9	.....12	.....XXX.....
6. 2011.....	.....37,435	.....25,964	.....11,471	.....17	.....13	.....8	.....3	.....3	.....	.....6	.....12	.....XXX.....
7. 2012.....	.....36,055	.....24,387	.....11,668	.....25	.....18	.....27	.....8	.....9	.....3	.....22	.....32	.....XXX.....
8. 2013.....	.....36,569	.....24,687	.....11,882	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
9. 2014.....	.....37,327	.....25,231	.....12,096	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
10. 2015.....	.....37,368	.....26,021	.....11,347	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
11. 2016.....	.....36,980	.....25,333	.....11,647	.....15	.....	.....	.....	.....	.....	.....	.....15	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,785	.....1,607	.....348	.....194	.....155	.....104	.....325	.....383	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding- Direct and Assumed
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....4,809	.....4,699	.....2,201	.....2,200	.....2	.....	.....2	.....	.....2	.....	.....	.....117	.....XXX.....
2. 2007.....	.....	.....	.....3	.....1	.....	.....	.....2	.....	.....1	.....	.....	.....5	.....XXX.....
3. 2008.....	.....	.....	.....2	.....	.....	.....	.....2	.....	.....1	.....	.....	.....5	.....XXX.....
4. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
5. 2010.....	.....	.....	.....29	.....21	.....	.....	.....31	.....23	.....11	.....8	.....	.....19	.....XXX.....
6. 2011.....	.....	.....	.....24	.....18	.....1	.....1	.....26	.....20	.....9	.....7	.....	.....14	.....XXX.....
7. 2012.....	.....	.....	.....18	.....13	.....	.....	.....19	.....14	.....7	.....5	.....	.....12	.....XXX.....
8. 2013.....	.....	.....	.....297	.....223	.....	.....	.....320	.....241	.....122	.....80	.....	.....195	.....XXX.....
9. 2014.....	.....	.....	.....514	.....386	.....	.....	.....555	.....416	.....211	.....139	.....	.....339	.....XXX.....
10. 2015.....	.....	.....	.....575	.....432	.....	.....	.....621	.....466	.....236	.....155	.....	.....379	.....XXX.....
11. 2016.....	.....	.....	.....9,184	.....6,325	.....	.....	.....901	.....676	.....342	.....225	.....	.....3,201	.....XXX.....
12. Totals...	.....4,809	.....4,699	.....12,847	.....9,619	.....3	.....1	.....2,479	.....1,856	.....942	.....619	.....0	.....4,286	.....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 Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....111	.....6
2. 2007.	.....706	.....559	.....147	.....1.9	.....2.2	.....1.3	.....	.....	.....	.....2	.....3
3. 2008.	.....618	.....589	.....29	.....1.6	.....2.1	.....0.3	.....	.....	.....	.....2	.....3
4. 2009.	.....289	.....143	.....146	.....0.8	.....0.5	.....1.4	.....	.....	.....	.....0	.....0
5. 2010.	.....81	.....50	.....31	.....0.2	.....0.2	.....0.3	.....	.....	.....	.....8	.....11
6. 2011.	.....88	.....62	.....26	.....0.2	.....0.2	.....0.2	.....	.....	.....	.....6	.....8
7. 2012.	.....105	.....61	.....44	.....0.3	.....0.3	.....0.4	.....	.....	.....	.....5	.....7
8. 2013.	.....739	.....544	.....195	.....2.0	.....2.2	.....1.6	.....	.....	.....	.....74	.....121
9. 2014.	.....1,280	.....941	.....339	.....3.4	.....3.7	.....2.8	.....	.....	.....	.....128	.....211
10. 2015.	.....1,432	.....1,053	.....379	.....3.8	.....4.0	.....3.3	.....	.....	.....	.....143	.....236
11. 2016.	.....10,442	.....7,226	.....3,216	.....28.2	.....28.5	.....27.6	.....	.....	.....	.....2,859	.....342
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....3,338	.....948

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
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	.....1,338	.....1,458	.....1,588	.....1,193	.....1,207	.....1,188	.....1,215	.....1,204	.....1,250	.....1,271	.....21	.....67
2. 2007.....	.....1,945	.....603	.....610	.....409	.....253	.....203	.....181	.....129	.....122	.....123	.....1	.....(6)
3. 2008.....	.....XXX	.....1,922	.....599	.....462	.....316	.....166	.....106	.....36	.....22	.....23	.....1	.....(13)
4. 2009.....	.....XXX	.....XXX	.....1,641	.....674	.....516	.....387	.....258	.....155	.....134	.....134	.....0	.....(21)
5. 2010.....	.....XXX	.....XXX	.....XXX	.....2,008	.....546	.....415	.....283	.....37	.....30	.....26	.....(4)	.....(11)
6. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,953	.....402	.....308	.....155	.....53	.....21	.....(32)	.....(134)
7. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,749	.....311	.....195	.....126	.....36	.....(90)	.....(159)
8. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,787	.....309	.....221	.....153	.....(68)	.....(156)
9. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,369	.....374	.....267	.....(107)	.....(2,102)
10. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,477	.....298	.....(2,179)	.....XXX
11. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....3,099	.....XXX	.....XXX
12. Totals.....											.....(2,457)	.....(2,535)

**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
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	.....000	.....347	.....1,057	.....1,010	.....1,046	.....1,084	.....1,123	.....1,124	.....1,156	.....1,156	.....XXX	.....XXX
2. 2007.....	.....1	.....16	.....88	.....97	.....112	.....113	.....113	.....113	.....119	.....119	.....XXX	.....XXX
3. 2008.....	.....XXX	.....2	.....17	.....(7)	.....(3)	.....(1)	.....1	.....15	.....18	.....19	.....XXX	.....XXX
4. 2009.....	.....XXX	.....XXX		.....126	.....134	.....134	.....134	.....134	.....134	.....134	.....XXX	.....XXX
5. 2010.....	.....XXX	.....XXX	.....XXX	.....1	.....4	.....10	.....10	.....10	.....10	.....10	.....XXX	.....XXX
6. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX		.....3	.....5	.....9	.....9	.....9	.....XXX	.....XXX
7. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX		.....11	.....19	.....26	.....26	.....XXX	.....XXX
8. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX					.....XXX	.....XXX
9. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX				.....XXX	.....XXX
10. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX			.....XXX	.....XXX
11. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....15	.....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
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	.....702	.....534	.....485	.....146	.....83	.....27	.....15	.....2	.....2	.....3
2. 2007.....	.....1,925	.....580	.....517	.....310	.....140	.....90	.....68	.....16	.....3	.....4
3. 2008.....	.....XXX	.....1,920	.....541	.....468	.....319	.....165	.....105	.....21	.....4	.....4
4. 2009.....	.....XXX	.....XXX	.....1,635	.....545	.....382	.....253	.....124	.....21		
5. 2010.....	.....XXX	.....XXX	.....XXX	.....2,007	.....542	.....405	.....273	.....27	.....20	.....16
6. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,953	.....393	.....297	.....146	.....44	.....12
7. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,749	.....299	.....175	.....100	.....10
8. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,787	.....309	.....221	.....153
9. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,363	.....374	.....267
10. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,477	.....298
11. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....3,084

EVERGREEN NATIONAL INDEMNITY COMPANY  
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		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						
States, Etc.		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....	820,047	709,554			68,069	210,425		
2.	Alaska.....AK	...L....	1,873	1,084			88	730		
3.	Arizona.....AZ	...L....	129,261	109,107			14,798	38,246		
4.	Arkansas.....AR	...L....	378,059	348,383		2,000	28,940	93,611		
5.	California.....CA	...L....	1,767,961	1,712,114			113,178	457,335		
6.	Colorado.....CO	...L....	172,543	182,360			(13,155)	62,032		
7.	Connecticut.....CT	...L....	247,166	233,647		178,157	15,338	122,944		
8.	Delaware.....DE	...L....	33,057	16,922		5,188	12,444	8,414		
9.	District of Columbia.....DC	...L....	59,132	59,496			1,757	16,424		
10.	Florida.....FL	...L....	820,455	1,061,446			(45,555)	208,130		
11.	Georgia.....GA	...L....	265,515	269,521		500	7,575	64,391		
12.	Hawaii.....HI	...N....								
13.	Idaho.....ID	...L....	3,736	3,690			(47)	911		
14.	Illinois.....IL	...L....	767,303	742,285		2,031	(11,554)	212,800		
15.	Indiana.....IN	...L....	1,316,574	1,295,679			44,359	318,950		
16.	Iowa.....IA	...L....	154,566	157,720			292	37,596		
17.	Kansas.....KS	...L....	88,233	88,531			(1,755)	21,514		
18.	Kentucky.....KY	...L....	1,719,564	1,611,211		262,188	(490,793)	5,894,224		
19.	Louisiana.....LA	...L....	1,080,615	1,076,241			45,499	270,464		
20.	Maine.....ME	...L....	714,397	700,418			44,079	189,902		
21.	Maryland.....MD	...L....	177,332	206,505			(77,284)	67,547		
22.	Massachusetts.....MA	...L....	868,423	915,196			7,343	225,200		
23.	Michigan.....MI	...L....	1,536,901	1,525,273			20,267	374,861		
24.	Minnesota.....MN	...L....	124,622	142,012			(1,858)	30,352		
25.	Mississippi.....MS	...L....	256,512	260,410			3,010	62,661		
26.	Missouri.....MO	...L....	485,774	529,800		66,031	219,374	1,008,219		
27.	Montana.....MT	...L....	68,556	40,319			9,775	16,893		
28.	Nebraska.....NE	...L....	223,856	265,996			(71,220)	90,227		
29.	Nevada.....NV	...L....	1,538	31,115			(5,760)	385		
30.	New Hampshire.....NH	...L....	546,036	532,468			2,179	133,659		
31.	New Jersey.....NJ	...L....	500,464	259,807			242,357	283,342		
32.	New Mexico.....NM	...L....	45,022	46,965			(981)	12,124		
33.	New York.....NY	...L....	2,584,432	2,751,438			20,185	700,695		
34.	North Carolina.....NC	...E....	72,041	27,276			18,318	18,318		
35.	North Dakota.....ND	...L....	30,594	16,529			6,406	8,509		
36.	Ohio.....OH	...L....	3,478,952	3,423,501			201,187	1,172,384		
37.	Oklahoma.....OK	...L....	421,220	412,825		747	25,469	106,406		
38.	Oregon.....OR	...L....	291,337	296,272			4,896	66,624		
39.	Pennsylvania.....PA	...L....	5,287,726	5,296,522		3,000	141,956	1,313,557		
40.	Rhode Island.....RI	...L....	24,140	24,535			(29,950)	16,239		
41.	South Carolina.....SC	...L....	272,400	274,910			5,982	67,294		
42.	South Dakota.....SD	...L....	6,516	6,516			848	1,608		
43.	Tennessee.....TN	...L....	563,751	569,965		7,627	6,057	156,145		
44.	Texas.....TX	...L....	1,373,763	1,459,312		2,000	39,011	452,666		
45.	Utah.....UT	...L....	38,995	37,955			1,400	9,730		
46.	Vermont.....VT	...L....	454,775	625,071			(97,951)	145,958		
47.	Virginia.....VA	...L....	1,398,687	1,351,789			83,709	770,217		
48.	Washington.....WA	...L....	228,604	216,446			68,089	93,066		
49.	West Virginia.....WV	...E....					(2,548)	2,338		
50.	Wisconsin.....WI	...L....	1,726,115	1,798,170			28,800	420,801		
51.	Wyoming.....WY	...L....	84,895	70,235			20,485	20,483		
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	33,714,036	33,794,542	0	529,469	723,108	16,077,551	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

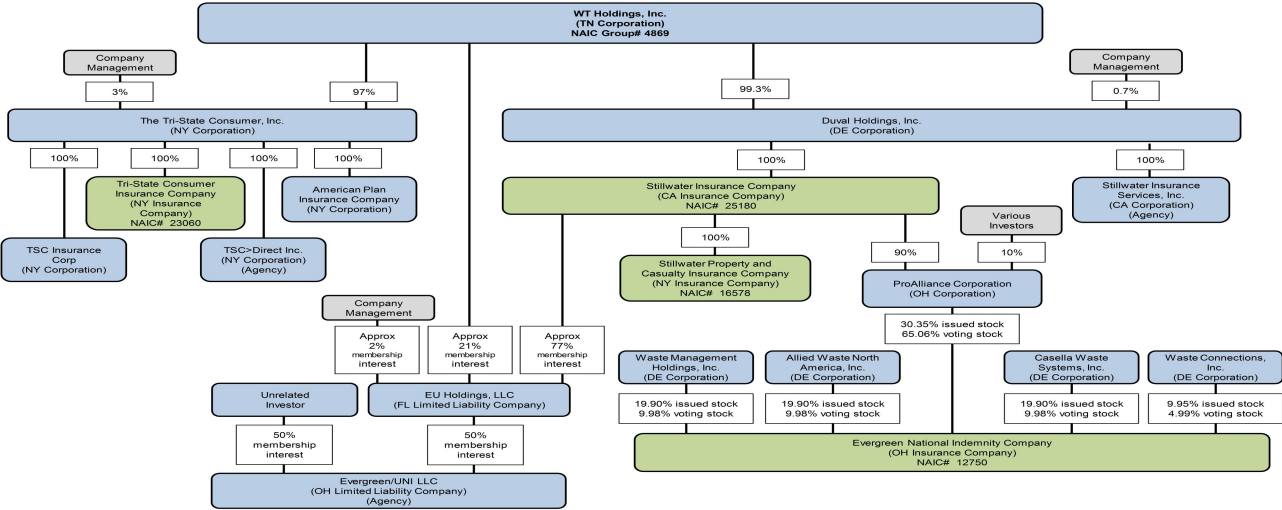
(a) Insert the number of "L" responses except for Canada and Other Alien.

(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**





2016 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

Assets	2	Schedule P-Part 2G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	58
Cash Flow	5	Schedule P-Part 2H-Section 1-Other Liability-Occurrence	58
Exhibit of Capital Gains (Losses)	12	Schedule P-Part 2H-Section 2-Other Liability-Claims-Made	58
Exhibit of Net Investment Income	12	Schedule P-Part 2I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	59
Exhibit of Nonadmitted Assets	13	Schedule P-Part 2J-Auto Physical Damage	59
Exhibit of Premiums and Losses (State Page)	19	Schedule P-Part 2K-Fidelity, Surety	59
Five-Year Historical Data	17	Schedule P-Part 2L-Other (Including Credit, Accident and Health)	59
General Interrogatories	15	Schedule P-Part 2M-International	59
Jurat Page	1	Schedule P-Part 2N-Reinsurance – Nonproportional Assumed Property	60
Liabilities, Surplus and Other Funds	3	Schedule P-Part 2O-Reinsurance – Nonproportional Assumed Liability	60
Notes To Financial Statements	14	Schedule P-Part 2P-Reinsurance – Nonproportional Assumed Financial Lines	60
Overflow Page For Write-ins	100	Schedule P-Part 2R-Section 1-Products Liability-Occurrence	61
Schedule A-Part 1	E01	Schedule P-Part 2R-Section 2-Products Liability-Claims-Made	61
Schedule A-Part 2	E02	Schedule P-Part 2S-Financial Guaranty/Mortgage Guaranty	61
Schedule A-Part 3	E03	Schedule P-Part 2T-Warranty	61
Schedule A-Verification Between Years	SI02	Schedule P-Part 3A-Homeowners/Farmowners	62
Schedule B-Part 1	E04	Schedule P-Part 3B-Private Passenger Auto Liability/Medical	62
Schedule B-Part 2	E05	Schedule P-Part 3C-Commercial Auto/Truck Liability/Medical	62
Schedule B-Part 3	E06	Schedule P-Part 3D-Workers' Compensation (Excluding Excess Workers Compensation)	62
Schedule B-Verification Between Years	SI02	Schedule P-Part 3E-Commercial Multiple Peril	62
Schedule BA-Part 1	E07	Schedule P-Part 3F-Section 1 –Medical Professional Liability-Occurrence	63
Schedule BA-Part 2	E08	Schedule P-Part 3F-Section 2-Medical Professional Liability-Claims-Made	63
Schedule BA-Part 3	E09	Schedule P-Part 3G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	63
Schedule BA-Verification Between Years	SI03	Schedule P-Part 3H-Section 1-Other Liability-Occurrence	63
Schedule D-Part 1	E10	Schedule P-Part 3H-Section 2-Other Liability-Claims-Made	63
Schedule D-Part 1A-Section 1	SI05	Schedule P-Part 3I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	64
Schedule D-Part 1A-Section 2	SI08	Schedule P-Part 3J-Auto Physical Damage	64
Schedule D-Part 2-Section 1	E11	Schedule P-Part 3K-Fidelity/Surety	64
Schedule D-Part 2-Section 2	E12	Schedule P-Part 3L-Other (Including Credit, Accident and Health)	64
Schedule D-Part 3	E13	Schedule P-Part 3M-International	64
Schedule D-Part 4	E14	Schedule P-Part 3N-Reinsurance – Nonproportional Assumed Property	65
Schedule D-Part 5	E15	Schedule P-Part 3O-Reinsurance – Nonproportional Assumed Liability	65
Schedule D-Part 6-Section 1	E16	Schedule P-Part 3P-Reinsurance – Nonproportional Assumed Financial Lines	65
Schedule D-Part 6-Section 2	E16	Schedule P-Part 3R-Section 1-Products Liability-Occurrence	66
Schedule D-Summary By Country	SI04	Schedule P-Part 3R-Section 2-Products Liability-Claims-Made	66
Schedule D-Verification Between Years	SI03	Schedule P-Part 3S-Financial Guaranty/Mortgage Guaranty	66
Schedule DA-Part 1	E17	Schedule P-Part 3T-Warranty	66
Schedule DA-Verification Between Years	SI10	Schedule P-Part 4A-Homeowners/Farmowners	67
Schedule DB-Part A-Section 1	E18	Schedule P-Part 4B-Private Passenger Auto Liability/Medical	67
Schedule DB-Part A-Section 2	E19	Schedule P-Part 4C-Commercial Auto/Truck Liability/Medical	67
Schedule DB-Part A-Verification Between Years	SI11	Schedule P-Part 4D-Workers' Compensation (Excluding Excess Workers Compensation)	67
Schedule DB-Part B-Section 1	E20	Schedule P-Part 4E-Commercial Multiple Peril	67
Schedule DB-Part B-Section 2	E21	Schedule P-Part 4F-Section 1-Medical Professional Liability-Occurrence	68
Schedule DB-Part B-Verification Between Years	SI11	Schedule P-Part 4F-Section 2-Medical Professional Liability-Claims-Made	68
Schedule DB-Part C-Section 1	SI12	Schedule P-Part 4G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	68
Schedule DB-Part C-Section 2	SI13	Schedule P-Part 4H-Section 1-Other Liability-Occurrence	68
Schedule DB-Part D-Section 1	E22	Schedule P-Part 4H-Section 2-Other Liability-Claims-Made	68
Schedule DB-Part D-Section 2	E23	Schedule P-Part 4I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	69
Schedule DB-Verification	SI14	Schedule P-Part 4J-Auto Physical Damage	69
Schedule DL-Part 1	E24	Schedule P-Part 4K-Fidelity/Surety	69
Schedule DL-Part 2	E25	Schedule P-Part 4L-Other (Including Credit, Accident and Health)	69
Schedule E-Part 1-Cash	E26	Schedule P-Part 4M-International	69
Schedule E-Part 2-Cash Equivalents	E27	Schedule P-Part 4N-Reinsurance – Nonproportional Assumed Property	70
Schedule E-Part 3-Special Deposits	E28	Schedule P-Part 4O-Reinsurance – Nonproportional Assumed Liability	70
Schedule E-Verification Between Years	SI15	Schedule P-Part 4P-Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule F-Part 1	20	Schedule P-Part 4R-Section 1-Products Liability-Occurrence	71
Schedule F-Part 2	21	Schedule P-Part 4R-Section 2-Products Liability-Claims-Made	71
Schedule F-Part 3	22	Schedule P-Part 4S-Financial Guaranty/Mortgage Guaranty	71
Schedule F-Part 4	23	Schedule P-Part 4T-Warranty	71
Schedule F-Part 5	24	Schedule P-Part 5A-Homeowners/Farmowners	72
Schedule F-Part 6-Section 1	25	Schedule P-Part 5B-Private Passenger Auto Liability/Medical	73
Schedule F-Part 6-Section 2	26	Schedule P-Part 5C-Commercial Auto/Truck Liability/Medical	74
Schedule F-Part 7	27	Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers Compensation)	75
Schedule F-Part 8	28	Schedule P-Part 5E-Commercial Multiple Peril	76
Schedule F-Part 9	29	Schedule P-Part 5F-Medical Professional Liability-Claims-Made	78
Schedule H-Accident and Health Exhibit-Part 1	30	Schedule P-Part 5F-Medical Professional Liability-Occurrence	77
Schedule H-Part 2, Part 3 and Part 4	31	Schedule P-Part 5H-Other Liability-Claims-Made	80
Schedule H-Part 5-Health Claims	32	Schedule P-Part 5H-Other Liability-Occurrence	79
Schedule P-Part 1-Summary	33	Schedule P-Part 5R-Products Liability-Claims-Made	82
Schedule P-Part 1A-Homeowners/Farmowners	35	Schedule P-Part 5R-Products Liability-Occurrence	81
Schedule P-Part 1B-Private Passenger Auto Liability/Medical	36	Schedule P-Part 5T-Warranty	83
Schedule P-Part 1C-Commercial Auto/Truck Liability/Medical	37	Schedule P-Part 6C-Commercial Auto/Truck Liability/Medical	84
Schedule P-Part 1D-Workers' Compensation (Excluding Excess Workers Compensation)	38	Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers Compensation)	84
Schedule P-Part 1E-Commercial Multiple Peril	39	Schedule P-Part 6E-Commercial Multiple Peril	85
Schedule P-Part 1F-Section 1-Medical Professional Liability-Occurrence	40	Schedule P-Part 6H-Other Liability-Claims-Made	86
Schedule P-Part 1F-Section 2-Medical Professional Liability-Claims-Made	41	Schedule P-Part 6H-Other Liability-Occurrence	85
Schedule P-Part 1G-Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery)	42	Schedule P-Part 6M-International	86
Schedule P-Part 1H-Section 1-Other Liability-Occurrence	43	Schedule P-Part 6N-Reinsurance – Nonproportional Assumed Property	87
Schedule P-Part 1H-Section 2-Other Liability-Claims-Made	44	Schedule P-Part 6O-Reinsurance – Nonproportional Assumed Liability	87
Schedule P-Part 1I-Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	45	Schedule P-Part 6R-Products Liability-Claims-Made	88
Schedule P-Part 1J-Auto Physical Damage	46	Schedule P-Part 6R-Products Liability-Occurrence	88
Schedule P-Part 1K-Fidelity/Surety	47	Schedule P-Part 7A-Primary Loss Sensitive Contracts	89
Schedule P-Part 1L-Other (Including Credit, Accident and Health)	48	Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts	91
Schedule P-Part 1M-International	49	Schedule P Interrogatories	93
Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property	50	Schedule T-Exhibit of Premiums Written	94
Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability	51	Schedule T-Part 2-Interstate Compact	95
Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Financial Lines	52	Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule P-Part 1R-Section 1-Products Liability-Occurrence	53	Schedule Y-Detail of Insurance Holding Company System	97
Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	54	Schedule Y-Part 2-Summary of Insurer's Transactions With Any Affiliates	98
Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	55	Statement of Income	4
Schedule P-Part 1T-Warranty	56	Summary Investment Schedule	SI01
Schedule P-Part 2, Part 3 and Part 4 - Summary	34	Supplemental Exhibits and Schedules Interrogatories	99
Schedule P-Part 2A-Homeowners/Farmowners	57	Underwriting and Investment Exhibit Part 1	6
Schedule P-Part 2B-Private Passenger Auto Liability/Medical	57	Underwriting and Investment Exhibit Part 1A	7
Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical	57	Underwriting and Investment Exhibit Part 1B	8
Schedule P-Part 2D-Workers' Compensation (Excluding Excess Workers Compensation)	57	Underwriting and Investment Exhibit Part 2	9
Schedule P-Part 2E-Commercial Multiple Peril	57	Underwriting and Investment Exhibit Part 2A	10
Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	58	Underwriting and Investment Exhibit Part 3	11
Schedule P-Part 2F-Section 2-Medical Professional Liability-Claims-Made	58		