



ANNUAL STATEMENT

For the Year Ended December 31, 2017
of the Condition and Affairs of the

EVERGREEN NATIONAL INDEMNITY COMPANY

NAIC Group Code.....4869, 4869
(Current Period) (Prior Period)

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
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US..... 44124 440-229-3420
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address

6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US 44124
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

6140 PARKLAND BLVD, STE 321..... MAYFIELD HEIGHTS OH US 44124440-229-3403
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address

Statutory Statement Contact

DAVID ALAN CANZONE
(Name)

440-229-3403
(Area Code) (Telephone Number) (Extension)

dcanzone@evergreen-national.com
(E-Mail Address)

440-229-3421
(Fax Number)

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

1. (Printed Name)
PRESIDENT

(Title)

(Signature)
DAVID ALAN CANZONE

2. (Printed Name)
CFO/TREASURER

(Title)

(Signature)
WAN CHEN COLLIER

3. (Printed Name)
SECRETARY

(Title)

Subscribed and sworn to before me

This _____ day of _____ 2018

a. Is this an original filing? Yes [X] No []

b. If no

1. State the amendment number _____

2. Date filed _____

3. Number of pages attached _____

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).....	24,473,113		24,473,113	22,015,973
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	4,175,759		4,175,759	4,825,199
2.2 Common stocks.....	9,495,690		9,495,690	8,943,358
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	664,696		664,696	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).....	1,669,366		1,669,366	
5. Cash (\$.....1,431,103, Schedule E-Part 1), cash equivalents (\$.....893,702, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	2,324,805		2,324,805	5,237,316
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	2,889,718	36,628	2,853,090	3,240,059
9. Receivables for securities.....			0	
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).....	45,693,147	36,628	45,656,519	45,092,775
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	312,971		312,971	287,668
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,636,605		1,636,605	1,590,276
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.....	256,413		256,413	140,297
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.....	399,507	175,867	223,640	437,135
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	1,877		1,877	3,356
21. Furniture and equipment, including health care delivery assets (\$.....0).....	132	132	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.....	13,582	13,582	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	48,314,234	226,209	48,088,025	47,551,507
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	48,314,234	226,209	48,088,025	47,551,507

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.....	8,334	8,334	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).....	13,582	13,582	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).....	3,509,010	3,338,356
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).....	1,062,571	950,697
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....	248,735	266,051
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	116,388	126,640
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	261,540	109,522
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 \$.....10,895,848 and including warranty reserves of \$.....234,378 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	5,395,140	5,392,890
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	2,576,252	2,686,913
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.....	32,339	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.....	50,000	
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.....	383,817	1,277,140
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	13,635,792	14,268,287
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	13,635,792	14,268,287
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).....	5,592,409	4,423,396
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).....	34,452,233	33,283,220
38. TOTAL (Page 2, Line 28, Col. 3).....	48,088,025	47,551,507

DETAILS OF WRITE-INS		
2501. Unrestricted Collateral.....	1,579	934,006
2502. Pledged as Collateral.....	382,238	343,134
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).....	383,817	1,277,140
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
			Current Year	Prior Year
UNDERWRITING INCOME				
1.	Premiums earned (Part 1, Line 35, Column 4).....		11,665,388	11,647,020
DEDUCTIONS:				
2.	Losses incurred (Part 2, Line 35, Column 7).....		789,733	617,404
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		110,314	37,173
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2).....		7,979,518	8,496,248
5.	Aggregate write-ins for underwriting deductions.....		0	0
6.	Total underwriting deductions (Lines 2 through 5).....		8,879,565	9,150,825
7.	Net income of protected cells.....			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....		2,785,823	2,496,195
INVESTMENT INCOME				
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17).....		1,772,613	1,508,030
10.	Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....		624,880	(776,611)
11.	Net investment gain (loss) (Lines 9 + 10).....		2,397,493	731,419
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.....		9,024	1,137
15.	Total other income (Lines 12 through 14).....		9,024	1,137
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....		5,192,340	3,228,751
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).....		5,192,340	3,228,751
19.	Federal and foreign income taxes incurred.....		1,402,018	1,223,153
20.	Net income (Line 18 minus Line 19) (to Line 22).....		3,790,322	2,005,598
CAPITAL AND SURPLUS ACCOUNT				
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....		33,283,220	30,545,711
22.	Net income (from Line 20).....		3,790,322	2,005,598
23.	Net transfers (to) from Protected Cell accounts.....			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$....4,988.....		73,525	2,687,014
25.	Change in net unrealized foreign exchange capital gain (loss).....			
26.	Change in net deferred income tax.....		(497,414)	272,859
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....		252,580	222,038
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).....		1,169,013	2,737,509
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....		34,452,233	33,283,220
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.....		9,024	1,137
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).....		9,024	1,137
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

EVERGREEN NATIONAL INDEMNITY COMPANY
CASH FLOW

		1	2
		Current Year	Prior Year
CASH FROM OPERATIONS			
1.	Premiums collected net of reinsurance.....	11,510,648	11,663,604
2.	Net investment income.....	1,693,416	1,547,299
3.	Miscellaneous income.....	9,024	1,137
4.	Total (Lines 1 through 3).....	13,213,088	13,212,040
5.	Benefit and loss related payments.....	735,195	(224,084)
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7.	Commissions, expenses paid and aggregate write-ins for deductions.....	8,005,993	8,711,636
8.	Dividends paid to policyholders.....		
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	1,250,000	1,219,051
10.	Total (Lines 5 through 9).....	9,991,188	9,706,603
11.	Net cash from operations (Line 4 minus Line 10).....	3,221,900	3,505,437
CASH FROM INVESTMENTS			
12.	Proceeds from investments sold, matured or repaid:		
12.1	Bonds.....	5,759,658	2,621,292
12.2	Stocks.....	7,128,453	9,738,687
12.3	Mortgage loans.....		
12.4	Real estate.....	45,741	
12.5	Other invested assets.....	1,574,605	584,332
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments.....	(186)	
12.7	Miscellaneous proceeds.....	50,000	19,770
12.8	Total investment proceeds (Lines 12.1 to 12.7).....	14,558,271	12,964,081
13.	Cost of investments acquired (long-term only):		
13.1	Bonds.....	8,124,437	5,918,449
13.2	Stocks.....	6,332,869	8,450,730
13.3	Mortgage loans.....		
13.4	Real estate.....	1,715,107	
13.5	Other invested assets.....	1,090,987	572,324
13.6	Miscellaneous applications.....		
13.7	Total investments acquired (Lines 13.1 to 13.6).....	17,263,400	14,941,503
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).....	(2,705,128)	(1,977,422)
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).....	(979,283)	184,239
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(3,429,283)	(2,265,761)
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).....	(2,912,512)	(737,746)
19.	Cash, cash equivalents and short-term investments:		
19.1	Beginning of year.....	5,237,316	5,975,062
19.2	End of year (Line 18 plus Line 19.1).....	2,324,805	5,237,316

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.....	11,544,448	5,195,263	5,160,762	11,578,949
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.....	123,190	197,627	234,378	86,439
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.....	11,667,638	5,392,890	5,395,140	11,665,388

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.....	.....5,160,762	.....	.....	.....	.....5,160,762
26.	Burglary and theft.....	.....	.....	.....	.....	.....0
27.	Boiler and machinery.....	.....	.....	.....	.....	.....0
28.	Credit.....	.....	.....	.....	.....	.....0
29.	International.....	.....	.....	.....	.....	.....0
30.	Warranty.....	.....234,378	.....	.....	.....	.....234,378
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.....	.....5,395,140	.....0	.....0	.....0	.....5,395,140
36.	Accrued retrospective premiums based on experience.....					.....
37.	Earned but unbilled premiums.....					.....0
38.	Balance (sum of Lines 35 through 37).....					.....5,395,140

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.....	.....32,455,146		.....3,195,464		.....24,106,162	.....11,544,448
26.	Burglary and theft.....						.....0
27.	Boiler and machinery.....						.....0
28.	Credit.....						.....0
29.	International.....						.....0
30.	Warranty.....	.....84,525		.....38,665			.....123,190
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.....	.....32,539,671	.....0	.....3,234,129	.....0	.....24,106,162	.....11,667,638

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

Line of Business		Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
		1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1.	Fire.....				0	0		0	0.0
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.....	485,136	1,685	486,821	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.....	619,078			619,078	3,509,010	3,338,356	789,732	6.8
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.....	1,104,214	1,685	486,821	619,078	3,509,010	3,338,356	789,732	6.8
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	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
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		
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.....	4,126,763	17,033	4,143,796	0	1,895,253	30,166	1,925,419	0	
17.1	Other liability - occurrence.....				0				0	
17.2	Other liability - claims-made.....				0				0	
17.3	Excess workers' compensation.....				0				0	
18.1	Products liability - occurrence.....				0				0	
18.2	Products liability - claims-made.....				0				0	
19.1, 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	9,441,278	1,787,766	7,830,044	3,509,010	1,062,571
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.....	4,236,803	17,033	4,143,826	110,010	11,336,531	1,817,932	9,755,463	3,509,010	1,062,571
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.....	127,136			127,136
1.2 Reinsurance assumed.....	346,755			346,755
1.3 Reinsurance ceded.....	363,577			363,577
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	110,314	0	0	110,314
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		15,386,264		15,386,264
2.2 Reinsurance assumed, excluding contingent.....		1,434,437		1,434,437
2.3 Reinsurance ceded, excluding contingent.....		11,982,206		11,982,206
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	4,838,495	0	4,838,495
3. Allowances to manager and agents.....				0
4. Advertising.....		85,861		85,861
5. Boards, bureaus and associations.....		81,915		81,915
6. Surveys and underwriting reports.....				0
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....		998,462	15,205	1,013,667
8.2 Payroll taxes.....		58,617	893	59,510
9. Employee relations and welfare.....		398,853	6,074	404,927
10. Insurance.....		51,465		51,465
11. Directors' fees.....				0
12. Travel and travel items.....		189,173	2,881	192,054
13. Rent and rent items.....		129,215	1,968	131,183
14. Equipment.....		20,703	315	21,018
15. Cost or depreciation of EDP equipment and software.....		1,457	22	1,479
16. Printing and stationery.....		11,857	181	12,038
17. Postage, telephone and telegraph, exchange and express.....		36,757	559	37,316
18. Legal and auditing.....		132,431	2,017	134,448
19. Totals (Lines 3 to 18).....	0	2,196,766	30,115	2,226,881
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....		645,090		645,090
20.2 Insurance department licenses and fees.....		160,059		160,059
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....		8,000		8,000
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	813,149	0	813,149
21. Real estate expenses.....				0
22. Real estate taxes.....				0
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	131,108	300,326	431,434
25. Total expenses incurred.....	110,314	7,979,518	330,441	(a) 8,420,273
26. Less unpaid expenses - current year.....	1,062,571	341,125	23,996	1,427,692
27. Add unpaid expenses - prior year.....	950,697	369,162	23,529	1,343,388
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).....	(1,560)	8,007,555	329,974	8,335,969

DETAILS OF WRITE-INS				
2401. Other Outside Services.....		66,673	300,326	366,999
2402. Data Processing.....		54,137		54,137
2403. Other.....		10,298		10,298
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	131,108	300,326	431,434

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

EVERGREEN NATIONAL INDEMNITY COMPANY
EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds.....	(a).....83,107	.....83,098
1.1	Bonds exempt from U.S. tax.....	(a).....247,908	.....245,989
1.2	Other bonds (unaffiliated).....	(a).....781,983	.....802,928
1.3	Bonds of affiliates.....	(a).....	.....
2.1	Preferred stocks (unaffiliated).....	(b).....235,933	.....234,083
2.11	Preferred stocks of affiliates.....	(b).....	.....
2.2	Common stocks (unaffiliated).....	.....692,676	.....701,014
2.21	Common stocks of affiliates.....	.....	.....
3.	Mortgage loans.....	(c).....	.....
4.	Real estate.....	(d).....	.....
5.	Contract loans.....	.....	.....
6.	Cash, cash equivalents and short-term investments.....	(e).....7,764	.....7,562
7.	Derivative instruments.....	(f).....	.....
8.	Other invested assets.....	.....28,381	.....28,381
9.	Aggregate write-ins for investment income.....	.....0	.....0
10.	Total gross investment income.....	.....2,077,752	.....2,103,054
11.	Investment expenses.....		(g).....330,441
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).....		.....330,441
17.	Net investment income (Line 10 minus Line 16).....		.....1,772,613

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 \$.....160,501 accrual of discount less \$.....101,948 amortization of premium and less \$....26,255 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$....4,191 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	2	3	4	5
		Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. government bonds.....	.....49	.....	.....49	.....	.....
1.1	Bonds exempt from U.S. tax.....	.....(53,842)	.....	.....(53,842)	.....20,027	.....
1.2	Other bonds (unaffiliated).....	.....5,657	.....	.....5,657	.....61,920	.....
1.3	Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1	Preferred stocks (unaffiliated).....	.....(36,340)	.....	.....(36,340)	.....93,391	.....
2.11	Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2	Common stocks (unaffiliated).....	.....942,826	.....	.....942,826	.....(297,209)	.....
2.21	Common stocks of affiliates.....	.....	.....	.....0	.....	.....
3.	Mortgage loans.....	.....	.....	.....0	.....(166,174)	.....
4.	Real estate.....	.....	.....	.....0	.....	.....
5.	Contract loans.....	.....	.....	.....0	.....	.....
6.	Cash, cash equivalents and short-term investments.....	.....(186)	.....	.....(186)	.....	.....
7.	Derivative instruments.....	.....	.....	.....0	.....	.....
8.	Other invested assets.....	.....(233,283)	.....	.....(233,283)	.....366,560	.....
9.	Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses).....	.....624,880	.....0	.....624,880	.....78,513	.....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).....	36,628		(36,628)
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).....	36,628	0	(36,628)
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.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....	175,867	464,775	288,908
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....	132	514	382
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.....	13,582	13,499	(83)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	226,209	478,788	252,580
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	226,209	478,788	252,580

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.....	8,334	8,251	(83)
2502. Miscellaneous Receivable.....	5,248	5,248	(0)
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).....	13,582	13,499	(83)

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 #	2017	2016
NET INCOME					
(1) EVERGREEN NATIONAL INDEMNITY COMPANY Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 3,790,322	\$ 2,005,598
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 3,790,322	\$ 2,005,598
SURPLUS					
(5) EVERGREEN NATIONAL INDEMNITY COMPANY Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 34,452,233	\$ 33,283,220
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 34,452,233	\$ 33,283,220

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

NOTES TO FINANCIAL STATEMENTS

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

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

D. Going Concern

No going concern issues.

Note 2 – Accounting Changes and Correction 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 71.94%.
- (3) There were no taxes, assessments or any amounts advanced and not included in the mortgage loan.
- (4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in which the Insurer is a Participant or Co-Lender in a Mortgage Loan Agreement:

		Farm	Residential		Commercial		Mezzanine	Total
			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	\$	\$	\$	\$	\$ 664,696	\$	\$ 664,696	
2. Accruing Interest 90-179 Days Past Due								
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$	
(b) Interest Accrued	\$	\$	\$	\$	\$	\$	\$	
3. Accruing Interest 180+ Days Past Due								
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$	
(b) Interest Accrued	\$	\$	\$	\$	\$	\$	\$	
4. Interest Reduced								
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$	
(b) Number of Loans								
(c) Percent Reduced	%	%	%	%	%	%	%	
5. Participant or Co-Lender in a Mortgage Loan Agreement								
(a) Recorded Investment	\$	\$	\$	\$	\$ 664,696	\$	\$ 664,696	
b. Prior Year								

NOTES TO FINANCIAL STATEMENTS

		Farm	Residential		Commercial		Mezzanine	Total
			Insured	All Other	Insured	All Other		
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	%	%	%	%	%	%	%
5. Participant or Co-Lender in a Mortgage Loan Agreement								
(a)	Recorded Investment	\$	\$	\$	\$	\$	\$	\$

- (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	\$ 13,010
	2. 12 Months or Longer	\$ 32,772
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 1,950,506
	2. 12 Months or Longer	\$ 187,107

NOTES TO FINANCIAL STATEMENTS

- (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. Dollar Repurchase Agreements and/or Securities Lending Transactions
Not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale
Not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Not applicable
- J. Real Estate
Not applicable
- K. Low-Income Housing Tax Credits (LIHTC)
Not applicable
- L. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted					Current Year					
	Current Year					6	7	8	9	Percentage	
	1	2	3	4	5					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 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	4,889,189				4,889,189	5,137,530	(248,341)		4,889,189	10.1%	10.2%
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	382,238				382,238	343,134	39,104		382,238	0.8%	0.8%
n. Other restricted assets	32,339				32,339	120,078	(87,739)		32,339	0.1%	0.1%
o. Total Restricted Assets	\$ 5,303,766	\$	\$	\$	\$ 5,303,766	\$ 5,600,742	\$ (296,976)	\$	\$ 5,303,766	11.0%	11.0%

- (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)					

NOTES TO FINANCIAL STATEMENTS

Warranty Business Pledged	\$ 382,238	\$	\$	\$	\$ 382,238	\$ 343,134	\$ 39,104	\$ 382,238	0.8%	0.8%
Total (c)	\$ 382,238	\$	\$	\$	\$ 382,238	\$ 343,134	\$ 39,104	\$ 382,238	0.8%	0.8%

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Total Line for Columns 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(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)					
Retained for Others	\$ 32,339	\$	\$	\$	\$ 32,339	\$ 120,078	\$ (87,739)	\$ 32,339	0.1%	0.1%
Total (c)	\$	\$	\$	\$	\$ 32,339	\$ 120,078	\$ (87,739)	\$ 32,339	0.1%	0.1%

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(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, Cash Equivalents and Short-Term Investments	\$ 382,238	\$ 382,238	0.8%	0.8%
b.	Schedule D, Part 1			%	%
c.	Schedule D, Part 2, Sec. 1			%	%
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)	\$ 382,238	\$ 382,238	0.8%	0.8%

- *. 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	\$ 382,238	2.8%

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

- M. Working Capital Finance Investments
Not applicable
- N. Offsetting and Netting of Assets and Liabilities
Not applicable
- O. Structured Notes
Not applicable
- P. 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	\$ 408,284	\$ 410,676
(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	\$ 408,284	\$ 410,676

AC – Amortized Cost FV – Fair Value

- Q. Short Sales
Not applicable

NOTES TO FINANCIAL STATEMENTS

R. Prepayment Penalty and Acceleration Fees
Not applicable

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

- A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of Ownership
The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.
- B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies
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. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

The Company non-admits investment income due and accrued if amounts are over 90 days past due.
- B. The total amount excluded:

At December 31, 2017 and 2016, 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)

	2017			2016			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Gross deferred tax assets	\$ 355,732	\$ 151,253	\$ 506,985	\$ 579,534	\$ 428,254	\$ 1,007,788	\$ (223,802)	\$ (277,001)	\$ (500,803)
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax assets (1a-1b)	\$ 355,732	\$ 151,253	\$ 506,985	\$ 579,534	\$ 428,254	\$ 1,007,788	\$ (223,802)	\$ (277,001)	\$ (500,803)
d. Deferred tax assets nonadmitted	24,615	151,253	175,868	36,521	428,254	464,775	(11,906)	(277,001)	(288,907)
e. Subtotal net admitted deferred tax asset (1c-1d)	\$ 331,117		\$ 331,117	\$ 543,013		\$ 543,013	\$ (211,896)		(211,896)
f. Deferred tax liabilities		107,477	107,477		105,878	105,878		1,599	1,599
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$ 331,117	\$ (107,477)	\$ 223,640	\$ 543,013	\$ (105,878)	\$ 437,135	\$ (211,896)	\$ (1,599)	\$ (213,495)

2. Admission Calculation Components SSAP No. 101

	2017		3 (Col 1+2) Total	4 Ordinary	2016		7 (Col 1-4) Ordinary	Change	
	1 Ordinary	2 Capital			5 Capital	6 (Col 4+5) Total		8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	331,117		331,117	543,013		543,013	(211,896)		(211,896)
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									

NOTES TO FINANCIAL STATEMENTS

		2017			2016			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
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))	331,117		331,117	543,013		543,013	(211,896)		(211,896)

3. Other Admissibility Criteria

		2017	2016
a.	Ratio percentage used to determine recovery period and threshold limitation amount	1,489.3%	1,434.7%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	34,228,593	32,846,085

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.

	12/31/2017		12/31/2016		Change	
	1	2	3	4	5	6
	Ordinary	Capital	Ordinary	Capital	(Col. 1-3) Ordinary	(Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	355,732	151,253	579,534	428,254	(223,802)	(277,001)
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	331,117		543,013		(211,896)	
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

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

B. Deferred Tax Liabilities Not Recognized
Not applicable

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3
	2017	2016	(Col 1-2) Change
a. Federal	1,402,018	1,223,153	178,865
b. Foreign			
c. Subtotal	1,402,018	1,223,153	178,865
d. Federal income tax on net capital gains	212,459		212,459
e. Utilization of capital loss carry-forwards	(212,459)		(212,459)
f. Other			
g. Federal and Foreign income taxes incurred	1,402,018	1,223,153	178,865

2. Deferred Tax Assets

	1	2	3
	2017	2016	(Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	35,164	52,172	(17,008)
2. Unearned premium reserve	226,596	366,717	(140,121)
3. Policyholder reserves			
4. Investments			
5. Deferred acquisition costs			

NOTES TO FINANCIAL STATEMENTS

	1	2	3
	2017	2016	(Col 1-2) Change
6. Policyholder dividends accrual			
7. Fixed assets	93,972	160,645	(66,673)
8. Compensation and benefits accrual			
9. Pension accrual			
10. Receivables - nonadmitted			
11. Net operating loss carry-forward			
12. Tax credit carry-forward			
13. Other (items <5% of total ordinary tax assets)			
Other (items >=5% of total ordinary tax assets)			
14.			
99. Subtotal	355,732	579,534	(223,802)
b. Statutory valuation allowance adjustment			
c. Nonadmitted	24,615	36,521	(11,906)
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	331,117	543,013	(211,896)
e. Capital:			
1. Investments	136,502	221,003	(84,501)
2. Net capital loss carry-forward	14,751	207,251	(192,500)
3. Real estate			
4. Other (items <5% of total capital tax assets)			
Other (items >=5% of total capital tax assets)			
5.			
99. Subtotal	151,253	428,254	(277,001)
f. Statutory valuation allowance adjustment			
g. Nonadmitted	151,253	428,254	(277,001)
h. Admitted capital deferred tax assets (2e99-2f-2g)			
i. Admitted deferred tax assets (2d+2h)	331,117	543,013	(211,896)

3. Deferred Tax Liabilities

	1	2	3
	2017	2016	(Col 1-2) Change
a. Ordinary:			
1. Investments			
2. Fixed assets			
3. Deferred and uncollected premium			
4. Policyholder reserves			
5. Other (items <5% of total ordinary tax liabilities)			
Other (items >=5% of total ordinary tax liabilities)			
6.			
99. Subtotal			
b. Capital:			
1. Investments	107,477	105,878	1,599
2. Real estate			
3. Other (tems <5% of total capital tax liabilities)			
Other (items >=5% of total capital tax liabilities)			
4.			
99. Subtotal	107,477	105,878	1,599
c. Deferred tax liabilities (3a99+3b99)	107,477	105,878	1,599
4. Net Deferred Tax Assets (2i – 3c)	223,640	437,135	(213,495)

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 (%)
Permanent Differences:		
Provision computed at statutory rate	1,765,396	34.0%
Proration of tax exempt investment income		%
Tax exempt income deduction	(71,091)	(1.4)%
Dividends received deduction	(61,630)	(1.2)%
Disallowed travel and entertainment	13,227	0.3%
Other permanent differences	2,380	0.1%
Temporary Differences:		
Total ordinary DTAs		%
Total ordinary DTLs		%
Total capital DTAs		%
Total capital DTLs		%
Other:		
Statutory valuation allowance adjustment		%
Accrual adjustment – prior year	(30,218)	(0.6)%
Other	281,369	5.4%
Totals	1,899,433	36.6%
Federal and foreign income taxes incurred	1,402,018	27.0%

NOTES TO FINANCIAL STATEMENTS

	Amount	Effective Tax Rate (%)
Realized capital gains (losses) tax		%
Change in net deferred income taxes	497,415	9.6%
Total statutory income taxes	\$ 1,899,433	36.6%

- E. Operating Loss Carryforwards and Income Taxes Available for Recoupment
1. At December 31, 2017, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

2. The following is income tax expense for current year and proceeding years that is available for recoupment in the event of future net losses:

Year	Amounts
2017	1,402,018
2016	1,223,153

3. 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 the Relationship Involved
- 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. Transactions Greater than 1/2% of Admitted Assets
- In 2017 and 2016, the Company declared and paid dividends as follows:

a. Declared May 11, 2017 and paid May 24, 2017 – an ordinary cash dividend of \$1,250,000

b. Declared November 9, 2017 and paid November 22, 2017 – an ordinary cash dividend of \$1,200,000

c. Declared May 12, 2016 and paid May 23, 2016 – an ordinary cash dividend of \$1,250,000

d. Declared November 10, 2016 and paid November 21, 2016 – an ordinary cash dividend of \$1,200,000
- C. Dollar Amounts of Transactions
Included in Section B above
- D. Amounts Due From or To Related Parties
None as of December 31, 2017
- E. Guarantees or Undertakings
Not applicable
- F. Material Management or Service Contracts and Cost-Sharing Arrangements
Not applicable
- G. Nature of the Control Relationship
Not applicable
- H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned
Not applicable
- I. Investments in SCA that Exceed 10% of Admitted Assets
Not applicable
- J. Investments in Impaired SCAs
Not applicable
- K. Investment in Foreign Insurance Subsidiary
Not applicable
- L. Investment in Downstream Noninsurance Holding Company
Not applicable
- M. All SCA Investments
Not applicable
- N. Investment in Insurance SCAs
Not applicable

NOTES TO FINANCIAL STATEMENTS

Note 11 – Debt

Not applicable

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

Not applicable

Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

(1) Number of Share and Par or State Value of Each Class

The Company has the following shares authorized, issued and outstanding at December 31, 2017:

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, Liquidation Value and Redemption Schedule of Preferred Stock Issues
Not applicable

(3) 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 2018 is \$3,445,223, representing 10% of the surplus as regards policyholders as of December 31, 2017.

(4) Dates and Amounts of Dividends Paid

In 2017 and 2016, the Company declared and paid dividends as follows:

- c. Declared May 11, 2017 and paid May 24, 2017 – an ordinary cash dividend of \$1,250,000
- d. Declared November 9, 2017 and paid November 22, 2017 – an ordinary cash dividend of \$1,200,000
- c. Declared May 12, 2016 and paid May 23, 2016 – an ordinary cash dividend of \$1,250,000
- d. Declared November 10, 2016 and paid November 21, 2016 – an ordinary cash dividend of \$1,200,000

(5) Profits that may be Paid as Ordinary Dividends to Stockholders
Within the limitations of (3) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

(6) Restrictions Plans on Unassigned Funds (Surplus)
There were no restrictions placed on the Company’s surplus, including for whom the surplus is being held.

(7) Amount of Advances to Surplus not Repaid
Not applicable

(8) Amount of Stock Held for Special Purposes
Not applicable

(9) Reasons for Changes in Balance of Special Surplus Funds from Prior Period
Not applicable

(10) The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is: \$485,728.

(11) The Reporting Entity Issued the Following Surplus Debentures or Similar Obligations
Not applicable

(12) The impact of any restatement due to prior quasi-reorganizations is as follows
Not applicable

(13) Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization
Not applicable

Note 14 – Liabilities, Contingencies and Assessments

A. Contingent Commitments
Not applicable

B. Assessments
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, 2017. 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.

NOTES TO FINANCIAL STATEMENTS

- 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

(1) The Company leases office facilities under various non-cancelable operating leases that expire November 30, 2021. The Company incurred rent expense of \$131,183 and \$177,434 in 2017 and 2016, respectively.

(2) Leases with Initial or Remaining Noncancelable Lease Terms in Excess of One Year

a. At January 1, 2018 the minimum aggregate rental commitments are as follows:

Year Ending December 31	Operating Leases
1. 2018	\$ 83,769
2. 2019	\$ 85,464
3. 2020	\$ 87,192
4. 2021	\$ 81,378
5. 2022	\$
6. Total	\$ 337,803

(3) For Sale-Leaseback Transactions
Not applicable
- B. Lessor Leases
Not applicable

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

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. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

	Level 1	Level 2	Level 3	Total	Net Asset Value (NAV) Included in Level 2
Assets at Fair Value					

NOTES TO FINANCIAL STATEMENTS

	Level 1	Level 2	Level 3	Total	Net Asset Value (NAV) Included in Level 2
Bonds	\$	4,301,028	\$	\$ 4,301,028	\$
Preferred Stocks	\$	734,227	\$	\$ 734,227	\$
Common Stocks	\$ 3,865,043	\$ 5,630,647	\$	\$ 9,495,690	\$
Total	\$ 3,865,043	\$ 10,665,902	\$	\$ 14,530,945	\$
Liabilities at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

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

	Beginning Balance at 1/1/2017	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	Settle-ments	Ending Balance at 12/31/2017
a. Assets										
Common Stocks	\$ 189,494	\$	\$	\$	\$	\$	\$	\$ (189,494)	\$	\$
Total	\$ 189,494	\$	\$	\$	\$	\$	\$	\$ (189,494)	\$	\$
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Policies when Transfers Between Levels are Recognized
Not applicable

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

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) Other Fair Value Disclosures
Not applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements
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)	Net Asset Value (NAV) Included in Level 2
Bonds	\$ 24,815,458	\$ 24,473,113	\$ 3,556,530	\$ 21,258,928	\$	\$	\$
Preferred Stocks	\$ 4,388,629	\$ 4,175,759	\$	\$ 4,388,629	\$	\$	\$
Common Stocks	\$ 9,495,690	\$ 9,495,690	\$ 3,865,043	\$ 5,630,647	\$	\$	\$
Mortgage Loan	\$	\$ 664,696	\$	\$	\$	\$	\$
Cash & Short Term Investments	\$ 2,324,805	\$ 2,324,805	\$ 2,324,805	\$	\$	\$	\$
Other Invested Assets	\$ 2,853,090	\$ 2,853,090	\$	\$ 2,853,090	\$	\$	\$

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Mortgage Loan	\$ 664,696	7.5%	01/29/2016	Not available for public sale. 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

NOTES TO FINANCIAL STATEMENTS

- 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 22, 2018 for the statutory statements issued on February 23, 2018.
- B. Type 2 – Non-recognized Subsequent Events:
There were no subsequent events meriting disclosure through February 22, 2018 for the statutory statements issued on February 23, 2018.

Note 23 – Reinsurance

- A. Unsecured Reinsurance Recoverables

Name of Reinsurer	NAIC Code	Federal ID #	Amount
General Reinsurance Corp.	22039	13-2673100	\$ 6,224,000
Axis Reinsurance Co.	20370	51-0434766	5,976,000
Ace Property & Cas. Ins. Co.	20699	13-5481330	5,682,000
Ohio Indemnity Insurance Co.	26565	31-0620146	3,624,000
Swiss Reins America Corp.	25364	13-1675535	1,562,000
Endurance Reins Corp	11551	35-2293075	1,187,000
Partner Reins Co	38636	13-3031176	1,165,000

- B. Reinsurance Recoverable in Dispute
Not applicable
- C. Reinsurance Assumed and Ceded

- (1) Maximum Amount of Return Commission

Assumed Reinsurance			Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$	\$	\$	\$	\$	\$
b. All Other	1,424,893	595,113	10,895,848	5,401,535	(9,470,955)	(4,806,422)
c. Total	\$ 1,424,893	\$ 595,113	\$ 10,895,848	\$ 5,401,535	\$ (9,470,955)	\$ (4,806,422)

d. Direct Unearned Premium Reserves	\$ 14,866,093
-------------------------------------	---------------

- (2) Additional or Return Commission
Not applicable
- (3) Types of Risks Attributed to Protected Cell
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

NOTES TO FINANCIAL STATEMENTS

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

- A.

Change in Incurred Losses and Loss Adjustment Expenses
Reserves as of December 31, 2016 were \$4.29 million. As of December 31, 2017, \$.25 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1.38 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 \$2.66 million favorable prior year development since December 31, 2016 to December 31, 2017. 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.
- B.

Information about Significant Changes in Methodologies and Assumptions
Not applicable

Note 26 – Intercompany Pooling Arrangements

Not applicable

Note 27 – Structured Settlements

Not applicable

Note 28 – Health Care Receivables

Not applicable
0

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, 2017
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

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	3
Name of Entity	NAIC Company Code	State of Domicile

6.1

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

Yes []No [X]

6.2

If yes, give full information:

7.1

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

Yes []No [X]

7.2

If yes,

7.21

State the percentage of foreign control

%

7.22

State the nationality(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	2
Nationality	Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?

Yes []No [X]

8.2

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

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes []No [X]

8.4

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

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

9.

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

10.1

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

Yes []No [X]

10.2

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

10.3

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

Yes []No [X]

10.4

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

10.5

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

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

10.6

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

EVERGREEN NATIONAL INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Tapio N. Boles, FCAS, MAAA, Willis Towers Watson, 525 Market Street, Suite 3400, San Francisco, CA 94105 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

\$0

21.22

Borrowed from others

\$0

21.23

Leased from others

\$0

21.24

Other

\$0

22.1

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

Yes [☐] No [☒]

22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

\$0

22.22

Amount paid as expenses

\$0

22.23

Other amounts paid

\$0

23.1

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

Yes [☐] No [☒]

23.2

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

\$0

INVESTMENT

15.1

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

24.01

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

Yes ☒ No ☐

24.02

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

24.03

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

24.04

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

Yes ☐ No ☐ N/A ☒

24.05

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

\$0

24.06

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

\$0

24.07

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

Yes ☐ No ☐ N/A ☒

24.08

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

Yes ☐ No ☐ N/A ☒

24.09

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

Yes ☐ No ☐ N/A ☒

24.10

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

24.101

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

\$0

24.102

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

\$0

24.103

Total payable for securities lending reported on the liability page:

\$0

25.1

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

Yes ☒ No ☐

25.2

If yes, state the amount thereof at December 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

\$4,889,189

25.29

On deposit with other regulatory bodies

\$0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$382,238

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:

\$0

28.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes ☒ No ☐

28.01

For 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	

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 ☐

EVERGREEN NATIONAL INDEMNITY COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	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	2	3
		Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	\$ 24,473,113	\$ 24,815,458	\$ 342,345
30.2	Preferred Stocks	\$ 4,175,759	\$ 4,388,629	\$ 212,870
30.3	Totals	\$ 28,648,872	\$ 29,204,087	\$ 555,215

30.4 Describe the sources or methods utilized in determining the fair values:
SECURITIES VALUATION OFFICE, AVS DATABASE, INTERACTIVE DATA CORPORATION, CUSTODIAN BANK AND INVESTMENT ADVISOR

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:

33. By self-designating 5*GI securities, the reporting entity is certifying the following elements for each self-designation 5*GI security:
a. Documentation necessary to permit a full credit analysis of the security does not exist.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
Has the reporting entity self-designated 5*GI securities? Yes [X] No []

OTHER

34.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 81,340

34.2 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	2
Name	Amount Paid
SURETY & FIDELITY ASSOC OF AMERICA	\$ 40,199
A.M. BEST COMPANY	\$ 22,100

35.1 Amount of payments for legal expenses, if any? \$ 3,258

35.2	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.						
	<table><tr><td>1</td><td>2</td></tr><tr><td>Name</td><td>Amount Paid</td></tr><tr><td>RECTOR AND ASSOC, INC</td><td>\$ 2,475</td></tr></table>	1	2	Name	Amount Paid	RECTOR AND ASSOC, INC	\$ 2,475
1	2						
Name	Amount Paid						
RECTOR AND ASSOC, INC	\$ 2,475						

36.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 17,823

36.2	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.						
	<table><tr><td>1</td><td>2</td></tr><tr><td>Name</td><td>Amount Paid</td></tr><tr><td>PROPERTY CASUALTY INSURERS ASSOC OF AMERICA</td><td>\$ 17,823</td></tr></table>	1	2	Name	Amount Paid	PROPERTY CASUALTY INSURERS ASSOC OF AMERICA	\$ 17,823
1	2						
Name	Amount Paid						
PROPERTY CASUALTY INSURERS ASSOC OF AMERICA	\$ 17,823						

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1

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

Yes []

No [X]

1.2

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

\$

0

1.3

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

\$

0

1.31

Reason for excluding:

1.4

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

\$

0

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

\$

0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$

0

1.62

Total incurred claims

\$

0

1.63

Number of covered lives

0

All years prior to most current three years:

1.64

Total premium earned

\$

0

1.65

Total incurred claims

\$

0

1.66

Number of covered lives

0

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$

0

1.72

Total incurred claims

\$

0

1.73

Number of covered lives

0

All years prior to most current three years:

1.74

Total premium earned

\$

0

1.75

Total incurred claims

\$

0

1.76

Number of covered lives

0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator

\$

0

\$

0

2.2

Premium Denominator

\$

11,665,388

\$

11,647,020

2.3

Premium Ratio (2.1/2.2)

0.0%

0.0%

2.4

Reserve Numerator

\$

0

\$

0

2.5

Reserve Denominator

\$

9,966,721

\$

9,681,943

2.6

Reserve Ratio (2.4/2.5)

0.0%

0.0%

3.1

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

Yes []

No [X]

3.2

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

3.21

Participating policies

\$

0

3.22

Non-participating policies

\$

0

4.

FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:

4.1

Does the reporting entity issue assessable policies?

Yes []

No []

4.2

Does the reporting entity issue non-assessable policies?

Yes []

No []

4.3

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

%

4.4

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

\$

0

5.

FOR RECIPROCAL EXCHANGES ONLY:

5.1

Does the exchange appoint local agents?

Yes []

No []

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation

Yes []

No []

N/A []

5.22

As a direct expense of the exchange

Yes []

No []

N/A []

5.3

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

5.4

Has any Attorney-in-fact compensation, contingent on 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 [X]

6.5

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

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)	\$	<div><div></div><div>0</div></div> <div><div></div><div>0</div></div>
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?	\$	<div><div></div><div>0</div></div>
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	\$	<div><div></div><div>0</div></div> <div><div></div><div>0</div></div>
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$	<div><div></div><div>3,328,000</div></div>

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	\$	84,525	\$	135,564	\$	59,887

* 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.

Yes [☐] No [☒]

Included 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:

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 2017	2 2016	3 2015	4 2014	5 2013
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....					
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).....	35,773,800	36,503,308	37,761,893	37,180,800	37,742,152
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
6. Total (Line 35).....	35,773,800	36,503,308	37,761,893	37,180,800	37,742,152
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	11,667,638	12,048,844	11,466,162	11,996,557	12,367,020
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
12. Total (Line 35).....	11,667,638	12,048,844	11,466,162	11,996,557	12,367,020
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8).....	2,785,823	2,496,195	2,383,976	1,348,532	3,056,581
14. Net investment gain (loss) (Line 11).....	2,397,493	731,419	1,069,781	1,304,123	909,916
15. Total other income (Line 15).....	9,024	1,137	522	627	10,252
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	1,402,018	1,223,153	1,135,519	748,122	1,309,962
18. Net income (Line 20).....	3,790,322	2,005,598	2,318,760	1,905,160	2,666,787
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	48,088,025	47,551,507	44,556,376	46,759,508	47,613,215
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	1,636,605	1,590,276	1,966,454	2,062,101	2,112,328
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).....	13,635,792	14,268,287	14,010,665	13,550,174	13,752,355
22. Losses (Page 3, Line 1).....	3,509,010	3,338,356	2,736,418	2,543,335	2,251,851
23. Loss adjustment expenses (Page 3, Line 3).....	1,062,571	950,697	912,611	943,087	1,214,168
24. Unearned premiums (Page 3, Line 9).....	5,395,140	5,392,890	4,991,067	4,871,404	4,971,438
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).....	34,452,233	33,283,220	30,545,711	33,209,334	33,860,860
Cash Flow (Page 5)					
27. Net cash from operations (Line 11).....	3,221,900	3,505,437	3,243,053	1,316,527	(1,170,758)
Risk-Based Capital Analysis					
28. Total adjusted capital.....	34,452,233	33,283,220	30,545,711	33,209,334	33,860,860
29. Authorized control level risk-based capital.....	2,312,894	2,319,873	2,401,088	2,990,008	1,914,054
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	53.6	48.8	44.6	45.7	43.6
31. Stocks (Lines 2.1 & 2.2).....	29.9	30.5	31.8	31.8	2.6
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....	1.5	1.8	2.0	1.9	1.9
33. Real estate (Lines 4.1, 4.2 & 4.3).....	3.7				
34. Cash, cash equivalents and short-term investments (Line 5).....	5.1	11.6	14.6	14.6	50.8
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					
37. Other invested assets (Line 8).....	6.2	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
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....					
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....					
46. Affiliated mortgage loans on real estate.....					
47. All other affiliated.....	1,146,160	1,497,110	1,022,205		
48. Total of above lines 42 to 47.....	1,146,160	1,497,110	1,022,205	0	0
49. Total investment in parent included in Lines 42 to 47 above.....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0).....	3.3	4.5	3.3		

EVERGREEN NATIONAL INDEMNITY COMPANY
FIVE-YEAR HISTORICAL DATA
(Continued)

	1	2	3	4	5
	2017	2016	2015	2014	2013
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24).....	73,525	2,687,014	(2,965,912)	(149,889)	(38,123)
52. Dividends to stockholders (Line 35).....	(2,450,000)	(2,450,000)	(2,450,000)	(2,450,000)	(2,450,000)
53. Change in surplus as regards policyholders for the year (Line 38).....	1,169,013	2,737,509	(2,663,623)	(651,526)	209,029
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	486,821	515,448	544,944	466,641	1,007,133
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).....	619,078	15,466	(6,000)	39,068	(4,490)
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
59. Total (Line 35).....	1,105,899	530,914	538,944	505,709	1,002,643
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	619,078	15,466	215	9,767	(1,122)
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
65. Total (Line 35).....	619,078	15,466	215	9,767	(1,122)
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2).....	6.8	5.3	1.7	2.5	(0.5)
68. Loss expenses incurred (Line 3).....	0.9	0.3	(0.4)	(2.3)	(0.9)
69. Other underwriting expenses incurred (Line 4).....	68.4	72.9	77.7	88.6	75.6
70. Net underwriting gain (loss) (Line 8).....	23.9	21.4	21.0	11.1	25.7
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....	68.3	70.5	76.9	89.4	72.6
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	7.7	5.6	1.3	0.2	(1.4)
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).....	33.9	36.2	37.5	36.1	36.5
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	(2,603)	(2,457)	(2,257)	(2,229)	(1,848)
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).....	(7.8)	(8.0)	(6.8)	(6.6)	(5.5)
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	(2,658)	(2,535)	(2,491)	(2,599)	(2,440)
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).....	(8.7)	(7.6)	(7.4)	(7.7)	(7.2)

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*?
If no, please explain:

Yes[] No[]

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
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported- Direct and Assumed
	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.....	.....487	.....487	.....49	.....49	.....	.....	.....2	.....0	.....XXX.....
2. 2008.....	.....38,469	.....27,646	.....10,823	.....521	.....517	.....52	.....37	.....40	.....35	.....36	.....24	.....XXX.....
3. 2009.....	.....37,555	.....26,962	.....10,593	.....212	.....115	.....57	.....20	.....20	.....8	.....144	.....146	.....XXX.....
4. 2010.....	.....37,197	.....25,789	.....11,408	.....	.....	.....8	.....(2)	.....2	.....	.....9	.....12	.....XXX.....
5. 2011.....	.....37,435	.....25,964	.....11,471	.....17	.....13	.....8	.....3	.....3	.....	.....6	.....12	.....XXX.....
6. 2012.....	.....36,055	.....24,387	.....11,668	.....25	.....18	.....27	.....8	.....9	.....3	.....22	.....32	.....XXX.....
7. 2013.....	.....36,569	.....24,687	.....11,882	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
8. 2014.....	.....37,327	.....25,231	.....12,096	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
9. 2015.....	.....37,368	.....26,021	.....11,347	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
10. 2016.....	.....36,980	.....25,333	.....11,647	.....263	.....	.....	.....	.....	.....	.....	.....263	.....XXX.....
11. 2017.....	.....35,898	.....24,233	.....11,665	.....371	.....	.....	.....	.....	.....	.....	.....371	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,896	.....1,150	.....201	.....115	.....74	.....46	.....219	.....860	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded						Direct and Assumed	Ceded
1. Prior.....	.....4,254	.....4,144	.....1,925	.....1,925	.....3							.....113	....XXX.....
2. 2008.....												.....0	....XXX.....
3. 2009.....												.....0	....XXX.....
4. 2010.....												.....0	....XXX.....
5. 2011.....					.....1	.....1						.....0	....XXX.....
6. 2012.....												.....0	....XXX.....
7. 2013.....			.....153	.....115			.....165	.....124	.....63	.....41		.....101	....XXX.....
8. 2014.....			.....360	.....270			.....389	.....291	.....147	.....97		.....238	....XXX.....
9. 2015.....			.....575	.....432			.....621	.....466	.....236	.....155		.....379	....XXX.....
10. 2016.....			.....835	.....626			.....901	.....676	.....343	.....226		.....551	....XXX.....
11. 2017.....			.....9,306	.....6,387			.....713	.....535	.....271	.....178		.....3,190	....XXX.....
12. Totals...	.....4,254	.....4,144	.....13,154	.....9,755	.....4	.....1	.....2,789	.....2,092	.....1,060	.....697	.....0	.....4,572	....XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....110	.....3
2. 2008.	.....613	.....589	.....24	.....1.6	.....2.1	.....0.2	.....	.....	.....	.....0	.....0
3. 2009.	.....289	.....143	.....146	.....0.8	.....0.5	.....1.4	.....	.....	.....	.....0	.....0
4. 2010.	.....10	.....(2)	.....12	.....0.0	.....(0.0)	.....0.1	.....	.....	.....	.....0	.....0
5. 2011.	.....29	.....17	.....12	.....0.1	.....0.1	.....0.1	.....	.....	.....	.....0	.....0
6. 2012.	.....61	.....29	.....32	.....0.2	.....0.1	.....0.3	.....	.....	.....	.....0	.....0
7. 2013.	.....381	.....280	.....101	.....1.0	.....1.1	.....0.9	.....	.....	.....	.....38	.....63
8. 2014.	.....896	.....658	.....238	.....2.4	.....2.6	.....2.0	.....	.....	.....	.....90	.....148
9. 2015.	.....1,432	.....1,053	.....379	.....3.8	.....4.0	.....3.3	.....	.....	.....	.....143	.....236
10. 2016.	.....2,342	.....1,528	.....814	.....6.3	.....6.0	.....7.0	.....	.....	.....	.....209	.....342
11. 2017.	.....10,661	.....7,100	.....3,561	.....29.7	.....29.3	.....30.5	.....	.....	.....	.....2,919	.....271
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....3,509	.....1,063

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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	One Year	Two Year
1. Prior.....	.....1,698	.....1,835	.....1,239	.....1,097	.....1,028	.....1,033	.....970	.....1,009	.....1,031	.....1,025	.....(6)	.....16
2. 2008.....	.....1,922	.....599	.....462	.....316	.....166	.....106	.....36	.....22	.....23	.....19	.....(4)	.....(3)
3. 2009.....	.....XXX	.....1,641	.....674	.....516	.....387	.....258	.....155	.....134	.....134	.....134	.....0	.....0
4. 2010.....	.....XXX	.....XXX	.....2,008	.....546	.....415	.....283	.....37	.....30	.....26	.....10	.....(16)	.....(20)
5. 2011.....	.....XXX	.....XXX	.....XXX	.....1,953	.....402	.....308	.....155	.....53	.....21	.....9	.....(12)	.....(44)
6. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,749	.....311	.....195	.....126	.....36	.....26	.....(10)	.....(100)
7. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,787	.....309	.....221	.....153	.....79	.....(74)	.....(142)
8. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,369	.....374	.....267	.....188	.....(79)	.....(186)
9. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,477	.....298	.....298	.....0	.....(2,179)
10. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....3,099	.....697	.....(2,402)	.....XXX
11. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....3,468	.....XXX	.....XXX
12. Totals.....											.....(2,603)	.....(2,658)

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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017		
1. Prior.....	.....000	.....782	.....744	.....795	.....834	.....873	.....874	.....912	.....912	.....912	.....XXX	.....XXX
2. 2008.....	.....2	.....17	.....(7)	.....(3)	.....(1)	.....1	.....15	.....18	.....19	.....19	.....XXX	.....XXX
3. 2009.....	.....XXX		.....126	.....134	.....134	.....134	.....134	.....134	.....134	.....134	.....XXX	.....XXX
4. 2010.....	.....XXX	.....XXX	.....1	.....4	.....10	.....10	.....10	.....10	.....10	.....10	.....XXX	.....XXX
5. 2011.....	.....XXX	.....XXX	.....XXX		.....3	.....5	.....9	.....9	.....9	.....9	.....XXX	.....XXX
6. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX		.....11	.....19	.....26	.....26	.....26	.....XXX	.....XXX
7. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX						.....XXX	.....XXX
8. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX					.....XXX	.....XXX
9. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX				.....XXX	.....XXX
10. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....15	.....263	.....XXX	.....XXX
11. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....371	.....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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior.....	.....1,114	.....1,002	.....456	.....223	.....117	.....83	.....18	.....5	.....7	
2. 2008.....	.....1,920	.....541	.....468	.....319	.....165	.....105	.....21	.....4	.....4	
3. 2009.....	.....XXX	.....1,635	.....545	.....382	.....253	.....124	.....21			
4. 2010.....	.....XXX	.....XXX	.....2,007	.....542	.....405	.....273	.....27	.....20	.....16	
5. 2011.....	.....XXX	.....XXX	.....XXX	.....1,953	.....393	.....297	.....146	.....44	.....12	
6. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,749	.....299	.....175	.....100	.....10	
7. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,787	.....309	.....221	.....153	.....79
8. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,363	.....374	.....267	.....188
9. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,477	.....298	.....298
10. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....3,084	.....434
11. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....3,097

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
		Active	Status	2	3	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)
States, Etc.				Direct Premiums Written	Direct Premiums Earned						
1.	Alabama.....AL	..L		653,858	770,936			(37,655)	172,771		
2.	Alaska.....AK	..L		100	1,368			(660)	70		
3.	Arizona.....AZ	..L		137,438	152,115			4,689	42,935		
4.	Arkansas.....AR	..L		277,552	324,587		91,249	68,437	70,799		
5.	California.....CA	..L		2,400,290	1,786,179		3,628	271,562	725,269		
6.	Colorado.....CO	..L		144,431	142,388			(17,075)	44,957		
7.	Connecticut.....CT	..L		259,408	255,547		866	7,874	129,952		
8.	Delaware.....DE	..L		35,107	33,244		19,707	18,633	7,340		
9.	District of Columbia.....DC	..L		29,846	16,832			(7,191)	9,233		
10.	Florida.....FL	..L		904,198	921,457		9,000	68,756	267,886		
11.	Georgia.....GA	..L		404,121	324,265		13,956	50,700	101,135		
12.	Hawaii.....HI	..N									
13.	Idaho.....ID	..L		1,955	2,861			(394)	517		
14.	Illinois.....IL	..L		867,477	856,118		85,875	101,478	228,403		
15.	Indiana.....IN	..L		1,286,107	1,367,665		2,551	31,161	347,559		
16.	Iowa.....IA	..L		114,805	130,877			(7,379)	30,217		
17.	Kansas.....KS	..L		89,789	89,152			2,239	23,753		
18.	Kentucky.....KY	..L		973,923	1,462,415		421,432	(563,192)	4,909,600		
19.	Louisiana.....LA	..L		1,089,144	982,075		37,280	54,978	288,163		
20.	Maine.....ME	..L		641,201	681,759			(20,278)	169,624		
21.	Maryland.....MD	..L		128,047	182,704			(30,681)	36,866		
22.	Massachusetts.....MA	..L		738,420	828,967			(26,948)	198,252		
23.	Michigan.....MI	..L		1,481,518	1,489,572			17,071	391,932		
24.	Minnesota.....MN	..L		164,904	135,592			29,445	59,798		
25.	Mississippi.....MS	..L		262,490	265,714		1,541	7,499	68,619		
26.	Missouri.....MO	..L		461,130	457,090		60,574	(44,626)	903,018		
27.	Montana.....MT	..L		61,204	60,813			(1,399)	15,494		
28.	Nebraska.....NE	..L		120,808	169,846			(56,928)	33,299		
29.	Nevada.....NV	..L		10,356	3,645			2,350	2,735		
30.	New Hampshire.....NH	..L		555,095	547,166			13,278	146,937		
31.	New Jersey.....NJ	..L		173,766	356,779		61,948	(168,810)	52,584		
32.	New Mexico.....NM	..L		46,478	45,771			1,265	13,389		
33.	New York.....NY	..L		2,244,092	2,488,591		4,217	(1,066)	695,412		
34.	North Carolina.....NC	..E		110,018	91,026		33,485	36,926	21,759		
35.	North Dakota.....ND	..L		6,470	20,305			(4,884)	3,625		
36.	Ohio.....OH	..L		3,703,473	3,620,610		2,750	201,494	1,371,128		
37.	Oklahoma.....OK	..L		386,885	410,121		39,137	36,815	104,084		
38.	Oregon.....OR	..L		297,881	288,882		1,901	6,816	71,539		
39.	Pennsylvania.....PA	..L		5,306,275	5,266,016		77,528	161,517	1,397,546		
40.	Rhode Island.....RI	..L		6,678	6,841			(11,656)	4,583		
41.	South Carolina.....SC	..L		251,383	263,336		4,478	3,396	66,212		
42.	South Dakota.....SD	..L		3,631	3,631			(648)	961		
43.	Tennessee.....TN	..L		525,048	548,059		13,294	110,479	253,330		
44.	Texas.....TX	..L		757,046	1,069,864		117,817	(52,519)	282,330		
45.	Utah.....UT	..L		39,125	38,841			858	10,588		
46.	Vermont.....VT	..L		785,189	482,733			253,489	399,447		
47.	Virginia.....VA	..L		1,429,950	1,438,061			32,813	803,030		
48.	Washington.....WA	..L		163,038	154,549			(30,295)	62,771		
49.	West Virginia.....WV	..E						(2,338)			
50.	Wisconsin.....WI	..L		1,905,159	1,829,215			83,920	504,721		
51.	Wyoming.....WY	..L		103,364	89,597			6,682	27,162		
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		32,539,671	32,955,777	0	1,104,214	599,998	15,573,334	0	0

DETAILS OF WRITE-INS

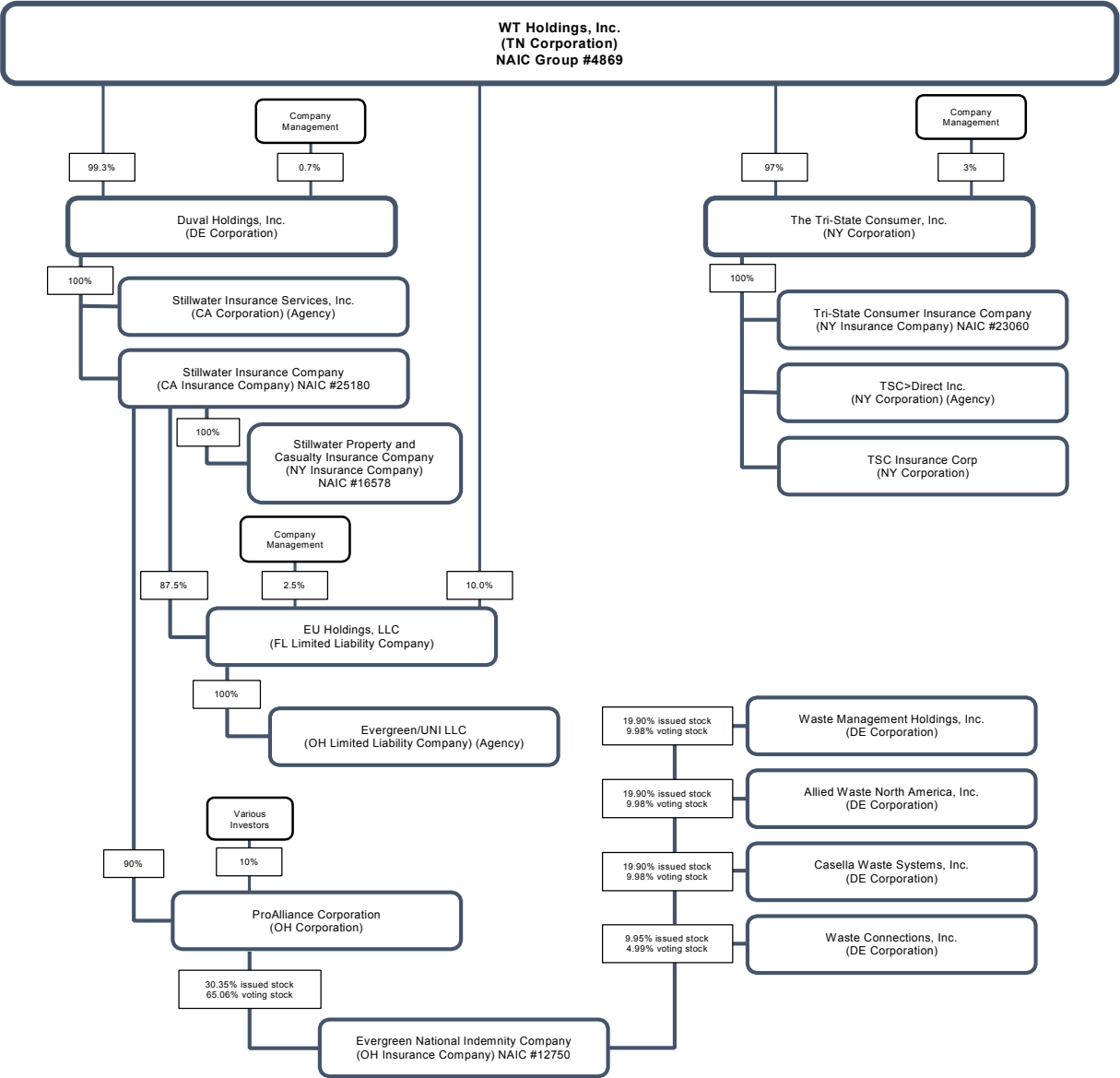
58001.	.....	XXX									
58002.	.....	XXX									
58003.	.....	XXX									
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX		0	0	0	0	0	0	0	0

(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 (other than their state of domicile see DSLI); (D) - DSLI - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write Surplus Lines in the state of domicile; (N) - None of the above - Not allowed to write business in the state.

Explanation of Basis of Allocation of Premiums by States, etc.

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

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



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