



LIFE AND ACCIDENT AND HEALTH COMPANIES — ASSOCIATION EDITION

ANNUAL STATEMENT
For the Year Ended December 31, 2017
OF THE CONDITION AND AFFAIRS OF THE
TRANS-OCEANIC LIFE INSURANCE COMPANY

NAIC Group Code 0000, 0000 NAIC Company Code 69523 Employer's ID Number 66-0235829
Organized under the Laws of Puerto Rico, State of Domicile or Port of Entry Puerto Rico
Country of Domicile United States
Incorporated/Organized 12/22/1959 Commenced Business 12/22/1959
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Main Administrative Office #121 ONEILL, SAN JUAN, PR, US 00918-2404 787-620-2680-2319
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OFFICERS

Name Title Name Title
NICOLAS TOUMA CORREA, PRESIDENT JORGE LUIS MENDIN, ESQ., SECRETARY
LUIS MARQUES GUILLERMETY, CPA, TREASURER

OTHER OFFICERS

HUMBERTO TAPIA TAVERAS, ASSISTANT SECRETARY EDRICK TOUMA TAVERAS, CPA, ASSISTANT TREASURER
MILTON E. BURGOS BULA, CPA, ESQ., ASSISTANT VICE PRESIDENT

DIRECTORS OR TRUSTEES

NICOLAS TOUMA CORREA, CHAIRMAN JORGE LUIS MENDIN, ESQ. CARLOS EDUARDO GIROD, MD LUIS MARQUES GUILLERMETY, CPA
HUMBERTO TAPIA TAVERAS CARMEN TAVERAS BURGOS CHRISTIAN TOUMA TAVERAS EDRICK TOUMA TAVERAS, CPA

State of ss
County of

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.

NICOLAS TOUMA CORREA
PRESIDENT

HUMBERTO TAPIA TAVERAS
ASSISTANT SECRETARY

LUIS MARQUES GUILLERMETY, CPA
TREASURER

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

Subscribed and sworn to before me this
day of

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	43,378,486		43,378,486	43,232,146
2. Stocks (Schedule D):				
2.1 Preferred stocks	24,014		24,014	48,039
2.2 Common stocks	9,321,484		9,321,484	6,037,727
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$5,522,792 encumbrances).....	7,449,629	391,937	7,057,692	6,739,676
4.2 Properties held for the production of income (less \$31,000 encumbrances)	31,000	31,000	0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$5,601,343 , Schedule E-Part 1), cash equivalents (\$1,987,794 , Schedule E-Part 2) and short-term investments (\$0 , Schedule DA).....	7,589,137		7,589,137	9,117,238
6. Contract loans (including \$ premium notes).....	125,934		125,934	115,495
7. Derivatives (Schedule DB).....	0		0	0
8. Other invested assets (Schedule BA)	1,461,269		1,461,269	710,000
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL).....			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	69,380,953	422,937	68,958,016	66,000,321
13. Title plants less \$ charged off (for Title insurers only).....			0	0
14. Investment income due and accrued	367,308		367,308	353,513
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	1,532,456	130,089	1,402,367	1,215,437
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....	183,004		183,004	196,542
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	25,000
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset.....			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software.....	332,756	206,388	126,368	157,723
21. Furniture and equipment, including health care delivery assets (\$)	57,365	57,365	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	1,275,443		1,275,443	1,424,562
24. Health care (\$) and other amounts receivable.....			0	0
25. Aggregate write-ins for other-than-invested assets	2,100,186	1,911,748	188,438	1,203,815
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	75,229,471	2,728,527	72,500,944	70,576,913
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
28. Total (Lines 26 and 27)	75,229,471	2,728,527	72,500,944	70,576,913
DETAILS OF WRITE-INS				
1101.			0	0
1102.			0	0
1103.			0	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. OTHER - NON ADMITTED ASSETS.....	1,859,710	1,859,710	0	997,989
2502. COLLATERAL REAL ESTATE LOAN MORTGAGE.....	178,871		178,871	181,835
2503. OTHER RECEIVABLES.....	61,605	52,038	9,567	23,991
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)	2,100,186	1,911,748	188,438	1,203,815

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ 4,025,022 (Exhibit 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve)	4,025,022	3,813,436
2. Aggregate reserve for accident and health contracts (including \$ 0 Modco Reserve)	22,939,588	20,950,958
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)	0	0
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)	33,177	80,542
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11)	6,286,167	5,565,000
5. Policyholders' dividends \$ and coupons \$ due and unpaid (Exhibit 4, Line 10)	0	0
6. Provision for policyholders' dividends and coupons payable in following calendar year—estimated amounts:		
6.1 Dividends apportioned for payment (including \$ Modco)	0	0
6.2 Dividends not yet apportioned (including \$ Modco)	0	0
6.3 Coupons and similar benefits (including \$ Modco)	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ discount; including \$ 0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14)	0	0
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts	0	0
9.2 Provision for experience rating refunds, including the liability of \$ accident and health experience rating refunds of which \$ is for medical loss ratio rebate per the Public Health Service Act	0	0
9.3 Other amounts payable on reinsurance, including \$ assumed and \$ ceded	0	0
9.4 Interest Maintenance Reserve (IMR, Line 6)	0	0
10. Commissions to agents due or accrued-life and annuity contracts \$ 411 accident and health \$ 3,150,836 and deposit-type contract funds \$	3,151,247	2,872,079
11. Commissions and expense allowances payable on reinsurance assumed	0	0
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 6)	411,568	736,364
13. Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense allowances recognized in reserves, net of reinsured allowances)	0	0
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 5)	306,045	314,945
15.1 Current federal and foreign income taxes, including \$ on realized capital gains (losses)	0	0
15.2 Net deferred tax liability	55,246	29,253
16. Unearned investment income	0	0
17. Amounts withheld or retained by company as agent or trustee	0	0
18. Amounts held for agents' account, including \$ agents' credit balances	0	0
19. Remittances and items not allocated	16,167	19,292
20. Net adjustment in assets and liabilities due to foreign exchange rates	0	0
21. Liability for benefits for employees and agents if not included above	0	0
22. Borrowed money \$ and interest thereon \$	0	0
23. Dividends to stockholders declared and unpaid	0	0
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7)	1,427,502	681,274
24.02 Reinsurance in unauthorized and certified (\$) companies	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$) reinsurers	0	0
24.04 Payable to parent, subsidiaries and affiliates	0	0
24.05 Drafts outstanding	67,359	66,102
24.06 Liability for amounts held under uninsured plans	0	0
24.07 Funds held under coinsurance	0	0
24.08 Derivatives	0	0
24.09 Payable for securities	0	0
24.10 Payable for securities lending	0	0
24.11 Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	437,985	2,601,166
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)	39,157,073	37,730,411
27. From Separate Accounts statement	0	0
28. Total liabilities (Lines 26 and 27)	39,157,073	37,730,411
29. Common capital stock	2,500,000	2,500,000
30. Preferred capital stock	0	0
31. Aggregate write-ins for other than special surplus funds	0	0
32. Surplus notes	0	0
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)	50,000	50,000
34. Aggregate write-ins for special surplus funds	0	0
35. Unassigned funds (surplus)	30,793,871	30,296,502
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 29 \$)	0	0
36.2 shares preferred (value included in Line 30 \$)	0	0
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	30,843,871	30,346,502
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)	33,343,871	32,846,502
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	72,500,944	70,576,913
DETAILS OF WRITE-INS		
2501. REINSURANCE PAYABLE	64,500	405,838
2502. PAYABLE IN INVESTMENT	0	0
2503. PAYABLE - LOT #125 ONEILL	185,000	185,000
2598. Summary of remaining write-ins for Line 25 from overflow page	188,485	2,010,328
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	437,985	2,601,166
3101.	0	0
3102.	0	0
3103.	0	0
3198. Summary of remaining write-ins for Line 31 from overflow page	0	0
3199. Totals (Lines 3101 through 3103 plus 3198) (Line 31 above)	0	0
3401.	0	0
3402.	0	0
3403.	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0

SUMMARY OF OPERATIONS

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11)	30,051,539	30,668,315
2. Considerations for supplementary contracts with life contingencies		0
3. Net investment income (Exhibit of Net Investment Income, Line 17)	1,741,002	1,442,480
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	(9)	2,162
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)	0	0
7. Reserve adjustments on reinsurance ceded		0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts		0
8.2 Charges and fees for deposit-type contracts		0
8.3 Aggregate write-ins for miscellaneous income	1,554	140,000
9. Totals (Lines 1 to 8.3)	31,794,086	32,252,957
10. Death benefits	31,018	160,855
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)	0	0
13. Disability benefits and benefits under accident and health contracts	9,292,408	9,830,469
14. Coupons, guaranteed annual pure endowments and similar benefits		0
15. Surrender benefits and withdrawals for life contracts	7,222	190,101
16. Group conversions		0
17. Interest and adjustments on contract or deposit-type contract funds		0
18. Payments on supplementary contracts with life contingencies		0
19. Increase in aggregate reserves for life and accident and health contracts	2,200,216	2,495,888
20. Totals (Lines 10 to 19)	11,530,864	12,677,313
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)	7,264,256	8,027,086
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	0	0
23. General insurance expenses (Exhibit 2, Line 10, Columns 1, 2, 3 and 4)	8,772,123	9,575,521
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3)	520,617	505,195
25. Increase in loading on deferred and uncollected premiums	(5,723)	(9,830)
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0
27. Aggregate write-ins for deductions	0	0
28. Totals (Lines 20 to 27)	28,082,137	30,775,285
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28)	3,711,949	1,477,672
30. Dividends to policyholders		0
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30)	3,711,949	1,477,672
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	344,975	310,866
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	3,366,974	1,166,806
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ 0 (excluding taxes of \$ 0 transferred to the IMR)	(1,485,086)	36,321
35. Net income (Line 33 plus Line 34)	1,881,888	1,203,127
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	32,846,502	35,246,338
37. Net income (Line 35)	1,881,888	1,203,127
38. Change in net unrealized capital gains (losses) less capital gains tax of \$	1,222,930	(390,049)
39. Change in net unrealized foreign exchange capital gain (loss)		0
40. Change in net deferred income tax		0
41. Change in nonadmitted assets	(661,222)	(106,360)
42. Change in liability for reinsurance in unauthorized and certified companies	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease	0	0
44. Change in asset valuation reserve	(746,227)	(6,554)
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2 Col. 2 minus Col. 1)	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period		0
47. Other changes in surplus in Separate Accounts statement	0	0
48. Change in surplus notes	0	0
49. Cumulative effect of changes in accounting principles		0
50. Capital changes:		
50.1 Paid in		0
50.2 Transferred from surplus (Stock Dividend)		0
50.3 Transferred to surplus		0
51. Surplus adjustment:		
51.1 Paid in		0
51.2 Transferred to capital (Stock Dividend)		0
51.3 Transferred from capital		0
51.4 Change in surplus as a result of reinsurance		0
52. Dividends to stockholders	(1,200,000)	(3,100,000)
53. Aggregate write-ins for gains and losses in surplus	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53)	497,369	(2,399,836)
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	33,343,871	32,846,502
DETAILS OF WRITE-INS		
08.301 RENT INCOME	0	0
08.302 LEGAL AGREEMENT - CIVIL CASE	0	0
08.303 OTHER INCOME	1,554	140,000
08.398 Summary of remaining write-ins for Line 8.3 from overflow page	0	0
08.399 Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	1,554	140,000
2701.		0
2702.		0
2703.		0
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)	0	0
5301. SPECIAL TAX	0	0
5302.		0
5303.		0
5398. Summary of remaining write-ins for Line 53 from overflow page	0	0
5399. Totals (Lines 5301 through 5303 plus 5398) (Line 53 above)	0	0

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	29,799,902	30,744,547
2. Net investment income	1,992,577	1,610,810
3. Miscellaneous income	1,554	140,000
4. Total (Lines 1 through 3)	31,794,033	32,495,357
5. Benefit and loss related payments	8,631,846	9,869,223
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	16,611,524	17,197,135
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	308,738	355,538
10. Total (Lines 5 through 9)	25,552,108	27,421,896
11. Net cash from operations (Line 4 minus Line 10)	6,241,925	5,073,461
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	3,734,835	5,784,360
12.2 Stocks	2,056,006	498,067
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(66,759)	9,912
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	5,724,082	6,292,339
13. Cost of investments acquired (long-term only):		
13.1 Bonds	5,001,950	16,131,481
13.2 Stocks	4,448,871	5,071,473
13.3 Mortgage loans	0	0
13.4 Real estate	834,191	507,287
13.5 Other invested assets	751,269	710,000
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	11,036,281	22,420,241
14. Net increase (decrease) in contract loans and premium notes	10,439	(45,162)
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(5,322,638)	(16,082,740)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	1,200,000	3,100,000
16.6 Other cash provided (applied)	(1,247,388)	2,734,721
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(2,447,388)	(365,279)
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)	(1,528,101)	(11,374,558)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	9,117,238	20,491,796
19.2 End of year (Line 18 plus Line 19.1)	7,589,137	9,117,238

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	Ordinary			6	Group		Accident and Health			12
			3	4	5		7	8	9	10	11	
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance (a)	Annuities	Group	Credit (Group and Individual)	Other	Aggregate of All Other Lines of Business
1. Premiums and annuity considerations for life and accident and health contracts	30,051,539	.0	2,019,706	.0	.0	.0	25,939	.0	.0	.0	28,005,894	
2. Considerations for supplementary contracts with life contingencies	.0											
3. Net investment income	1,741,002		124,799	6,000			4,500				1,605,703	
4. Amortization of Interest Maintenance Reserve (IMR)	(9)										(9)	
5. Separate Accounts net gain from operations excluding unrealized gains or losses	.0											
6. Commissions and expense allowances on reinsurance ceded	.0	.0	.0	.0		.0	.0	.0	.0	.0	.0	.0
7. Reserve adjustments on reinsurance ceded	.0											
8. Miscellaneous Income:												
8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts	.0											
8.2 Charges and fees for deposit-type contracts	.0											
8.3 Aggregate write-ins for miscellaneous income	1,554				0	0	0	0	0	0	1,554	0
9. Totals (Lines 1 to 8.3)	31,794,086	0	2,144,505	6,000	0	0	30,439	0	0	0	29,613,142	0
10. Death benefits	31,018		(7,068)				38,086					
11. Matured endowments (excluding guaranteed annual pure endowments)	.0	.0	.0				.0					
12. Annuity benefits	.0			.0				.0				
13. Disability benefits and benefits under accident and health contracts	9,292,408								.0	.0	9,292,408	
14. Coupons, guaranteed annual pure endowments and similar benefits	.0											
15. Surrender benefits and withdrawals for life contracts	7,222		7,222									
16. Group conversions	.0											
17. Interest and adjustments on contract or deposit-type contract funds	.0											
18. Payments on supplementary contracts with life contingencies	.0											
19. Increase in aggregate reserves for life and accident and health contracts	2,200,216		149,114	62,485		(13)					1,988,630	
20. Totals (Lines 10 to 19)	11,530,864	.0	149,268	62,485	.0	(13)	38,086	.0	.0	.0	11,281,038	.0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	7,264,256	.0	547,047	.0		.0	5,665	.0	.0	.0	6,711,544	.0
22. Commissions and expense allowances on reinsurance assumed	.0	.0	.0	.0		.0	.0	.0	.0	.0	.0	.0
23. General insurance expenses	8,772,123		520,656	983			1,815				8,248,669	.0
24. Insurance taxes, licenses and fees, excluding federal income taxes	520,617		34,053	500			437				485,627	.0
25. Increase in loading on deferred and uncollected premiums	(5,723)		(9,044)								3,321	
26. Net transfers to or (from) Separate Accounts net of reinsurance	.0											
27. Aggregate write-ins for deductions	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Totals (Lines 20 to 27)	28,082,137	0	1,241,980	63,968	0	(13)	46,003	0	0	0	26,730,199	0
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28)	3,711,949	.0	902,525	(57,968)	.0	13	(15,564)	.0	.0	.0	2,882,943	.0
30. Dividends to policyholders	.0										.0	
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30)	3,711,949	.0	902,525	(57,968)	.0	13	(15,564)	.0	.0	.0	2,882,943	.0
32. Federal income taxes incurred (excluding tax on capital gains)	344,975		23,203				280				321,492	
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	3,366,974	0	879,322	(57,968)	0	13	(15,844)	0	0	0	2,561,451	0
DETAILS OF WRITE-INS												
08.301. OTHER INCOME	1,554										1,554	
08.302.												
08.303.												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)	1,554	0	0	0	0	0	0	0	0	0	1,554	0
2701.												
2702.												
2703.												
2798. Summary of remaining write-ins for Line 27 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

(a) Includes the following amounts for FEGLI/SGLI: Line 1 Line 10 Line 16 Line 23 Line 24

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group	
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)								
1. Reserve December 31, prior year	3,813,436	0	2,742,912	1,070,434	0	90	0	0
2. Tabular net premiums or considerations	2,045,645		2,019,706	0		0	25,939	
3. Present value of disability claims incurred	0				XXX			
4. Tabular interest	187,510		112,583	62,485		5	12,437	
5. Tabular less actual reserve released	0							
6. Increase in reserve on account of change in valuation basis	0							
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve	0	XXX		XXX	XXX	XXX	XXX	XXX
7. Other increases (net)	0							
8. Totals (Lines 1 to 7)	6,046,591	0	4,875,201	1,132,919	0	95	38,376	0
9. Tabular cost	1,905,967		1,905,949		XXX	18	0	
10. Reserves released by death	108,383		70,007	XXX	XXX		38,376	XXX
11. Reserves released by other terminations (net)	7,219		7,219	0				
12. Annuity, supplementary contract, and disability payments involving life contingencies	0							
13. Net transfers to or (from) Separate Accounts	0							
14. Total deductions (Lines 9 to 13)	2,021,569	0	1,983,175	0	0	18	38,376	0
15. Reserve December 31, current year	4,025,022	0	2,892,026	1,132,919	0	77	0	0

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 63,366	66,632
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a) 1,417,830	1,414,987
1.3 Bonds of affiliates	(a) 0	
2.1 Preferred stocks (unaffiliated)	(b) 270	269
2.11 Preferred stocks of affiliates	(b) 0	
2.2 Common stocks (unaffiliated)	180,495	191,578
2.21 Common stocks of affiliates	0	
3. Mortgage loans	(c)	
4. Real estate	(d)	
5. Contract loans	9,162	9,162
6. Cash, cash equivalents and short-term investments	(e) 52,823	55,112
7. Derivative instruments	(f)	
8. Other invested assets	42,856	42,856
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	1,766,802	1,780,596
11. Investment expenses		(g) 463,368
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i) 206,864
15. Aggregate write-ins for deductions from investment income		(630,638)
16. Total deductions (Lines 11 through 15)		39,594
17. Net investment income (Line 10 minus Line 16)		1,741,002
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. RENT EXPENSES		(630,638)
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)		(630,638)

- (a) Includes \$ 103,838 accrual of discount less \$ 162,344 amortization of premium and less \$ 28,594 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ 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 \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	(883)	0	(883)	0	
1.1 Bonds exempt from U.S. tax			0		
1.2 Other bonds (unaffiliated)	(1,068,047)	(792,796)	(1,860,843)	799,463	
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	(24,025)	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	386,875	0	386,875	504,021	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	(56,529)	0
10. Total capital gains (losses)	(682,055)	(792,796)	(1,474,851)	1,222,930	0
DETAILS OF WRITE-INS					
0901. Change in deferred liabilities			0	(56,529)	
0902.			0		
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	0	0	(56,529)	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 1 - PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Industrial Life	Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health		11 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)		10 Other
FIRST YEAR (other than single)										
1. Uncollected	0	0	0	0	0	0	0	0	0	0
2. Deferred and accrued	370,680	0	18,050	0	0	0	0	0	352,630	0
3. Deferred, accrued and uncollected:										
3.1 Direct	370,680	0	18,050	0	0	0	0	0	352,630	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net (Line 1 + Line 2)	370,680	0	18,050	0	0	0	0	0	352,630	0
4. Advance	0	0	0	0	0	0	0	0	0	0
5. Line 3.4 - Line 4	370,680	0	18,050	0	0	0	0	0	352,630	0
6. Collected during year:										
6.1 Direct	4,963,648	0	453,515	0	0	0	0	0	4,510,133	0
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	73,655	0	73,655	0	0	0	0	0	0	0
6.4 Net	4,889,993	0	379,860	0	0	0	0	0	4,510,133	0
7. Line 5 + Line 6.4	5,260,673	0	397,910	0	0	0	0	0	4,862,763	0
8. Prior year (uncollected + deferred and accrued - advance)	315,096	0	20,560	0	0	0	0	0	294,536	0
9. First year premiums and considerations:										
9.1 Direct	5,019,232	0	451,005	0	0	0	0	0	4,568,227	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	73,655	0	73,655	0	0	0	0	0	0	0
9.4 Net (Line 7 - Line 8)	4,945,577	0	377,350	0	0	0	0	0	4,568,227	0
SINGLE										
10. Single premiums and considerations:										
10.1 Direct	0	0	0	0	0	0	0	0	0	0
10.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
10.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
10.4 Net	0	0	0	0	0	0	0	0	0	0
RENEWAL										
11. Uncollected	1,232,018	0	67,045	0	0	0	0	0	1,164,973	0
12. Deferred and accrued	239,801	0	239,801	0	0	0	0	0	0	0
13. Deferred, accrued and uncollected:										
13.1 Direct	1,471,819	0	306,846	0	0	0	0	0	1,164,973	0
13.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
13.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
13.4 Net (Line 11 + Line 12)	1,471,819	0	306,846	0	0	0	0	0	1,164,973	0
14. Advance	0	0	0	0	0	0	0	0	0	0
15. Line 13.4 - Line 14	1,471,819	0	306,846	0	0	0	0	0	1,164,973	0
16. Collected during year:										
16.1 Direct	25,090,570	0	1,808,581	0	0	36,248	0	0	23,245,741	0
16.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
16.3 Reinsurance ceded	180,661	0	170,352	0	0	10,309	0	0	0	0
16.4 Net	24,909,909	0	1,638,229	0	0	25,939	0	0	23,245,741	0
17. Line 15 + Line 16.4	26,381,728	0	1,945,075	0	0	25,939	0	0	24,410,714	0
18. Prior year (uncollected + deferred and accrued - advance)	1,275,766	0	302,719	0	0	0	0	0	973,047	0
19. Renewal premiums and considerations:										
19.1 Direct	25,286,623	0	1,812,708	0	0	36,248	0	0	23,437,667	0
19.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
19.3 Reinsurance ceded	180,661	0	170,352	0	0	10,309	0	0	0	0
19.4 Net (Line 17 - Line 18)	25,105,962	0	1,642,356	0	0	25,939	0	0	23,437,667	0
TOTAL										
20. Total premiums and annuity considerations:										
20.1 Direct	30,305,855	0	2,263,713	0	0	36,248	0	0	28,005,894	0
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded	254,316	0	244,007	0	0	10,309	0	0	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4)	30,051,539	0	2,019,706	0	0	25,939	0	0	28,005,894	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 1 - PART 2 - DIVIDENDS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)

	1 Total	2 Industrial Life	Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health			11 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other	
DIVIDENDS AND COUPONS APPLIED (included in Part 1)											
21. To pay renewal premiums.....	0										
22. All other.....	0										
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED											
23. First year (other than single):											
23.1 Reinsurance ceded.....	0										
23.2 Reinsurance assumed.....	0										
23.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
24. Single:											
24.1 Reinsurance ceded.....	0										
24.2 Reinsurance assumed.....	0										
24.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
25. Renewal:											
25.1 Reinsurance ceded.....	0										
25.2 Reinsurance assumed.....	0										
25.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
26. Totals:											
26.1 Reinsurance ceded (Page 6, Line 6).....	0	0	0	0	0	0	0	0	0	0	0
26.2 Reinsurance assumed (Page 6, Line 22).....	0	0	0	0	0	0	0	0	0	0	0
26.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
COMMISSIONS INCURRED (direct business only)											
27. First year (other than single).....	2,666,941		186,368							2,480,573	
28. Single.....	0										
29. Renewal.....	4,597,315		360,679			5,665				4,230,971	
30. Deposit-type contract funds.....	0										
31. Totals (to agree with Page 6, Line 21).....	7,264,256	0	547,047	0	0	5,665	0	0	0	6,711,544	0

EXHIBIT 2 - GENERAL EXPENSES

	Insurance				5 Investment	6 Total
	1 Life	Accident and Health		4 All Other Lines of Business		
		2 Cost Containment	3 All Other			
1. Rent						0
2. Salaries and wages	191,869		2,662,955		35,250	2,890,074
3.11 Contributions for benefit plans for employees	36,522		506,888			543,410
3.12 Contributions for benefit plans for agents	10,895		151,207			162,102
3.21 Payments to employees under non-funded benefit plans						0
3.22 Payments to agents under non-funded benefit plans						0
3.31 Other employee welfare						0
3.32 Other agent welfare	806		11,194			12,000
4.1 Legal fees and expenses	57,059		791,937			848,996
4.2 Medical examination fees	2,016		27,984			30,000
4.3 Inspection report fees	804		11,156			11,960
4.4 Fees of public accountants and consulting actuaries	7,606		105,570			113,176
4.5 Expense of investigation and settlement of policy claims	11,004		152,721			163,725
5.1 Traveling expenses	12,066		167,466			179,532
5.2 Advertising	2,653		36,816			39,469
5.3 Postage, express, telegraph and telephone	11,079		153,767			164,846
5.4 Printing and stationery	4,752		65,961			70,713
5.5 Cost or depreciation of furniture and equipment	2,390		33,176			35,566
5.6 Rental of equipment	11,763		163,255			175,018
5.7 Cost or depreciation of EDP equipment and software	8,761		121,601			130,362
6.1 Books and periodicals	52		717			769
6.2 Bureau and association fees	5,063		70,265			75,328
6.3 Insurance, except on real estate						0
6.4 Miscellaneous losses						0
6.5 Collection and bank service charges	29,529		409,832			439,361
6.6 Sundry general expenses	12,969		165,623			178,592
6.7 Group service and administration fees						0
6.8 Reimbursements by uninsured plans						0
7.1 Agency expense allowance						0
7.2 Agents' balances charged off (less recovered)						0
7.3 Agency conferences other than local meetings	1,882		26,118			28,000
9.1 Real estate expenses	58,565		812,828		332,366	1,203,759
9.2 Investment expenses not included elsewhere					95,752	95,752
9.3 Aggregate write-ins for expenses	43,349	0	1,599,632	0	0	1,642,981
10. General expenses incurred	523,454	0	8,248,669	0	463,368	9,235,491
11. General expenses unpaid December 31, prior year	51,565	0	684,799	0	0	736,364
12. General expenses unpaid December 31, current year	27,661	0	383,907	0	0	411,568
13. Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0	0
14. Amounts receivable relating to uninsured plans, current year	0	0	0	0	0	0
15. General expenses paid during year (Lines 10+11-12-13+14)	547,358	0	8,549,561	0	463,368	9,560,287
DETAILS OF WRITE-INS						
09.301. MAINTENANCE EQUIPMENT	7,867		109,182			117,049
09.302. PROFESSIONAL CONSULTING FEES	25,401		352,545			377,946
09.303. MANAGEMENT FEES	10,081		139,919			150,000
09.398. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	997,986	0	0	997,986
09.399. Totals (Lines 09.301 through 09.303 + 09.398) (Line 9.3 above)	43,349	0	1,599,632	0	0	1,642,981

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

EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)

	Insurance			4 Investment	5 Total
	1 Life	Accident and Health			
		2	3 All Other Lines of Business		
1. Real estate taxes	3,328	46,186			49,514
2. State insurance department licenses and fees	3,606	50,053			53,659
3. State taxes on premiums					0
4. Other state taxes, incl. \$ for employee benefits	4,942	68,585			73,527
5. U.S. Social Security taxes	15,575	216,173			231,748
6. All other taxes	7,539	104,630			112,169
7. Taxes, licenses and fees incurred	34,990	485,627	0	0	520,617
8. Taxes, licenses and fees unpaid December 31, prior year	22,054	292,891	0	0	314,945
9. Taxes, licenses and fees unpaid December 31, current year	20,568	285,477	0	0	306,045
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	36,476	493,041	0	0	529,517

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1 Life	2 Accident and Health
	1. Applied to pay renewal premiums	
2. Applied to shorten the endowment or premium-paying period		
3. Applied to provide paid-up additions		
4. Applied to provide paid-up annuities		
5. Total Lines 1 through 4	0	0
6. Paid-in cash		
7. Left on deposit		
8. Aggregate write-ins for dividend or refund options	0	0
9. Total Lines 5 through 8	0	0
10. Amount due and unpaid		
11. Provision for dividends or refunds payable in the following calendar year		
12. Terminal dividends		
13. Provision for deferred dividend contracts		
14. Amount provisionally held for deferred dividend contracts not included in Line 13		
15. Total Lines 10 through 14	0	0
16. Total from prior year	0	0
17. Total dividends or refunds (Lines 9 + 15 - 16)	0	0
DETAILS OF WRITE-INS		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0
0899. Totals (Line 0801 through 0803 + 0898) (Line 8 above)	0	0

NONE

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5	6
Valuation Standard	Total	Industrial	Ordinary	Credit (Group and Individual)	Group
LIFE INSURANCE					
0100001. 58 CSO 3.0% 59-83.....	23,945		23,945		
0100002. 58 CSO CRVM 3.5% to 4.5%.....	1,209,739		1,209,739		
0100003. 58 CSO CRVM 5.5% to 6%.....	401,611		401,611		
0100004. 80 CSO CRVM 3.5% to 4.5%.....	18,802		18,802		
0100005. 80 CSO CRVM 5.0% to 6%.....	54,915		54,915		
0100006. 2001 CSO CRVM 3.5% to 4.5%.....	559,092		559,092		
0100007. 80 CET 3.5%.....	77			77	
0199997 Totals (Gross).....	2,268,181	0	2,268,104	77	0
0199998 Reinsurance ceded.....	0		0		
0199999 Totals (Net).....	2,268,181	0	2,268,104	77	0
ANNUITIES (excluding supplementary contracts with life contingencies):					
0200001. 3.5% CARVM.....	1,132,919	XXX	1,132,919	XXX	
0299997 Totals (Gross).....	1,132,919	XXX	1,132,919	XXX	0
0299998 Reinsurance ceded.....	0	XXX		XXX	
0299999 Totals (Net).....	1,132,919	XXX	1,132,919	XXX	0
SUPPLEMENTARY CONTRACTS WITH LIFE CONTINGENCIES:					
0300001.	0				
0300002.	0				
0399997 Totals (Gross).....	0	0	0	0	0
0399998 Reinsurance ceded.....	0				
0399999 Totals (Net).....	0	0	0	0	0
ACCIDENTAL DEATH BENEFITS:					
0400001. 59 ADB 3.0%.....	553,654		553,654		
0400002.	0				
0499997 Totals (Gross).....	553,654	0	553,654	0	0
0499998 Reinsurance ceded.....	0				
0499999 Totals (Net).....	553,654	0	553,654	0	0
DISABILITY-ACTIVE LIVES:					
0500001. 52 DIS 3.0 %.....	7,237		7,237		
0500002.	0				
0599997 Totals (Gross).....	7,237	0	7,237	0	0
0599998 Reinsurance ceded.....	0				
0599999 Totals (Net).....	7,237	0	7,237	0	0
DISABILITY-DISABLED LIVES:					
0600001. 52 DIS 3.0 %.....	6,505		6,505		
0600002.	0				
0699997 Totals (Gross).....	6,505	0	6,505	0	0
0699998 Reinsurance ceded.....	0				
0699999 Totals (Net).....	6,505	0	6,505	0	0
MISCELLANEOUS RESERVES					
0700001. IMMEDIATE PAYMENTS OF CLAIMS.....	49,850		49,850		
0700002. DEFICIENCY RESERVES.....	0		0		
0700003. NON - DEDUCTIONS OF DEFERRED FRACTIONAL PREMIUMS.....	6,676		6,676		
0799997 Totals (Gross).....	56,526	0	56,526	0	0
0799998 Reinsurance ceded.....	0				
0799999 Totals (Net).....	56,526	0	56,526	0	0
9999999 Totals (Net) - Page 3, Line 1.....	4,025,022	0	4,024,945	77	0



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 5 - INTERROGATORIES

- 1.1 Has the reporting entity ever issued both participating and non-participating contracts?..... Yes [X] No []
- 1.2 If not, state which kind is issued:
.....
- 2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [X] No []
- 2.2 If not, state which kind is issued:
.....
- 3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? Yes [] No [X]
If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.
- 4. Has the reporting entity any assessment or stipulated premium contracts in force? Yes [] No [X]
If so, state:
- 4.1 Amount of insurance:..... \$ 0
- 4.2 Amount of reserve:..... \$ 0
- 4.3 Basis of reserve:
0
- 4.4 Basis of regular assessments:
.....
- 4.5 Basis of special assessments:
.....
- 4.6 Assessments collected during the year: \$ 0
- 5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts:
.....
- 6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? Yes [] No [X]
- 6.1 If so, state the amount of reserve on such contracts on the basis actually held:..... \$
- 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits:..... \$ 0
Attach statement of methods employed in their valuation.
- 7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? .. Yes [] No [X]
- 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements:..... \$
- 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount
.....
- 7.3 State the amount of reserves established for this business:..... \$ 0
- 7.4 Identify where the reserves are reported in the blank
.....
- 8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
- 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements:..... \$
- 8.2 State the amount of reserves established for this business:..... \$
- 8.3 Identify where the reserves are reported in the blank:
.....
- 9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? Yes [] No [X]
- 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders:..... \$
- 9.2 State the amount of reserves established for this business:..... \$
- 9.3 Identify where the reserves are reported in the blank:
.....

EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR

1 Description of Valuation Class	2 Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
LIFE CONTRACTS (Including supplementary contracts set upon a basis other than that used to determine benefits) (Exhibit 5)			
0199999 Subtotal (Page 7, Line 6)	XXX	XXX	
ACCIDENT AND HEALTH CONTRACTS (Exhibit 6)			
0299999 Subtotal	XXX	XXX	
DEPOSIT-TYPE CONTRACTS (Exhibit 7)			
NONE			
0399999 Subtotal	XXX	XXX	
9999999 Total (Column 4 only)			

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
ACTIVE LIFE RESERVE									
1. Unearned premium reserves	31,638					31,638			
2. Additional contract reserves (a)	22,648,329					22,648,329			
3. Additional actuarial reserves - Asset/Liability analysis	0								
4. Reserve for future contingent benefits	0								
5. Reserve for rate credits	0								
6. Aggregate write-ins for reserves	259,621	0	0	0	0	259,621	0	0	0
7. Totals (Gross)	22,939,588	0	0	0	0	22,939,588	0	0	0
8. Reinsurance ceded	0								
9. Totals (Net)	22,939,588	0	0	0	0	22,939,588	0	0	0
CLAIM RESERVE									
10. Present value of amounts not yet due on claims	0								
11. Additional actuarial reserves-Asset/Liability analysis	0								
12. Reserve for future contingent benefits	0								
13. Aggregate write-ins for reserves	0	0	0	0	0	0	0	0	0
14. Totals (Gross)	0	0	0	0	0	0	0	0	0
15. Reinsurance ceded	0								
16. Totals (Net)	0	0	0	0	0	0	0	0	0
17. TOTAL (Net)	22,939,588	0	0	0	0	22,939,588	0	0	0
18. TABULAR FUND INTEREST	0								
DETAILS OF WRITE-INS									
0601. RETURN OF PREMIUM	259,621					259,621			
0602.									
0603.									
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	259,621	0	0	0	0	259,621	0	0	0
1301.									
1302.									
1303.									
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0

(a) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 7 – DEPOSIT-TYPE CONTRACTS

	1	2	3	4	5	6
	Total	Guaranteed Interest Contracts	Annuities Certain	Supplemental Contracts	Dividend Accumulations or Refunds	Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance .....	.0					
2. Deposits received during the year .....	.0					
3. Investment earnings credited to the account .....	.0					
4. Other net change in reserves .....	.0					
5. Fees and other charges assessed .....	.0					
6. Surrender charges .....	.0					
7. Net surrender or withdrawal payments .....	.0					
8. Other net transfers to or (from) Separate Accounts .....	.0					
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) .....	.0	.0	.0	.0	.0	.0
10. Reinsurance balance at the beginning of the year .....	.0					
11. Net change in reinsurance assumed .....	.0					
12. Net change in reinsurance ceded .....	.0					
13. Reinsurance balance at the end of the year (Lines 10+11-12) .....	.0	.0	.0	.0	.0	.0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13)	0	0	0	0	0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct	0										
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	0	0	0	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted											
2.11 Direct	0										
2.12 Reinsurance assumed	0										
2.13 Reinsurance ceded	0										
2.14 Net	0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	0	0	0
2.2 Other	128,075										128,075
2.21 Direct	128,075										128,075
2.22 Reinsurance assumed	0										
2.23 Reinsurance ceded	0										
2.24 Net	128,075	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 128,075
3. Incurred but unreported:											
3.1 Direct	6,191,269		16,934				16,243				6,158,092
3.2 Reinsurance assumed	0										
3.3 Reinsurance ceded	0										
3.4 Net	6,191,269	0	(b) 16,934	(b) 0	0	(b) 0	(b) 16,243	0	(b) 0	(b) 0	(b) 6,158,092
4. TOTALS	6,319,344	0	16,934	0	0	0	16,243	0	0	0	6,286,167
4.1 Direct	6,319,344	0	16,934	0	0	0	16,243	0	0	0	6,286,167
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	6,319,344	(a) 0	(a) 16,934	0	0	0	(a) 16,243	0	0	0	6,286,167

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ in Column 2, \$ in Column 3 and \$ in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$, Individual Annuities \$, Credit Life (Group and Individual) \$, and Group Life \$, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$, Credit (Group and Individual) Accident and Health \$, and Other Accident and Health \$ are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct	8,735,854		83,737				80,876				8,571,241
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	86,230		43,730				42,500				
1.4 Net	8,649,624	0	40,007	0	0	0	38,376	0	0	0	8,571,241
2. Liability December 31, current year from Part 1:											
2.1 Direct	6,319,344	0	16,934	0	0	0	16,243	0	0	0	6,286,167
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
2.4 Net	6,319,344	0	16,934	0	0	0	16,243	0	0	0	6,286,167
3. Amounts recoverable from reinsurers December 31, current year	0										
4. Liability December 31, prior year:											
4.1 Direct	5,645,542	0	64,009	0	0	0	16,533	0	0	0	5,565,000
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	5,645,542	0	64,009	0	0	0	16,533	0	0	0	5,565,000
5. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0	0
6. Incurred benefits:											
6.1 Direct	9,409,656	0	36,662	0	0	0	80,586	0	0	0	9,292,408
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	86,230	0	43,730	0	0	0	42,500	0	0	0	0
6.4 Net	9,323,426	0	(7,068)	0	0	0	38,086	0	0	0	9,292,408

- (a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$in Line 1.1, \$in Line 1.4.
 \$in Line 6.1 and \$in Line 6.4.
- (b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$in Line 1.1, \$in Line 1.4.
 \$in Line 6.1 and \$in Line 6.4.
- (c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$in Line 1.1, \$in Line 1.4.
 \$in Line 6.1 and \$in Line 6.4.
- (d) Includes \$premiums waived under total and permanent disability benefits.

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	.0	.0	.0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	.0	.0	.0
2.2 Common stocks .....	.0	.0	.0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	.0	.0	.0
3.2 Other than first liens .....	.0	.0	.0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	391,937	82,626	(309,311)
4.2 Properties held for the production of income.....	31,000	31,000	.0
4.3 Properties held for sale .....	.0	.0	.0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....	.0	.0	.0
6. Contract loans .....	.0	.0	.0
7. Derivatives (Schedule DB).....	.0	.0	.0
8. Other invested assets (Schedule BA) .....	.0	.0	.0
9. Receivables for securities .....	.0	.0	.0
10. Securities lending reinvested collateral assets (Schedule DL).....	.0	.0	.0
11. Aggregate write-ins for invested assets .....	.0	.0	.0
12. Subtotals, cash and invested assets (Lines 1 to 11)	422,937	113,626	(309,311)
13. Title plants (for Title insurers only).....	.0	.0	.0
14. Investment income due and accrued .....	.0	.0	.0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	130,089	46,121	(83,968)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	.0	.0	.0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	.0	.0	.0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	.0	.0	.0
16.2 Funds held by or deposited with reinsured companies .....	.0	.0	.0
16.3 Other amounts receivable under reinsurance contracts .....	.0	.0	.0
17. Amounts receivable relating to uninsured plans .....	.0	.0	.0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	.0	.0	.0
18.2 Net deferred tax asset.....	.0	.0	.0
19. Guaranty funds receivable or on deposit .....	.0	.0	.0
20. Electronic data processing equipment and software.....	206,388	.0	(206,388)
21. Furniture and equipment, including health care delivery assets	57,365	79,330	21,965
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	.0	.0	.0
23. Receivables from parent, subsidiaries and affiliates .....	.0	.0	.0
24. Health care and other amounts receivable.....	.0	.0	.0
25. Aggregate write-ins for other-than-invested assets	1,911,748	1,828,228	(83,520)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	2,728,527	2,067,305	(661,222)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27)	2,728,527	2,067,305	(661,222)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
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. OTHER NON ADMITTED ASSETS.....	1,859,710	1,754,454	(105,256)
2502. OTHER RECEIVABLE.....	52,038	73,774	21,736
2503.			
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)	1,911,748	1,828,228	(83,520)

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. **ACCOUNTING PRACTICES** : THE ACCOMPANYING FINANCIAL STATEMENTS OF THE COMPANY HAVE BEEN PREPARED IN CONFORMITY WITH ACCOUNTING PRACTICES PRESCRIBED PERMITTED BY THE NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS AND THE COMMONWEALTH OF PUERTO RICO.

B. **ACCOUNTING POLICYS** : ASSET VALUES ARE GENERALLY STATED AS FOLLOWS : BONDS AT AMORTIZED COST, COMMON STOCK AT MARKET INVESTMENT, PREFERRED STOCKS AT COST VALUE, IN REAL ESTATE AND PROPERTY ACQUIRED IN SATISFACTION OF DEBT AT DEPRECIATED COST, LESS ENCUMBRANCES, OTHER INVESTMENTS ON THE EQUITY BASIS.

1. THE COMPANY USES STRAIGHT LINE DEPRECIATION FOR ALL ITS REAL ESTATE HOLDINGS WITH THE LIFE VARYING DEPENDING UPON THE TYPE OF THE COMPANY OWNS NO INVESTED ASSETS REQUIRING A METHOD OF DEPLETION.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS - NOT EVENT

3. **BUSINESS COMBINATIONS AND GOODWILL** - IN JANUARY 1,2008 , TRANS-OCEANIC LIFE INSURANCE COMPANY PURCHASE THE ACCIDENT & HEALTH POLICIES PORTFOLIO OF UNIVERSAL LIFE INSURANCE COMPANY, AT COST OF \$ 9,979,863. THE COST WAS ACCOUNTED IN ADMITTED ASSETS FOR THE AMOUNT OF \$ 983,941 NON ADMITTED ASSETS OF \$ 8,995,922 AND AMORTIZATION OF POSITIVE GOODWILL FOR THE AMOUNT OF \$ 997,986 (FOR TEN YEAR) . ALSO, THE COMPANY RECEIVED \$ 7,229,863 OF ACCUMULATED RESERVE. THE TRANSACTION WAS ACCOUNTED FOR STATUTORY METHOD. AT DEC 31, 2017 THE COST OF GOODWILL, NET OF AMORTIZATION , IS \$ 0.

4. DISCONTINUED OPERATIONS- NOT EVENT

5. **INVESTMENTS** : COMMON STOCKS PORTFOLIO - DURING 2009 : INVESTEMENT INDISCRETIONARILY MANAGED EQUITIES COMMENCED IN THE LATE 90'S THROUGH 1838 INVESTMENT ADVISORS AND A LARGER PERCENTAGE OF THE TOTAL INVESTMENT PORTFOLIO. DUE TO THE VOLATILITY OF THE MARKETS IN THIS DECADE AS WELL AS THE IMPLICATION OF ACCOUNTING PRONOUNCEMENT IN TRANS OCEANIC LIFE'S FINANCIAL STATEMENTS, A PROGRAM OF ORDAINED PARTIAL DIVESTITURE WAS ESTABLISHED, WHEREAS THE MANAGER WAS CHANGED TO JP MORGAN INVESTMENTS MANAGEMENT WITH A MORE CONSISTENT AND QUALITY ORIENTED MANADATE.

DURING 2009 AND AS A RESULT OF THE RECOVERY IN THE EQUITY MARKETS, THE REMAINING MANAGED PORTFOLIO WAS SOLD AT A GAIN WITH THE INTENTION OF REEVALUATING AMORE MODERATE EQUITY EXPOSURE DURING 2014 (A SMALL AMOUNT OF 100,000). THE COMPANY AND ITS ADVISORS WILL CONSIDERE THE CURRENT STATE OF THE DOMESTIC AND THE INTERNATIONAL MARKETS USING MODELS THAT INCORPORATE THE RELATIVE VALUE AO ASSETS CLASSES AND MORE IMPORTANTLY, THE CASH FLOW AND LIABILITY COMPOSITION OF ITS OPERACTIONS. FUTURE EQUITY PARTICIPATION WILL ENCOMPAS GREATER DIVERSIFICATION BOTH BY INDUSTRIES AS WELL AS GEOGRAPHICALLY , IN ORDER TO CAPTURE GROWTH JURISDICTIONS EITHER DOMESTICALLY OR GLOBALLY.

DURING 2016 TOLIC INCREASE THE BONDS AND STOCKS PORTFOLIO FOR THE AMOUNT OF 15,000,000 APROXIMATELY. MANAGEMENT STRATEGY ESTABLISH TO INCREASE A NET INCOME TO THE NEXT YEARS.

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES - NOT EVENT

7. INVESTMENT INCOME

A. DUE AND ACCRUED INCOME SUBJECT TO EXCLUSION FROM INVESTMENT INCOME IS BASED ON THE FOLLOWING:

MORTGAGE LOANS - ON LOANS IN FORECLOSURE OR DELINQUENT MORE THAN ONE YEAR OR WHERE COLLECTION OF INTEREST IS UNCERTAIN.

BONDS - WHERE COLLECTION OF INTEREST IS UNCERTAIN.

REAL STATE - WHERE RENT IS IN ARREAR FOR MORE THAN THREE MONTHS.

THERE WERE NO EXCLUSIONS DURING DEC 31,2017.

B. THE COMPANY DOES NOT USE THE INVESTMENT YEAR METHOD OF ALLOCATION OF NET INVESTMENT INCOME TO LINES OF BUSINESS.

8. DERIVATIVE INSTRUMENTS - NOT EVENT

9. INCOME TAXES

A. DEFERRED INCOME TAX LIABILITY IS A LIABILITY FOR THE AMOUNT OF ACCUMULATED OF \$ 55,246.

B. FEDERAL INCOME TAX ALLOCATION - THE COMPANY IS NOT REQUIRED TO FILE FEDERAL INCOME TAX RETURNS IN PUERTO RICO. HOWEVER, WE ARE FILING FEDERAL INSURANCE TAX RETURNS FOR THE STATE OF FLORIDA, U.S.A. AND THE VIRGIN ISLANDS, FOR DEC 31,2017.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES AND OTHER RELATED PARTIES.

Effective as of December 31, 2010, and with the prior written approval of the Office of the Insurance Commissioner of Puerto Rico, a tax-free corporate reorganization complying with Section 1112 of the Puerto Rico Internal Revenue Code took place involving TOLIC and its parent company until such date, Victory Insurance Corporation. As a result of such reorganization, Victory Insurance Corporation was merged into TOLIC, and TOLIC became a subsidiary of a new corporation, Trans-Oceanic Group, Inc., which owned from that effective date the same number of common stock shares of TOLIC that Victory Insurance Corporation had owned until then. Pursuant to said corporate reorganization the same natural and legal persons that had been until then the common stockholders and preferred stockholders of Victory Insurance Corporation became the common and preferred stockholders of Trans-Oceanic Group, Inc., in the same proportional percentages of ownership participation.

NOTES TO FINANCIAL STATEMENTS

On the date immediately prior to that of the corporate reorganization—that is, on December 30, 2010—the Touma-Taveras Trust had acquired from Roberto A. Tirado the totality of the 16,667 common stock shares of Victory Insurance Corporation that until such acquisition had belonged to Mr. Tirado, representing one third of the 50,000 issued and outstanding common shares of Victory Insurance Corporation at that moment. As a result of such acquisition, which also had the prior written approval of the Office of the Insurance Commissioner of Puerto Rico, the Touma-Taveras Trust became the owner of one half of the common stock shares of Victory Insurance Corporation as of December 30, 2010; and thus, pursuant to the subsequent corporate reorganization, also became the owner of one half of the common stock shares of Trans-Oceanic Group, Inc. as of December 31, 2010. As of the same latter date, and also pursuant to the corporate reorganization, Touma-Taveras, Inc. became the owner of one-third of the common stock shares of Trans-Oceanic Group, Inc. and Nicolás Touma Correa became the owner of the remaining one-sixth of those common stock shares.

The principal economic effect of the merger of Victory Insurance Corporation into TOLIC was that a real estate property belonging until that moment to Victory Insurance Corporation, and consisting of a storage building and parking lot adjacent to the real estate property where TOLIC's principal offices are located, came to be owned by TOLIC.

As part of the above-described corporate reorganization, Trans-Oceanic Group, Inc. also became the parent company of two other new corporations, Victory Insurance Agency, Inc. and Tuchman Travel & Leisure, Inc., which will respectively operate an insurance agency license and a travel agency license that until the effective date of the reorganization belonged to Victory Insurance Corporation.

11. DEBT

TOLIC will lend to T-Group the sum of \$1,475,000.00, an amount that T-Group will use to buy office furniture and audio-visual equipment which, in turn, it will lease to TOLIC, as shall be indicated further below. The loan will be guaranteed with said furniture and equipment, approved by PR Commissioner of Insurance in December 20, 2013 (Art. 44.060 (a) (2) A (1) Insurance Code. At Dec 31, 2017 the balance of this loan is 1,275,443.

Also TOLIC has two loans and one credit line with Banco Popular de Puerto Rico to use to finance the HO Building construction. As Dec 31, 2017 the balance is 5,522,792.

12. RETIREMENTS PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFITS PLANS.

DEFERRED COMPENSATION AND RETIREMENT PLANS

A. EMPLOYEE RETIREMENT PLAN

- 1) TOLIC ESTABLISHED A 401K PLAN FOR THE BENEFIT OF ALL ITS EMPLOYEES AND OFFICERS.
- 2) THE COMPANY IS NOT THE INSURER OF THE PENSION PLAN.

B. DEFERRED COMPENSATION PLAN

- 1) THE COMPANY DOES NOT HAVE A DEFERRED COMPENSATION PLAN.

13. CAPITAL AND SURPLUS AND SHAREHOLDERS' DIVIDEND RESTRICTION AND QUASI-REORGANIZATIONS

A. DIVIDENDS ON COMPANY STOCK ARE PAID AS DECLARED BY ITS BOARD OF DIRECTORS, ACCORDING TO THE BY-LAWS OF THE COMPANY.

B. THE COMPANY HAS NO PREFERRED STOCK OUTSTANDING.

C. UNASSIGNED SURPLUS FUNDS WERE TOTALLY EARNED BY THE NON-PARTICIPATING DIVISION. TOTAL UNASSIGNED SURPLUS IS \$ 33,343,871. THERE IS NOT RESTRICTED SURPLUS. THE AMOUNT BEING HELD FOR BENEFIT OF COMPANY SHAREHOLDERS IS \$ 33,343,871.

D. THE COMPANY DID NOT HOLD ANY SHARES OF STOCK FOR SPECIAL PURPOSES.

14. CONTINGENCIES -

THE COMPANY IS NOT AWARE OF ANY MATERIAL CONTINGENT LIABILITIES AS OF DEC 31, 2017. THE COMPANY HAS NO PENDING LAW SUITS THAT MAY BE MATERIAL TO ITS FINANCIAL CONDITIONS.

15. LEASES

TOLIC HAS LEASES WITH ORIENTAL BANK FINANCE, POPULAR AUTO FINANCE AND RICOH - DE LANGE AS DECEMBER 2017.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF - BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK. NOT EVENT

17. SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES - NOT EVENT

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS - NOT EVENT

19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS - NOT EVENT

NOTES TO FINANCIAL STATEMENTS

20. OTHER ITEMS

A. DISCLOSURES OF CASH FROM FINANCING AND MISCELLANEOUS SOURCES , according SSAP no. 69:

LIABILITIES	AMOUNT THIS YEAR	AMOUNT LAST YEAR	CHANGE
Remittances & items not allocated	16,167	19,292	
Drafts outstanding	67,358	66,102	
Agregate write off - liabilities	437,985	2,601,166	
Total	<u>521,510</u>	<u>2,686,560</u>	(2,165,050)
ASSETS			
Electronic Equipment, net of dep.*	332,756	157,723	
Furniture & Fixtures Equipment,net of dep.*	57,365	79,330	
Parent Receivable	1,275,443	1,424,562	
Other assets - write off *	2,110,430	3,032,043	
Total	<u>3,775,994</u>	<u>4,693,658</u>	917,664

Total Cash Financing & Miscellaneous sources (1,247,386)

* Included non cash items :

Depreciation expense - Electronic equipment is \$ 130,363 & Furniture & fixture is \$ 35,566.

Net effect Interest Maintenance Reserve, non dmitted assets for amount of \$ 10,244.

B. 2017 AUDITED FINANCIAL STATEMENTS

OUR AUDITORS ARE CURRENTLY IN THE PROCESS OF AUDITING THE 2017 FINANCIAL STATEMENTS. WE SHALL PROVIDE THE AUDITED FINANCIAL STATEMENT NOTES IN JUNE 2018.

C. RECENTLY ADOPTED SSAPs - NOT EVENT

D. ITEM FOR WHICH NOT PRACTICABLE TO ESTIMATED FAIR VALUES

NOT PRACTICABLE TO ESTIMATE FV			
PRIVATE PLACEMENTS	CARRYING VALUE	DESCRIPTION	EXPLANATION
ROMARK LABORATORIES LLC	350,000	CONVERTIBLE SUBORDINATED NOTE	A
GPB WASTE MANAGEMENT LP	100,000	PRIVATE EQUITY INVESTMENT	A
WHEAT SELF STORAGE PARTNERS LLP	50,000	LIMITED PARTNERS FUND	A
PARLIAMENT CAPITAL MANAGEMENT LLC	300,000	PRIVATE PLACEMENT FUND	A
CAREY WATERMARK INVESTORS2	250,000	PRIVATE PLACEMENT FUND	A
STORAGE AT ANTHEM LLC	93,000	PRIVATE PLACEMENT FUND	A
GUAYACAN	313,274	PRIVATE PLACEMENT FUND	A

A- It was not practicable to determine the fair value of these financial instruments as a quoted market price was not available due to their recently issuance and the cost of obtaining an independent appraisal appears excessive considering the materiality of the instruments to the reporting entity.

21. EVENTS SUBSEQUENT : NOT EVENT

22. REINSURANCE - NOT EVENT

23. RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION - NOT EVENT

24. CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES - NOT APPLICABLE

25. INTERCOMPANY POOLING ARRANGEMENTS - NOT EVENT

26. STRUCTURED SETTELEMENTS - NOT EVENT

27. HEALTH CARE RECEIVABLES - NOT EVENT

28. PARTICIPATING POLICIES - NOT EVENT

29. PREMIUM DEFICIENCY RESERVES - NOT APPLICABLE

NOTES TO FINANCIAL STATEMENTS

30. RESERVES FOR LIFE CONTRACTS AND ANNUITY CONTRACTS

A. THE COMPANY WAIVED DEDUCTION OF DEFERRED FRACTIONAL PREMIUMS UPON DEATH OF THE INSURED AND HOLDS NET LEVEL PREMIUM RESERVES ON MORTALITY & INTEREST BASES WHICH ARE CONSISTENT WITH THE BASIC POLICIES. THE COMPANY DOES NOT RETURN ANY PORTION OF THE FINAL PREMIUMS FOR PERIODS BEYOND THE TIME OF DEATH. SURRENDER VALUES ARE NOT PROMISED IN EXCESS OF THE LEGALLY COMPUTED RESERVES.

B. ADDITIONAL PREMIUMS ARE CHARGED FOR POLICIES ISSUED ON SUBSTANDARD LIVES ACCORDING TO UNDERWRITING CLASSIFICATION. THE CORRESPONDING RESERVES HELD ON SUCH POLICIES ARE CALCULATED BY COMPUTING THE REGULAR MEANS RESERVE FOR THE PLAN AT RATED AGE AND HOLDING IN ADDITION ONE HALF (1/2) OF THE EXTRA PREMIUM CHARGED FOR THE YEAR.

C. THE AMOUNT OF INSURANCE IN FORCE FOR WHICH THE GROSS PREMIUM ARE LESS THAN THE NET PREMIUMS ACCORDING TO THE STANDARDS OF VALUATION SET BY THE COMMISSIONER OF INSURANCE IS NOT READILY AVAILABLE, ALTHOUGH SUCH AMOUNT IS CONSIDERED BY MANAGEMENT TO BE NOT SIGNIFICANT.

31. ANALYSIS OF ANNUITY ACTUARIAL RESERVES AND DEPOSITS TYPE LIABILITIES BY WITHSDRAWAL CHARACTERISTICS

THE TOTAL ANNUITY RESERVE FOR THE YEAR ENDED AS DEC 31, 2017 IS FOR THE AMOUNT OF \$ 1,132,919.

32. PREMIUMS AND ANNUITY CONSIDERATIONS DEFERRED AND UNCOLLECTED

DEFERRED AND UNCOLLECTED LIFE INSURANCE PREMIUMS AND ANNUITY CONSIDERATIONS AS OF DEC 31, 2017 WERE AS FOLLOWS:

TYPE	GROSS	LOADING	NET OF LOADING
ORDINARY & ANNUITY-NEW BUSINESS	18,050	6,950	11,100
ORDINARY-RENEWAL	306,846	92,337	214,509
CREDIT LIFE	0	0	0
GROUP LIFE	0	0	0
TOTAL.....	<u>324,896</u>	<u>99,288</u>	<u>225,609</u>

33. SEPARATE ACCOUNTS - NOT APPLICABLE

34. LOSS/CLAIM ADJUSTMENTS EXPENSES - NOT APPLICABLE

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? Yes [X] No []
 If yes, complete Schedule Y, Parts 1, 1A and 2.
- 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? PUERTO RICO.....
- 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.12/31/2012
- 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.12/31/2012
- 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).12/31/2012
- 3.4 By what department or departments? ACCOUNTING, FINANCE & OPERATIONS DEPARTMENTS.....
- 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 [X] No [] N/A []
- 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 [] No [X]
- 4.12 renewals? Yes [] No [X]
- 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 the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 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,0.0
- 7.21 State the percentage of foreign control
- 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
.....
.....
.....
.....
.....

GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
- 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 the 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
- 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?
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
 - 12.11 Name of real estate holding company
 - 12.12 Number of parcels involved0
 - 12.13 Total book/adjusted carrying value \$.....
- 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 [X] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No [X]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A [X]
- 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 [X] 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 [X]
- 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 [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES

- 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 [X]
- 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 subordinate committee thereof? Yes [X] 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 [X] 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 [X] 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 [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers \$.....
 - 20.12 To stockholders not officers \$.....
 - 20.13 Trustees, supreme or grand (Fraternal only) \$.....
- 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 \$.....
 - 20.22 To stockholders not officers \$.....
 - 20.23 Trustees, supreme or grand (Fraternal only) \$.....
- 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 reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others \$.....
 - 21.22 Borrowed from others \$.....
 - 21.23 Leased from others \$.....
 - 21.24 Other \$.....
- 22.1 Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$.....
 - 22.22 Amount paid as expenses \$.....
 - 22.23 Other amounts paid \$.....
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....1,275,443

INVESTMENT

- 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 [X] 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 [] NA [X]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$.....
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$.....
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [X] NA []
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [X] NA []
- 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 [X] NA []
- 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

GENERAL INTERROGATORIES

- 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 currently 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 \$
 - 25.22 Subject to reverse repurchase agreements \$
 - 25.23 Subject to dollar repurchase agreements \$
 - 25.24 Subject to reverse dollar repurchase agreements \$
 - 25.25 Placed under option agreements \$
 - 25.26 Letter stock or securities restricted as to sale – excluding FHLB Capital Stock \$
 - 25.27 FHLB Capital Stock \$
 - 25.28 On deposit with states \$
 - 25.29 On deposit with other regulatory bodies \$
 - 25.30 Pledged as collateral – excluding collateral pledged to an FHLB \$
 - 25.31 Pledged as collateral to FHLB – including assets backing funding agreements \$
 - 25.32 Other \$

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No []
- 26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. Yes [] No [] N/A []
- 27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No []
- 27.2 If yes, state the amount thereof at December 31 of the current year. \$
28. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [] No []

28.01 For 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
MERRILL LYNCH.....	GLOBAL WEALTH MANAGEMENT MILLENIUM PARK PLAZA #15 SECOND ST. SUITE 210 METRO OFFICE PARK GUAYNABO PR 00968-1741.....
SANTANDER SECURITIES.....	207 PONCE DE LEON AVE 4TH FLOOR SAN JUAN PR 00917-1818.....
CITIBANK.....	PO BOX 70301 SAN JUAN PR 00918.....
CETERA ADVISOR NETWORKS LLC.....	PO BOX 366281 SAN JUAN PR 00936-6281.....
GRUPO GUAYACAN.....	#268 MUNOZ RIVERA SUITE 1004 SAN JUAN PR 00918.....
ATLAS FUND C/O GEMINI FUND SERVICES.....	PO BOX 541150 OMAHA, NE 68154-9150.....
PARITER WEALTH MANAGEMENT GROUP.....	243 ROAD #2 GUAYNABO PR 00966-1915.....
PARLIAMENT CAPITAL.....	254 MUÑOZ RIVERA AVE SAN JUAN PR 00918.....

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

GENERAL INTERROGATORIES

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
MANUEL DIAZ , CPA - SANTANDER SECURITIES.....	U.....
JOEL DAVILA & RICARDO VAZQUEZ MERRYL LYNCH.....	U.....

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

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		0

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds.....	44,744,897	44,900,125	155,228
30.2 Preferred Stocks.....	24,014	24,014	.0
30.3 Totals	44,768,911	44,924,139	155,228

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

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

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 [X] 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:

GENERAL INTERROGATORIES

33. By self-designating 5*GI securities, the reporting entity is certifying the following elements of each self-designated 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 [] No []

OTHER

34.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$75,238

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 Name	2 Amount Paid
.....	\$
.....	\$
.....	\$

35.1 Amount of payments for legal expenses, if any? \$848,996

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.

1 Name	2 Amount Paid
JULIO D VAZQUEZ, ESQUIRE.....	\$220,353

36.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$0

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.

1 Name	2 Amount Paid
.....	\$
.....	\$
.....	\$

GENERAL INTERROGATORIES

PART 2 - LIFE 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? \$.....
- 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. \$.....
- 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		2
		Current Year		Prior Year
2.1	Premium Numerator	\$0		\$0
2.2	Premium Denominator	\$30,051,539		\$30,668,315
2.3	Premium Ratio (2.1/2.2)	.....0.000		.....0.000
2.4	Reserve Numerator	\$6,317,805		\$5,568,954
2.5	Reserve Denominator	\$33,227,428		\$30,359,108
2.6	Reserve Ratio (2.4/2.5)	.....0.190		.....0.183

- 3.1 Does this reporting entity have Separate Accounts? Yes [] No [X]
- 3.2 If yes, has a Separate Accounts statement been filed with this Department? Yes [] No [] N/A [X]
- 3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? \$.....
- 3.4 State the authority under which Separate Accounts are maintained:

- 3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes [] No [X]
- 3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? Yes [] No [X]
- 3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)? \$.....
- 4.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? Yes [] No [X]
- 4.2 Net reimbursement of such expenses between reporting entities:
- 4.21 Paid \$
- 4.22 Received \$
- 5.1 Does the reporting entity write any guaranteed interest contracts? Yes [] No [X]
- 5.2 If yes, what amount pertaining to these items is included in:
- 5.21 Page 3, Line 1 \$
- 5.22 Page 4, Line 1 \$
6. For stock reporting entities only:
- 6.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: \$.....
7. Total dividends paid stockholders since organization of the reporting entity:
- 7.11 Cash \$
- 7.12 Stock \$

GENERAL INTERROGATORIES

8.1 Does the reporting entity reinsure any Workers' Compensation Carve-Out business defined as: Yes [] No [X]
 Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

8.2 If yes, has the reporting entity completed the *Workers Compensation Carve-Out Supplement* to the Annual Statement? Yes [] No [X]

8.3 If 8.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

		1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
8.31	Earned premium.....	.....	.....	.....
8.32	Paid claims.....	.....	.....	.....
8.33	Claim liability and reserve (beginning of year).....	.....	.....	.....
8.34	Claim liability and reserve (end of year).....	.....	.....	.....
8.35	Incurred claims.....	.....	.....	.....

8.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 8.31 and 8.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability And Reserve
8.41	<\$25,000	.....	.....
8.42	\$25,000 – 99,999	.....	.....
8.43	\$100,000 – 249,999	.....	.....
8.44	\$250,000 – 999,999	.....	.....
8.45	\$1,000,000 or more	.....	.....

8.5 What portion of earned premium reported in 8.31, Column 1 was assumed from pools? \$.....

9. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

9.1 Amount of loss reserves established by these annuities during the current year: \$.....

9.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1 P&C Insurance Company and Location	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
.....
.....
.....
.....

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

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

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

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

GENERAL INTERROGATORIES

11.1 Are any of the captive affiliates reported on Schedule S, Part 3, as authorized reinsurers? Yes [] No [X] N/A []

11.2 If the answer to 11.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

12. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

12.1 Direct Premium Written.....	\$.....	674,233
12.2 Total Incurred Claims	\$.....	36,662
12.3 Number of Covered Lives		1,570

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.
\$000 omitted for amounts of life insurance

	1 2017	2 2016	3 2015	4 2014	5 2013
Life Insurance in Force (Exhibit of Life Insurance)					
1. Ordinary-whole life and endowment (Line 34, Col. 4)	675,955	824,914	873,842	863,682	897,300
2. Ordinary-term (Line 21, Col. 4, less Line 34, Col. 4)	28,885	28,778	27,391	25,546	25,896
3. Credit life (Line 21, Col. 6)	1	2	65	241	2,138
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)	0	32,398	32,135	26,263	51,299
5. Industrial (Line 21, Col. 2)	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)	0	0	0	0	0
7. Total (Line 21, Col. 10)	704,841	886,092	933,433	915,732	976,633
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated		xxx	xxx	xxx	xxx
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary-whole life and endowment (Line 34, Col. 2)	133,710	161,311	222,427	11,250	15,550
9. Ordinary-term (Line 2, Col. 4, less Line 34, Col. 2)	3,319	6,686	5,710	5,475	6,996
10. Credit life (Line 2, Col. 6)	0	0	0	0	0
11. Group (Line 2, Col. 9)	0	0	0	2,300	2,727
12. Industrial (Line 2, Col. 2)	0	0	0	0	0
13. Total (Line 2, Col. 10)	137,029	167,997	228,137	19,025	25,273
Premium Income - Lines of Business (Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2)	0	0	0	0	0
15.1 Ordinary life insurance (Line 20.4, Col. 3)	2,019,706	1,926,999	2,060,703	2,213,209	2,109,490
15.2 Ordinary individual annuities (Line 20.4, Col. 4)	0	32,717	20,138	23,821	43,972
16. Credit life, (group and individual) (Line 20.4, Col. 5)	0	0	0	(221)	(7,308)
17.1 Group life insurance (Line 20.4, Col. 6)	25,939	49,869	64,048	98,933	106,743
17.2 Group annuities (Line 20.4, Col. 7)	0	0	0	0	0
18.1A & H-group (Line 20.4, Col. 8)	0	0	0	0	0
18.2A & H-credit (group and individual) (Line 20.4, Col. 9)	0	0	0	0	0
18.3A & H-other (Line 20.4, Col. 10)	28,005,894	28,658,730	28,239,040	27,451,607	27,560,320
19. Aggregate of all other lines of business (Line 20.4, Col. 11)	0	0	0	0	0
20. Total	30,051,539	30,668,315	30,383,929	29,787,349	29,813,217
Balance Sheet (Pages 2 and 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	72,500,944	70,576,913	67,396,765	65,114,148	58,903,955
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26)	39,157,073	37,730,411	32,150,427	31,379,367	29,449,917
23. Aggregate life reserves (Page 3, Line 1)	4,025,022	3,813,436	3,901,655	3,594,307	3,244,012
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1		xxx	xxx	xxx	xxx
24. Aggregate A & H reserves (Page 3, Line 2)	22,939,588	20,950,958	18,366,850	15,788,422	13,854,602
25. Deposit-type contract funds (Page 3, Line 3)	0	0	0	0	0
26. Asset valuation reserve (Page 3, Line 24.01)	1,427,502	681,274	674,720	556,713	435,000
27. Capital (Page 3, Lines 29 & 30)	2,500,000	2,500,000	2,500,000	2,500,000	2,500,000
28. Surplus (Page 3, Line 37)	30,843,871	30,346,502	32,746,338	31,234,781	26,954,038
Cash Flow (Page 5)					
29. Net cash from operations (Line 11)	6,241,925	5,073,461	5,818,287	6,656,707	8,364,126
Risk-Based Capital Analysis					
30. Total adjusted capital	34,771,373	33,527,776	35,921,058	34,291,494	29,889,038
31. Authorized control level risk-based capital	1,399,793	1,506,106	1,358,797	1,179,677	1,160,316
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No./Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1)	62.9	65.5	54.5	57.4	58.6
33. Stocks (Lines 2.1 and 2.2)	13.6	9.2	1.6	1.0	1.2
34. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3)	10.2	10.2	10.5	10.1	8.3
36. Cash, cash equivalents and short-term investments (Line 5)	11.0	13.8	33.1	31.2	31.8
37. Contract loans (Line 6)	0.2	0.2	0.3	0.3	0.1
38. Derivatives (Page 2, Line 7)	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8)	2.1	1.1	0.0	0.0	0.0
40. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
42. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
43. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2017	2 2016	3 2015	4 2014	5 2013
Investments in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
45. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
46. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
48. Affiliated mortgage loans on real estate	0	0	0	0	0
49. All other affiliated	0	0	0	0	0
50. Total of above Lines 44 to 49	0	0	0	0	0
51. Total investment in parent included in Lines 44 to 49 above	0	0	0	0	0
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2)	2,728,527	2,067,305	1,960,945	2,739,414	4,326,337
53. Total admitted assets (Page 2, Line 28, Col. 3)	72,500,944	70,576,913	67,396,765	65,114,148	58,903,955
Investment Data					
54. Net investment income (Exhibit of Net Investment Income)	1,741,002	1,442,480	1,449,665	1,483,201	1,084,414
55. Realized capital gains (losses) (Page 4, Line 34, Column 1)	(1,485,086)	36,321	(293,086)	128,144	(73,900)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1)	1,222,930	(390,049)	(613,177)	(124,164)	74,403
57. Total of above Lines 54, 55 and 56	1,478,846	1,088,752	543,402	1,487,181	1,084,917
Benefits and Reserve Increase (Page 6)					
58. Total contract benefits-life (Lines 10, 11, 12, 13, 14 and 15, Col.1 minus Lines 10, 11, 12, 13, 14, and 15, Cols. 9, 10 and 11)	38,240	350,956	263,851	190,207	237,578
59. Total contract benefits-A & H (Lines 13 & 14, Cols. 9, 10 & 11)	9,292,408	9,830,469	7,894,081	7,370,636	8,307,599
60. Increase in life reserves-other than group and annuities (Line 19, Cols. 2 & 3)	149,114	82,131	224,985	275,237	79,299
61. Increase in A & H reserves (Line 19, Cols. 9, 10 & 11)	1,988,630	2,584,107	2,578,429	1,933,820	712,963
62. Dividends to policyholders (Line 30, Col. 1)	0	0	0	0	0
Operating Percentages					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col.1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.00	53.4	57.4	56.7	54.5	55.4
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Column 4, Lines 14 & 15) / ½ (Exhibit of Life Insurance, Column 4, Lines 1 & 21)] x 100.00	0.0	0.0	0.0	0.0	0.0
65. A & H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2)	40.6	43.3	37.2	33.6	32.7
66. A & H cost containment percent (Schedule H, Part 1, Line 4, Col. 2)	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Col. 2)	55.7	59.0	59.4	55.9	58.2
A & H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims-group health (Sch. H, Part 3, Line 3.1, Col. 2)	0	0	0	0	0
69. Prior years' claim liability and reserve-group health (Sch. H, Part 3, Line 3.2, Col. 2)	0	0	0	0	0
70. Incurred losses on prior years' claims-health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2)	5,538,803	5,198,858	5,759,247	5,977,260	5,515,630
71. Prior years' claim liability and reserve-health other than group (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 2)	5,565,000	5,240,329	5,906,436	6,657,848	5,956,137
Net Gains From Operations After Federal Income Taxes by Lines of Business (Page 6, Line 33)					
72. Industrial life (Col. 2)	0	0	0	0	0
73. Ordinary-life (Col. 3)	879,322	624,258	611,204	832,592	1,217,323
74. Ordinary-individual annuities (Col. 4)	(57,968)	58,835	9,602	20,845	7,610
75. Ordinary-supplementary contracts (Col. 5)	0	0	0	0	0
76. Credit life (Col. 6)	13	66	2,689	3,096	33,692
77. Group life (Col. 7)	(15,844)	7	22,908	26,068	73,329
78. Group annuities (Col. 8)	0	0	0	0	0
79. A & H-group (Col. 9)	0	0	0	0	0
80. A & H-credit (Col. 10)	0	17	97	285	1,109
81. A & H-other (Col. 11)	2,561,451	483,623	4,374,712	3,582,657	4,751,879
82. Aggregate of all other lines of business (Col. 12)	0	0	0	0	0
83. Total (Col. 1)	3,366,974	1,166,806	5,021,212	4,465,543	6,084,942

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

If no, please explain

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	7 Number of		9 Amount of Insurance	
							7 Policies	8 Certificates		
1. In force end of prior year	0	0	51,596	853,692	2	2	4	413	32,398	886,092
2. Issued during year	0	0	2,078	137,029		0			0	137,029
3. Reinsurance assumed										0
4. Revived during year										0
5. Increased during year (net)										0
6. Subtotals, Lines 2 to 5	0	0	2,078	137,029	0	0	0	0	0	137,029
7. Additions by dividends during year	XXX		XXX		XXX		XXX	XXX		0
8. Aggregate write-ins for increases	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 and 6 to 8)	0	0	53,674	990,721	2	2	4	413	32,398	1,023,121
Deductions during year:										
10. Death			17	84			XXX	5	81	165
11. Maturity							XXX			0
12. Disability							XXX			0
13. Expiry										0
14. Surrender										0
15. Lapse										0
16. Conversion										0
17. Decreased (net)			10,442	285,797	1	1	XXX	408	32,317	318,115
18. Reinsurance										0
19. Aggregate write-ins for decreases	0	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19)	0	0	10,459	285,881	1	1	4	413	32,398	318,280
21. In force end of year (Line 9 minus Line 20)	0	0	43,215	704,840	1	1	0	0	0	704,841
22. Reinsurance ceded end of year	XXX		XXX	240,951	XXX	0	XXX	XXX	0	240,951
23. Line 21 minus Line 22	XXX	0	XXX	463,889	XXX	(a)	1	XXX	0	463,890
DETAILS OF WRITE-INS										
0801.										
0802.										
0803.										
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0	0	0	0	0	0	0	0	0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above)	0	0	0	0	0	0	0	0	0	0
1901.										
1902.										
1903.										
1998. Summary of remaining write-ins for Line 19 from overflow page	0	0	0	0	0	0	0	0	0	0
1999. Totals (Lines 1901 through 1903 plus 1998) (Line 19 above)	0	0	0	0	0	0	0	0	0	0

(a) Group \$ 0 ; Individual \$ 1

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance) (Continued)

ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends			XXX	
25. Other paid-up insurance				
26. Debit ordinary insurance	XXX	XXX		

ADDITIONAL INFORMATION ON ORDINARY INSURANCE

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
Term Insurance Excluding Extended Term Insurance				
27. Term policies-decreasing	40	3,184	236	19,948
28. Term policies-other	31	135	647	8,937
29. Other term insurance-decreasing	XXX		XXX	
30. Other term insurance	XXX		XXX	
31. Totals, (Lines 27 to 30)	71	3,319	883	28,885
Reconciliation to Lines 2 and 21:				
32. Term additions	XXX		XXX	
33. Totals, extended term insurance	XXX	XXX		
34. Totals, whole life and endowment	2,007	133,710	42,332	675,955
35. Totals (Lines 31 to 34)	2,078	137,029	43,215	704,840

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	Issued During Year (included in Line 2)		In Force End of Year (included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial				
37. Ordinary		137,029		704,840
38. Credit Life (Group and Individual)				1
39. Group				0
40. Totals (Lines 36 to 39)	0	137,029	0	704,841

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies	XXX	0	XXX	0
42. Number in force end of year if the number under shared groups is counted on a pro-rata basis		XXX		XXX
43. Federal Employees' Group Life Insurance included in Line 21				
44. Servicemen's Group Life Insurance included in Line 21				
45. Group Permanent Insurance included in Line 21				0

ADDITIONAL ACCIDENTAL DEATH BENEFITS

46. Amount of additional accidental death benefits in force end of year under ordinary policies	647,095
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BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc. policies and riders included above	NONE
47.1	
47.2	

POLICIES WITH DISABILITY PROVISIONS

Disability Provision	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificate s	8 Amount of Insurance
48. Waiver of Premium			19	2,825				
49. Disability Income								
50. Extended Benefits			XXX	XXX				
51. Other								
52. Total	0 (a)	0	19 (a)	2,825	0 (a)	0	0 (a)	0

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES

SUPPLEMENTARY CONTRACTS

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year	0	0	0	0
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Total (Lines 1 to 4)	0	0	0	0
Deductions during year:				
6. Decreased (net)				
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)	0	0	0	0
9. In force end of year	0	0	0	0
10. Amount on deposit		(a)		(a)
11. Income now payable				
12. Amount of income payable	(a)	(a)	(a)	(a)

NONE

ANNUITIES

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year	0	83	0	0
2. Issued during year				
3. Reinsurance assumed				
4. Increased during year (net)				
5. Totals (Lines 1 to 4)	0	83	0	0
Deductions during year:				
6. Decreased (net)		8		
7. Reinsurance ceded				
8. Totals (Lines 6 and 7)	0	8	0	0
9. In force end of year	0	75	0	0
Income now payable:				
10. Amount of income payable	(a)	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance	XXX	(a)	XXX	(a)
Deferred not fully paid:				
12. Account balance	XXX	(a)	XXX	(a)

ACCIDENT AND HEALTH INSURANCE

	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year	0	0	0	0	349,504	28,702,293
2. Issued during year					47,837	4,510,133
3. Reinsurance assumed						
4. Increased during year (net)		XXX		XXX		XXX
5. Totals (Lines 1 to 4)	0	XXX	0	XXX	397,341	XXX
Deductions during year:						
6. Conversions		XXX	XXX	XXX	XXX	XXX
7. Decreased (net)		XXX		XXX	98,095	XXX
8. Reinsurance ceded		XXX		XXX		XXX
9. Totals (Lines 6 to 8)	0	XXX	0	XXX	98,095	XXX
10. In force end of year	0	(a)	0	(a)	299,246	(a) 27,755,874

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

	1	2
	Deposit Funds Contracts	Dividend Accumulations Contracts
1. In force end of prior year	0	0
2. Issued during year		
3. Reinsurance assumed		
4. Increased during year (net)		
5. Totals (Lines 1 to 4)	0	0
Deductions during year:		
6. Decreased (net)		
7. Reinsurance ceded		
8. Totals (Lines 6 and 7)	0	0
9. In force end of year	0	0
10. Amount of account balance	(a)	(a)

NONE

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE TRANS-OCEANIC LIFE INSURANCE COMPANY

SCHEDULE T—PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

States, Etc.	1	Direct Business Only						
		Life Contracts		4	5	6	7	
		2	3					
	Active Status	Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations	Total Columns 2 through 5	Deposit - Type Contracts	
1. Alabama	AL	N	.0	.0	.0	.0	.0	.0
2. Alaska	AK	N	.0	.0	.0	.0	.0	.0
3. Arizona	AZ	N	.0	.0	.0	.0	.0	.0
4. Arkansas	AR	N	.0	.0	.0	.0	.0	.0
5. California	CA	N	.0	.0	.0	.0	.0	.0
6. Colorado	CO	N	.0	.0	.0	.0	.0	.0
7. Connecticut	CT	N	.0	.0	.0	.0	.0	.0
8. Delaware	DE	N	.0	.0	.0	.0	.0	.0
9. District of Columbia	DC	N	.0	.0	.0	.0	.0	.0
10. Florida	FL	L	.0	.0	2,830	.0	2,830	.0
11. Georgia	GA	N	.0	.0	.0	.0	.0	.0
12. Hawaii	HI	N	.0	.0	.0	.0	.0	.0
13. Idaho	ID	N	.0	.0	.0	.0	.0	.0
14. Illinois	IL	N	.0	.0	.0	.0	.0	.0
15. Indiana	IN	N	.0	.0	.0	.0	.0	.0
16. Iowa	IA	N	.0	.0	.0	.0	.0	.0
17. Kansas	KS	N	.0	.0	.0	.0	.0	.0
18. Kentucky	KY	N	.0	.0	.0	.0	.0	.0
19. Louisiana	LA	N	.0	.0	.0	.0	.0	.0
20. Maine	ME	N	.0	.0	.0	.0	.0	.0
21. Maryland	MD	N	.0	.0	.0	.0	.0	.0
22. Massachusetts	MA	N	.0	.0	.0	.0	.0	.0
23. Michigan	MI	N	.0	.0	.0	.0	.0	.0
24. Minnesota	MN	N	.0	.0	.0	.0	.0	.0
25. Mississippi	MS	N	.0	.0	.0	.0	.0	.0
26. Missouri	MO	N	.0	.0	.0	.0	.0	.0
27. Montana	MT	N	.0	.0	.0	.0	.0	.0
28. Nebraska	NE	N	.0	.0	.0	.0	.0	.0
29. Nevada	NV	N	.0	.0	.0	.0	.0	.0
30. New Hampshire	NH	N	.0	.0	.0	.0	.0	.0
31. New Jersey	NJ	N	.0	.0	.0	.0	.0	.0
32. New Mexico	NM	N	.0	.0	.0	.0	.0	.0
33. New York	NY	N	.0	.0	.0	.0	.0	.0
34. North Carolina	NC	N	.0	.0	.0	.0	.0	.0
35. North Dakota	ND	N	.0	.0	.0	.0	.0	.0
36. Ohio	OH	N	.0	.0	.0	.0	.0	.0
37. Oklahoma	OK	N	.0	.0	.0	.0	.0	.0
38. Oregon	OR	N	.0	.0	.0	.0	.0	.0
39. Pennsylvania	PA	N	.0	.0	.0	.0	.0	.0
40. Rhode Island	RI	N	.0	.0	.0	.0	.0	.0
41. South Carolina	SC	N	.0	.0	.0	.0	.0	.0
42. South Dakota	SD	N	.0	.0	.0	.0	.0	.0
43. Tennessee	TN	N	.0	.0	.0	.0	.0	.0
44. Texas	TX	N	.0	.0	.0	.0	.0	.0
45. Utah	UT	N	.0	.0	.0	.0	.0	.0
46. Vermont	VT	N	.0	.0	.0	.0	.0	.0
47. Virginia	VA	N	.0	.0	.0	.0	.0	.0
48. Washington	WA	N	.0	.0	.0	.0	.0	.0
49. West Virginia	WV	N	.0	.0	.0	.0	.0	.0
50. Wisconsin	WI	N	.0	.0	.0	.0	.0	.0
51. Wyoming	WY	N	.0	.0	.0	.0	.0	.0
52. American Samoa	AS	N	.0	.0	.0	.0	.0	.0
53. Guam	GU	N	.0	.0	.0	.0	.0	.0
54. Puerto Rico	PR	L	2,298,344	.0	27,738,600	.0	30,036,944	.0
55. US Virgin Islands	VI	L	.0	.0	14,444	.0	14,444	.0
56. Northern Mariana Islands	MP	N	.0	.0	.0	.0	.0	.0
57. Canada	CAN	N	.0	.0	.0	.0	.0	.0
58. Aggregate Other Alien	OT	XXX	.0	.0	.0	.0	.0	.0
59. Subtotal	(a)	3	2,298,344	.0	27,755,874	.0	30,054,218	.0
90. Reporting entity contributions for employee benefits plans	XXX						.0	
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX						.0	
92. Dividends or refunds applied to shorten endowment or premium paying period	XXX						.0	
93. Premium or annuity considerations waived under disability or other contract provisions	XXX						.0	
94. Aggregate other amounts not allocable by State	XXX		.0	.0	.0	.0	.0	.0
95. Totals (Direct Business)	XXX		2,298,344	.0	27,755,874	.0	30,054,218	.0
96. Plus reinsurance assumed	XXX						.0	
97. Totals (All Business)	XXX		2,298,344	.0	27,755,874	.0	30,054,218	.0
98. Less reinsurance ceded	XXX		254,316				254,316	
99. Totals (All Business) less Reinsurance Ceded	XXX		2,044,028	0	(b) 27,755,874	0	29,799,902	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
58999. Total (Lines 58001 through 58003 + 58998)(Line 58 above)	XXX		0	0	0	0	0	0
9401.	XXX						.0	
9402.	XXX						.0	
9403.	XXX						.0	
9498. Summary of remaining write-ins for Line 94 from overflow page	XXX		.0	.0	.0	.0	.0	.0
9499. Total (Lines 9401 through 9403 + 9498)(Line 94 above)	XXX		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; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, etc., of premiums and annuity considerations

UNDERWRITING FACTORS, FOR EXAMPLE AGE, SEX, HEALTH FACTORS, DRIVING RECORD, HISTORY OF SUBSTANCE ABUSE, CITIZENSHIP ETC.

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

(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9 and 10, or with Schedule H, Part 1, Column 1, Line 1 indicate which; Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9 and 10.

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

TRANS-OCEANIC GROUP INC
66-0760550 Puerto Rico 100%

|

Trans- Oceanic Life Insurance Company
66-023-5829 Puerto Rico 69523

VICTORY INSURANCE AGENCY
66-0757208 Puerto Rico

TUCHMAN TRAVEL & LEISURE INC.
66-0760552 Puerto Rico

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During the Year	7
Analysis of Operations by Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 – General Expenses	11
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 – Dividends or Refunds	11
Exhibit 5 – Aggregate Reserve for Life Contracts	12
Exhibit 5 – Interrogatories	13
Exhibit 5A – Changes in Bases of Valuation During The Year	13
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 – Deposit-Type Contracts	15
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes to Financial Statements	19
Overflow Page for Write-Ins	55
Schedule A – Part 1	E01
Schedule A – Part 2	E02

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17
Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	SI12
Schedule DB – Part C – Section 2	SI13
Schedule DB – Part D – Section 1	E22
Schedule DB – Part D – Section 2	E23
Schedule DB – Verification	SI14
Schedule DL – Part 1	E24
Schedule DL – Part 2	E25
Schedule E – Part 1 – Cash	E26
Schedule E – Part 2 – Cash Equivalents	E27
Schedule E – Part 3 – Special Deposits	E28

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule E – Part 2 – Verification Between Years	SI15
Schedule F	36
Schedule H – Accident and Health Exhibit – Part 1	37
Schedule H – Part 2, Part 3 and Part 4	38
Schedule H – Part 5 – Health Claims	39
Schedule S – Part 1 – Section 1	40
Schedule S – Part 1 – Section 2	41
Schedule S – Part 2	42
Schedule S – Part 3 – Section 1	43
Schedule S – Part 3 – Section 2	44
Schedule S – Part 4	45
Schedule S – Part 5	46
Schedule S – Part 6	47
Schedule S – Part 7	48
Schedule T – Part 2 Interstate Compact	50
Schedule T – Premiums and Annuity Considerations	49
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule Y – Part 1A – Detail of Insurance for Holding Company System	52
Schedule Y – Part 2 – Summary of Insurer’s Transactions With Any Affiliates	53
Summary Investment Schedule	SI01
Summary of Operations	4
Supplemental Exhibits and Schedules Interrogatories	54

