



ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2019
 OF THE CONDITION AND AFFAIRS OF THE
Antilles Insurance Company

NAIC Group Code 0000, _____, NAIC Company Code 10308 Employer's ID Number 984207369
(Current Period) (Prior Period)

Organized under the Laws of Commonwealth of Puerto Rico, State of Domicile or Port of Entry Puerto Rico

Country of Domicile US

Incorporated/Organized October 8, 1968 Commenced Business January 1, 1969

Statutory Home Office 500 de la Tanca Street PH, San Juan, Puerto Rico, PR 00901
(Street and Number, City or Town, State, Country and Zip Code)

Main Administrative Office 500 de la Tanca Street, San Juan, Puerto Rico 00901 787-474-4900
(Street and Number, City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address PO Box 9023507, San Juan, Puerto Rico 00902-3507
(Street and Number or P. O. Box, City or Town, State, Country and Zip Code)

Primary Location of Books and Records 500 de la Tanca Street, San Juan, Puerto Rico 00901
787-474-4900
(Street and Number, City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.anglo-antilles.com

Statutory Statement Contact Roberto F Fortuno 787-474-4900
(Name) (Area Code) (Telephone Number) (Extension)
rfortuno@antillesinsurance.com 787-474-4925
(E-Mail Address) (Fax Number)

OFFICERS

Jaime J Gonzalez (President)
 Roberto F Fortuno (Treasurer)

OTHER OFFICERS

Domingo Picorelli (Senior Vice President)
 Roberto J Lopez (First Vice President)
 Patrick Aleman (Vice President)
 Fermin P Guerra (Controller)

DIRECTORS OR TRUSTEES

Jaime J Gonzalez
 Roberto F Fortuno
 Maria Amelia Ruiz
 Herman W Colberg
 Juan B Zamora
 Alberto E Gonzalez
 Domingo Picorelli
 Carlos R Rios
 Eduardo J Ramos
 Jorge R Gonzalez

State of Puerto Rico }
 County of _____ } SS

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions there 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.

 Jaime J Gonzalez
 President
 Subscribed and sworn to before me this _____ day of _____ 2020

 Roberto F Fortuno
 Treasurer

 Iris J Medina
 Assistant Secretary

- a. Is this an original filing? Yes () No (X)
- b. If no: 1. State the amendment number 1
2. Date filed April 16, 2020
3. Number of pages attached _____

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)	35,151,687		35,151,687	35,412,123
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	14,958,054		14,958,054	10,868,033
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	1,809,935		1,809,935	1,782,173
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ 11,487,794, Schedule E-Part 1), cash equivalents (\$, Schedule E-Part 2) and short-term investments (\$ 1,084,484, Schedule DA)	12,572,278		12,572,278	15,370,960
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)	1,685,000		1,685,000	
9. Receivables for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	66,176,954		66,176,954	63,433,289
13. Title plants less \$ charged off (for Title Insurers only)				
14. Investment income due and accrued	277,063		277,063	287,778
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	13,930,158	792,500	13,137,658	7,251,632
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	275,528		275,528	756,318
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset	1,084,472		1,084,472	
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	49,341		49,341	18,469
21. Furniture and equipment, including health care delivery assets (\$)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	371,114		371,114	2,488,496
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other-than-invested assets	157,474		157,474	374,702
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	82,322,104	792,500	81,529,604	74,610,684
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	82,322,104	792,500	81,529,604	74,610,684
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501. Salvage receivable				374,702
2502. Other assets				
2503. Prepaid income taxes	157,474		157,474	
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	157,474		157,474	374,702

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	4,628,000	4,142,282
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	1,059,395	727,596
4. Commissions payable, contingent commissions and other similar charges	376,287	395,121
5. Other expenses (excluding taxes, licenses and fees)	1,788,516	802,474
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	54,372	121,164
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2 Net deferred tax liability		97,295
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 9,312,570 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	17,416,566	13,135,674
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	6,216,874	5,955,810
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14. Amounts withheld or retained by company for account of others	613,822	334,944
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 3 Column 78)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	7,534,272	15,400,355
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	39,688,104	41,112,715
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	39,688,104	41,112,715
29. Aggregate write-ins for special surplus funds	24,949,320	23,028,979
30. Common capital stock	2,800,000	2,800,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	125,000	125,000
35. Unassigned funds (surplus)	13,967,021	7,543,990
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	41,841,341	33,497,969
38. Totals (Page 2, Line 28, Col. 3)	81,529,445	74,610,684
DETAILS OF WRITE-INS		
2501. Advance collection on catastrophe loss reinsurance	7,534,272	15,400,355
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	7,534,272	15,400,355
2901. Statutory Catastrophe Trust Fund	24,949,320	23,028,979
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	24,949,320	23,028,979
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

STATEMENT OF INCOME

UNDERWRITING INCOME	1 Current Year	2 Prior Year
1. Premiums earned (Part 1, Line 35, Column 4)	24,644,672	13,376,807
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7)	2,605,663	1,448,289
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	2,181,549	1,353,837
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	15,885,300	10,925,936
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Lines 2 through 5)	20,672,512	13,728,062
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	3,972,160	(351,255)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	911,692	812,420
10. Net realized capital gains (losses) less capital gains tax of \$	637,486	673,971
11. Net investment gain (loss) (Lines 9 plus 10)	1,549,178	1,486,391
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$, amount charged off \$)		
13. Finance and service charges not included in premiums	178,475	210,658
14. Aggregate write-ins for miscellaneous income		
15. Total other income (Lines 12 through 14)	178,475	210,658
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8+11+15)	5,699,813	1,345,794
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	5,699,813	1,345,794
19. Federal and foreign income taxes incurred	260,000	
20. Net income (Line 18 minus Line 19) (to Line 22)	5,439,813	1,345,794
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	33,497,969	33,871,349
22. Net income (from Line 20)	5,439,813	1,345,794
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	1,682,425	(1,719,174)
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	1,181,767	
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	39,373	
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (Stock Dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in		
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Line 36.1 and Line 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	8,343,378	(373,380)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	41,841,347	33,497,969
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0568. Summary of remaining write-ins for Line 5 from overflow page		
0599. Totals (Line 0501 through Line 0503 plus Line 0598) (Line 5 above)		
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Line 1401 through Line 1403 plus Line 1498) (Line 14 above)		
3701. Surplus adjustment: Transferred to Statutory Catastrophe Trust Fund		
3702. Statutory Catastrophe Trust Fund		
3703. Dividend in kind to Anglo Holding LLC		
3798. Summary of remaining write-ins for Line 37 from overflow page		
3799. Totals (Line 3701 through Line 3703 plus Line 3798) (Line 37 above)		

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	23,339,971	21,130,709
2. Net investment income	1,125,636	997,554
3. Miscellaneous income	178,475	210,658
4. Total (Lines 1 through 3)	24,644,082	22,338,921
5. Benefit and loss related payments	3,488,753	2,043,029
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	14,675,867	13,900,717
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	103,780	
10. Total (Lines 5 through 9)	18,268,400	15,943,746
11. Net cash from operations (Line 4 minus Line 10)	6,375,682	6,395,175
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	15,731,303	4,844,852
12.2 Stocks	4,392,701	10,603,880
12.3 Mortgage loans	504,238	407,886
12.4 Real estate		
12.5 Other invested assets	315,000	
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	20,943,242	15,856,618
13. Cost of investments acquired (long-term only):		
13.1 Bonds	15,256,452	6,415,612
13.2 Stocks	6,580,442	9,784,173
13.3 Mortgage loans	532,000	
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Line 13.1 through Line 13.6)	22,368,894	16,199,785
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(1,425,652)	(343,167)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	(7,748,712)	(5,244,489)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to Line 16.4 minus Line 16.5 plus Line 16.6)	(7,748,712)	(5,244,489)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Lines 11 plus 15 plus 17)	(2,798,682)	807,519
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	15,370,960	14,563,441
19.2 End of year (Line 18 plus Line 19.1)	12,572,278	15,370,960

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

20.0001		
20.0002		
20.0003		
20.0004		
20.0005		
20.0006		
20.0007		
20.0008		
20.0009		
20.0010		

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Col. 6, Part 1B	2 Unearned Premiums December 31 Prior Year- per Col. 3, Last Year's Part 1	3 Unearned Premiums December 31 Current Year- per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1+2-3)
1. Fire	256,231	156,056	176,324	235,963
2. Allied lines	2,315,279	1,286,233	1,418,140	2,183,372
3. Farmowners multiple peril				
4. Homeowners multiple peril	2,317,738	705,667	893,533	2,129,872
5. Commercial multiple peril	17,824,178	8,171,550	11,638,005	14,357,723
6. Mortgage guaranty				
8. Ocean marine	(66,120)	51,701		(14,419)
9. Inland marine	113,893		40,862	73,031
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake	3,020,763	1,589,958	1,809,787	2,800,934
13. Group accident and health				
14. Credit accident and health (group and individual)				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability - occurrence	22,473	28,727	8,037	43,163
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence	196,218	86,953	114,233	168,938
18.2 Products liability - claims-made				
19.1, 19.2 Private passenger auto liability	406,192	175,050	143,030	438,212
19.3, 19.4 Commercial auto liability	749,867	100,871	251,630	599,108
21. Auto physical damage	752,105	349,939	399,934	702,110
22. Aircraft (all perils)				
23. Fidelity		46		46
24. Surety	803,210	367,608	430,584	740,234
26. Burglary and theft	(127)			(127)
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - nonproportional Assumed Property				
32. Reinsurance - nonproportional Assumed Liability				
33. Reinsurance - nonproportional Assumed Financial Lines				
34. Aggregate write-ins for other lines of business	213,663	65,315	92,466	186,512
35. TOTALS	28,925,563	13,135,674	17,416,585	24,644,672
DETAILS OF WRITE-INS				
3401. TITLE	213,663	65,315	92,466	186,512
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	213,663	65,315	92,466	186,512

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A-RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	176,324				176,324
2. Allied lines	1,418,140				1,418,140
3. Farmowners multiple peril					
4. Homeowners multiple peril	893,458	75			893,533
5. Commercial multiple peril	11,638,005				11,638,005
6. Mortgage guaranty					
8. Ocean marine					
9. Inland marine	26,853	14,209			40,862
10. Financial guaranty					
11.1 Medical professional liability - occurrence					
11.2 Medical professional liability - claims-made					
12. Earthquake	1,809,787				1,809,787
13. Group accident and health					
14. Credit accident and health (group and individual)					
15. Other accident and health					
16. Workers' compensation					
17.1 Other liability - occurrence	8,037				8,037
17.2 Other liability - claims-made					
17.3 Excess workers' compensation					
18.1 Products liability - occurrence	114,233				114,233
18.2 Products liability - claims-made					
19.1, 19.2 Private passenger auto liability	143,030				143,030
19.3, 19.4 Commercial auto liability	251,630				251,630
21. Auto physical damage	398,989	945			399,934
22. Aircraft (all perils)					
23. Fidelity					
24. Surety	399,417	31,167			430,584
26. Burglary and theft					
27. Boiler and machinery					
28. Credit					
29. International					
30. Warranty					
31. Reinsurance - Nonproportional Assumed Property					
32. Reinsurance - Nonproportional Assumed Liability					
33. Reinsurance - Nonproportional Assumed Financial Lines					
34. Aggregate write-ins for other lines of business		92,466			92,466
35. TOTALS	17,277,703	138,862			17,416,565
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Lines 35 through 37)					17,416,565
DETAILS OF WRITE-INS					
3401.		92,466			92,466
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page					
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)		92,466			92,466

(a) State here basis of computation used in each case.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B-PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	3,155,250				2,899,019	256,231
2. Allied lines	8,467,550				6,152,271	2,315,279
3. Farmowners multiple peril						
4. Homeowners multiple peril	2,930,194				612,456	2,317,738
5. Commercial multiple peril	31,887,623				14,063,445	17,824,178
6. Mortgage guaranty						
8. Ocean marine	526,325				592,445	(66,120)
9. Inland marine	152,163				38,270	113,893
10. Financial guaranty						
11.1 Medical professional liability - occurrence						
11.2 Medical professional liability - claims-made						
12. Earthquake	7,014,170				3,993,407	3,020,763
13. Group accident and health						
14. Credit accident and health (group and individual)						
15. Other accident and health						
16. Workers' compensation						
17.1 Other liability - occurrence	997,108				974,635	22,473
17.2 Other liability - claims-made						
17.3 Excess workers' compensation						
18.1 Products liability - occurrence	315,296				119,078	196,218
18.2 Products liability - claims-made						
19.1, 19.2 Private passenger auto liability	407,783				1,591	406,192
19.3, 19.4 Commercial auto liability	846,480				96,613	749,867
21. Auto physical damage	960,080				207,975	752,105
22. Aircraft (all perils)						
23. Fidelity						
24. Surety	1,849,215				1,046,005	803,210
26. Burglary and theft	4,056				4,183	(127)
27. Boiler and machinery	517				517	
28. Credit						
29. International						
30. Warranty						
31. Reinsurance - nonproportional assumed property	X X X					
32. Reinsurance - nonproportional assumed liability	X X X					
33. Reinsurance - nonproportional assumed financial lines	X X X					
34. Aggregate write-ins for other lines of business	271,828				58,165	213,663
35. TOTALS	59,785,638				30,860,075	28,925,563
DETAILS OF WRITE-INS						
3401. TITLE	271,828				58,165	213,663
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page						
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	271,828				58,165	213,663

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Antilles Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4+5+6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1+2-3)				
1. Fire	22,931	126,736	96,195	(53,876)	91,000	18,688	77,487	32.8
2. Allied lines	8,082,823	8,236,699				484,350	292,714	13.4
3. Farmowners multiple peril								
4. Homeowners multiple peril	572,783	178,500	394,283		226,000	307,747	312,538	14.7
5. Commercial multiple peril	16,056,669	15,042,028	1,053,671		3,040,000	2,552,942	1,540,729	10.7
6. Mortgage guaranty								
8. Ocean marine	21,554	22,329			225		225	(1.6)
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability - occurrence	12,140	6,308	105,632		(100,000)	1,650	3,982	9.2
17.2 Other liability - claims-made								
17.3 Excess workers' compensation								
18.1 Products liability - occurrence	8,500	(1,800)	10,300		87,000	1,800	95,300	96.5
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability	246,981	(500)	246,461		19,000	48,930	216,331	48.4
19.3, 19.4 Commercial auto liability	326,159	71,784	254,375		288,000	478,859	64,016	10.7
21. Auto physical damage	272,688	(6,008)	280,706		101,000	225,729	156,971	22.2
22. Atrofit (all perils)								
23. Fidelity								
24. Surety	38,640	(482)	39,122		10,000	41,777	7,345	1.0
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance - nonproportional assumed property	XXX							
32. Reinsurance - nonproportional assumed liability	XXX							
33. Reinsurance - nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business					10,000		10,000	5.4
35. TOTALS	26,028,343	23,908,398	2,119,945		4,628,000	4,142,282	2,605,863	10.6
DETAILS OF WRITE-INS								
3401. Special Surplus Funds Hurricane Irma					10,000		10,000	5.4
3402. Special Surplus Funds Hurricane Maria								
3403								
3498. Summary of remaining write-ins for Line 34 from overflow page					10,000		10,000	5.4
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Antilles Insurance Company
UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 + 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excluding Incurred But Not Reported (Cols. 1+2+3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	100,000		100,000	405,000	750,000		244,000	80,130	
2. Allied lines	8,371,000		7,986,000					110,227	
3. Homeowners multiple peril									
4. Homeowners multiple peril	392,000		219,000	173,000	77,000		24,000	30,040	
5. Commercial multiple peril	6,482,000		4,938,000	1,554,000	2,211,000		725,000	3,040,000	
6. Mortgage guaranty								439,579	
7. Ocean marine									
8. Inland marine									
9. Financial guaranty									
10. Medical professional liability - occurrence									
11.1 Medical professional liability - claims-made									
11.2 Medical professional liability - claims-made									
12. Earthquake	36,000		36,000					15,888	
13. Group accident and health									
14. Credit accident and health (group and individual)									
15. Other accident and health									
16. Workers' compensation									
17.1 Other liability - occurrence	576,000		678,000	(102,000)	3,000		1,000	5,007	
17.2 Other liability - claims-made									
17.3 Excess workers' compensation									
18.1 Products liability - occurrence	13,000		28,000	85,000	2,000		87,000		
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability	17,000			17,000	11,000		9,000	308,406	
19.3, 19.4 Commercial auto liability	272,000			272,000	17,000		1,000	14,018	
21. Auto physical damage	79,000		(7,000)	86,000	15,000		101,000	75,099	
22. Atrofit (all perils)									
23. Fidelity									
24. Surety	10,000			10,000	2,000		2,000	1,001	
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional Assumed Property	XXX				XXX				
32. Reinsurance - nonproportional Assumed Liability	XXX				XXX				
33. Reinsurance - nonproportional Assumed Financial Lines	XXX				XXX				
34. Aggregate write-ins for other lines of business	10,000			10,000			10,000		
35. TOTALS	16,468,000		13,922,000	2,546,000	3,088,000		1,006,000	1,659,395	
DETAILS OF WRITE-INS									
3401. TITLE	10,000			10,000					
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 through 3403+3498) (Line 34 above)	10,000			10,000					

(e) Including \$ for present value of its indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	1,560,560			1,560,560
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	823,417			823,417
1.4 Net claim adjustment services (1.1+1.2-1.3)	737,143			737,143
2. Commission and brokerage:				
2.1 Direct excluding contingent		9,251,451		9,251,451
2.2 Reinsurance assumed excluding contingent				
2.3 Reinsurance ceded excluding contingent		799,644		799,644
2.4 Contingent - direct		338,863		338,863
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded				
2.7 Policy and membership fees		336,048		336,048
2.8 Net commission and brokerage (2.1+2.2-2.3+2.4+2.5-2.6+2.7)		9,126,718		9,126,718
3. Allowances to manager and agents	955			955
4. Advertising		919,569		919,569
5. Boards, bureaus and associations		9,503		9,503
6. Surveys and underwriting reports		296,142		296,142
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries				
8.2 Payroll taxes				
9. Employee relations and welfare		1,325		1,325
10. Insurance				
11. Directors' fees		4,090		4,090
12. Travel and travel items				
13. Rent and rent items		657,706		657,706
14. Equipment			10,213	10,213
15. Cost or depreciation of EDP equipment and software		146,934		146,934
16. Printing and stationery	169	26,801		26,970
17. Postage, telephone and telegraph, exchange and express		19,309	289,228	308,537
18. Legal and auditing	72,070	133,862	144,139	350,071
19. Totals (Lines 3 to 18)	73,194	2,215,241	443,580	2,732,015
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$				
20.2 Insurance department licenses and fees		242,354		242,354
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)		3,230		3,230
20.5 Total taxes, licenses and fees (20.1+20.2+20.3+20.4)		245,584		245,584
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses	1,371,212	4,297,757	110,000	5,778,969
25. Total expenses incurred	2,181,549	15,886,300	553,580	(a) 18,620,429
26. Less unpaid expenses - current year				
27. Add unpaid expenses - prior year	727,596	1,157,275		1,884,871
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	2,909,145	17,042,575	553,580	20,505,300
DETAILS OF WRITE-INS				
2401. MISCELLANEOUS	(3,788)	37,677		33,889
2402. MANAGEMENT FEES	1,375,000	4,015,000	110,000	5,500,000
2403. WRITE OFF ACCOUNT BALANCE		245,080		245,080
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 through 2403 plus Line 2498) (Line 24 above)	1,371,212	4,297,757	110,000	5,778,969

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

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a)	
1.1 Bonds exempt from U.S. tax	(a) 868,524	879,239
1.2 Other bonds (unaffiliated)	(a)	
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)		324,024
2.21 Common stocks of affiliates		
3. Mortgage loans	(c) 140,690	140,690
4. Real estate	(d)	
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(e) 1,319	1,319
7. Derivative instruments	(f)	
8. Other invested assets		120,000
9. Aggregate write-ins for investment income		
10. Total gross investment income	1,454,557	1,465,272
11. Investment expenses		(g) 553,580
12. Investment taxes, licenses and fees, excluding federal income taxes		(g)
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Lines 11 through 15)		553,580
17. Net investment income (Line 10 minus Line 16)		911,692
DETAILS OF WRITE-INS		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

(a) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
 (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
 (c) Includes \$ accrual of discount less \$ 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	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)	637,486		637,486	1,682,425	
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)	637,486		637,486	1,682,425	
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

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)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)			
13. Title plants (for Title Insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	792,500	792,500	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other-than-invested assets		39,373	39,373
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	792,500	831,873	39,373
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	792,500	831,873	39,373
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Salvage Receivable		39,373	39,373
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		39,373	39,373

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

A. Accounting Practices

The statutory financial statements of Antilles Insurance Company have been prepared in conformity with accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the Commissioner of Insurance of the Commonwealth of Puerto Rico.

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, principally the accrual for unpaid losses and Loss adjustment expenses, and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

C. Accounting Policies

Direct, assumed and ceded premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by the pro rata method. Reinsurance assumed premiums are based on a report received from the ceding company.

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

In addition, the company uses the following accounting policies:

1. Short-term investments are stated at cost which approximate fair value
2. Bonds are stated at cost and premiums/discounts are amortized using the effective yield (Scientific) method.
3. Common stocks are carried valued at fair value.
4. Preferred stocks are carried at cost, lower of cost or amortized cost, or fair value depending on the assigned credit rating and whether the preferred stock has mandatory sinking fund provisions.
5. Mortgage loans are valued at unpaid principal balance.
6. Loan-backed securities are stated at amortized cost or the lower of amortized cost or fair market value.
7. The Company has no investments in subsidiaries, controlled or affiliated companies.
8. The Company has no ownership interests in joint ventures, partnerships or limited liability companies.
9. The Company has no derivatives.
10. The Company does not anticipate investment income as a factor in the premium deficiency calculation.
11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimate and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined. The company has no environmental remediation exposures.
12. There has been no change in the capitalization policy.
13. The Company has no pharmaceutical rebate receivables.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the Commissioner of Insurance of the Commonwealth of Puerto Rico. Effective January 1, 2001, the Commonwealth of Puerto Rico required that insurance companies domiciled in the Commonwealth of Puerto Rico prepare their statutory basis financial statements in accordance with the NAIC Accounting Practices and Procedures manual subject to any deviations prescribed or permitted by the Commonwealth of Puerto Rico Insurance Commissioner.

Accounting changes adopted to conform to the provisions of the NAIC Accounting Practices and Procedures manual are reported as changes in accounting principles. The cumulative effect of changes in accounting principles is reported as an adjustment to unassigned funds (surplus) in the period of the change in accounting principle. The cumulative effect is the difference between the amount of capital and surplus at the beginning of the year and the amount of capital and surplus that would have been reported at that date if the new accounting principles had been applied retroactively for all prior periods. The Company did not make any changes in accounting principles that would have increased or decreased unassigned funds (surplus) for the quarter ending March 31, 2018.

3. BUSINESS COMBINATIONS AND GOODWILL

-NONE-

4. DISCONTINUED OPERATIONS

-NONE-

5. INVESTMENTS

A. Mortgage Loans

1. The lending rate for mortgage loans during the year 2019 was six (6) percent.
2. During the year 2019 the Company did not reduce interest rates on outstanding mortgages.
3. The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgages was 80.0%.

NOTES TO FINANCIAL STATEMENTS

4. As of year end, the Company held no mortgages with interest more than 180 days past due.
5. There are no taxes, assessments or any amounts advanced not included in the mortgage loan total.
6. Current year impaired loans with a related allowance for credit losses.
-None-
7. Recorded investment for which there is no related allowance for credit loss.
-None-
8. Average recorded investment in the impaired loans.
-None-
9. Interest income recognized during the period the loans were impaired.
-None-
10. Amount of interest income recognized on a cash basis during the period the loans were impaired.
-None-
11. The Company has no credit loss.
12. The Company has no impaired loans, cash receipts are deposited daily and reconciled with invoices.

B. Debt Restructuring

- NONE-

C. Reverse Mortgages

-NONE-

D. Loan-Backed Securities

-NONE-

E. Repurchase Agreements and/or Securities Lending

-NONE-

F. Real Estate

-NONE-

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

-NONE-

7. INVESTMENT INCOME

1. There was no amount excluded from investment income.

8. DERIVATIVE INSTRUMENTS

- NONE -

9. INCOME TAXES

The Company is not subject to Federal Income Tax. The income tax shown is related to the Puerto Rico Income Tax.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES

The Company is a 99.9% owned subsidiary of Anglo Holdings LLC the Parent Company domiciled in Puerto Rico.

The Company is managed and obtains substantially all its premiums from its principal general agent, Anglo Puerto Rican Insurance Corporation.

Under the provisions of a management contract between the Company and the General Agent, the Company is required to pay certain fees intended to reimburse the General Agent for operating expenses incurred on the Company's behalf. The total fees under such contract for the year ending December 31, 2019 and December, 2018 aggregated to \$5,500,000 and \$4,606,566 respectively. These amounts include \$1,375,000 in 2019 and \$1,151,641 in 2018 charged to loss adjustment expenses incurred.

11. DEBT

- NONE -

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

Not applicable, the Company has no employees.

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS.

1. The Company has 500,000 shares authorized, 280,000 shares issued and outstanding. All shares are Class A shares
2. The Company has no preferred stock issued.
3. Dividends to shareholders is limited to unassigned surplus related to the operations as defined by the Insurance Code of Puerto Rico. The Board of Directors did not declare a dividend for the year 2019.

NOTES TO FINANCIAL STATEMENTS

5. Within the limitations of (3) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
6. To comply with Law 73 of the Insurance Code of Puerto Rico, as amended, a restriction is applied to our unassigned funds to cover the payment of losses in the event of a catastrophic event.
7. The total amount of advances to surplus not repaid is \$0.00.
8. The amounts of stock held by the Company, including stock of affiliated companies, for special purposes is:
- For conversion of preferred stock: 0 shares
 - For employee stock options: 0 shares
 - For stock purchase warrants: 0 shares
9. Changes in balances of special surplus funds from the prior year are due to: Increase in Statutory Catastrophe Trust Fund.
10. The portion of unassigned funds (surplus) represented or reduced by each item below is as follows:
- unrealized gains and (losses): \$1,682,425
 - nonadmitted asset values: \$39,373
 - provision for reinsurance: \$0
 - deferred income tax: \$1,181,767
11. The Company issued the following surplus debenture or similar obligations.
-NONE-
12. The impact of any restatement due to prior quasi-reorganizations is as follows:
-NONE-
13. The effective date(s) of all quasi-reorganizations in the prior 10 years.
-NONE-

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

-NONE-

15. LEASES

The Company has a ten year renewable lease with Ochoa Realty Inc. to rent the penthouse floor of Ochoa Bldg. Rental expense for the year ended December 31, 2019 amounted to \$381,864, plus expenses of \$257,860.

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

- NONE -

17 SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

- TRANSFER OF RECEIVABLES REPORTED AS SALES
- NONE -
- TRANSFER AND SERVICING OF FINANCIAL ASSETS
-NONE-
- WASH SALES
-NONE-

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

- NONE -

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

- ANGLO PUERTO RICAN INSURANCE CORP., P.O. BOX 9023752, OLD SAN JUAN, P.R. 00902-3752
- 66-018-2569
- EXCLUSIVE CONTRACT HOLD: NO
- TYPE OF BUSINESS: CASUALTY, PROPERTY, MARINE AND SURETY
- TYPE OF AUTHORITY GRANTED

U - Underwriting
 C - Claims Payment
 CA - Claims Adjustment
 R - Reinsurance Ceding
 B - Binding Authority
 P - Premium Collection

- TOTAL PREMIUMS WRITTEN DURING THE YEAR OF 2019 \$59,391,835

20 FAIR VALUE MEASUREMENT

Cash, Short-Term Investments, Net Agents' Balances, Reinsurance Recoverable and Accrued Interest Receivable -- The carrying amounts for these instruments approximate their fair values given their short maturity period. Bonds and Notes, Common Stock and Mutual Funds -- The fair value of a security is determined in accordance with the NAIC Purpose and Procedures of the Securities Valuation Office, and the designation assigned in the NAIC Valuation of Securities product prepared by the NAIC Securities Valuation Office ("NAIC VALUES"). If NAIC Values are not available, fair value is determined based on quoted-market prices as provided by independent brokers. If quoted market prices are not available, fair value is determined based on quoted prices of similar instruments.

NOTES TO FINANCIAL STATEMENTS**21 OTHER ITEMS**

-NONE-

22. EVENTS SUBSEQUENT

There were no events subsequent as of June 30, 2018 which may have a material effect on the financial condition of the Company.

23. REINSURANCE

- A. Unsecured Reinsurance Recoverable
NONE
- B. Reinsurance Recoverable in Dispute
NONE
- C. Reinsurance Assumed and Ceded
NONE
- D. Uncollectible Reinsurance
NONE

24. RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION

- NONE -

25. CHANGES IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

Reserves for incurred losses and loss adjustment expenses attributable to insured events of prior years is an increase of \$510,000 as of December 31, 2019 as a result of estimation of unpaid losses and loss adjustment expenses for all lines of insurance. This increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. No additional premiums or return premiums have been accrued as a result of the prior-year effects.

26. INTERCOMPANY POOLING ARRANGEMENTS

-NONE-

27. STRUCTURED SETTLEMENTS

-NONE-

28. HEALTH CARE RECEIVABLES

-NONE-

29. PARTICIPATING POLICIES

-NONE-

30. PREMIUM DEFICIENCY RESERVES

As of December 31, 2019 the Company had no liabilities related to premium deficiency reserves.

31. HIGH DEDUCTIBLES

-NONE-

32. DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES

The Company does not discount liabilities for unpaid losses or unpaid loss adjustment expenses.

33. ASBESTOS/ENVIRONMENTAL RESERVES

-NONE-

34. SUBSCRIBER SAVINGS ACCOUNTS

35. NONE-

35. MULTIPLE PERIL CROP INSURANCE

-NONE-

36. FIANCIAL GUARANTY INSURANCE

-NONE-

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 () No (X)
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 () No () N/A (X)
- 1.3 State Regulating?
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes () No (X)
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 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.
- 3.2 State the as of date of 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.
- 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).
- 3.4 By what department or 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 () No () N/A (X)
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes () No () N/A (X)
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes (X) No ()
4.12 renewals? Yes (X) No ()
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes () No (X)
4.22 renewals? Yes () No (X)
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes () No (X)
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of entity, the 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 ()
- 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 ()
- 7.2 If yes,
7.21 State the percentage of foreign control %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
------------------	---------------------

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes () No ()
- 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 ()
- 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
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9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- 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 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 involved
- 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 () No (X)
- 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?
 (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. Yes (X) No ()
- 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).
- 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 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 \$
- 20.2 Total amount of loans outstanding at end of year (inclusive of Separate Accounts, exclusive of policy loans):
 20.12 To stockholders not officers \$
- 20.21 To directors or other officers \$
- 20.22 To stockholders not officers \$
- 20.23 Trustees, supreme or grand (Fraternal only) \$
- 20.24 Other \$
- 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 \$

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- 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: \$

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 the 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 Risk-Based Capital Instructions? Yes () No () N/A (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 () N/A (X)
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes () No () N/A (X)
- 24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes () No () N/A (X)
- 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 | \$ |
| 24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 | \$ |
| 24.103 Total payable for securities lending reported on the liability page | \$ |
- 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 (X)
- 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 ()
- 26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes () No ()
- 26.4 If the response to 26.3 is YES, does the reporting entity utilize:
- | | | |
|-------|--|----------------|
| 26.41 | Special accounting provision of SSAP No. 108 | Yes () No () |
| 26.42 | Permitted accounting practice | Yes () No () |
| 26.43 | Other accounting guidance | Yes () No () |
- 26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following
- The reporting entity has obtained explicit approval from the domiciliary state.
 - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM 21.
 - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM 21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM 21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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
---------------------------	--------------------------

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

Yes () No (X)

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

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

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

1 Name of Firm or Individual	2 Affiliation
---------------------------------	------------------

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 Identified (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 ()

29.2 If yes, complete the following schedule:

1 CUSIP Number	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
-------------------	--------------------------	-----------------------------------

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

1 Name of Mutual Fund (from question 29.2)	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	\$	\$	\$
30.2 Preferred stocks	\$	\$	\$
30.3 Totals	\$	\$	\$

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

.....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes () No (X)

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes () No ()

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

.....

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

32.2 If no, list exceptions:

OTHER

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

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 a. The security was purchased prior to January 1, 2018.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
 Has the reporting entity self-designated PLGI securities? Yes () No (X)

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
 a. The shares were purchased prior to January 1, 2019.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 d. The fund only or predominantly holds bonds in its portfolio.
 e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
 Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes () No (X)

OTHER

36.1 Amount of payments to Trade associations, service organizations and statistical or Rating Bureaus, if any? \$ 312,960

36.2 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
INSURANCE SERVICES OFFICE	\$ 237,307
.....	\$
.....	\$
.....	\$

37.1 Amount of payments for legal expenses, if any? \$ 56,267

37.2 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
RIOS GAUTIER & CESTERO CSP	\$ 52,403
.....	\$
.....	\$
.....	\$

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

38.2 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
.....	\$
.....	\$
.....	\$
.....	\$

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Antilles Insurance Company
GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?		Yes () No (X)
1.2	If yes, indicate premium earned on U.S. business only.		\$
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.		\$
1.6	Individual policies:		
	Most current three years:		
	1.61 Total premium earned	\$	
	1.62 Total incurred claims	\$	
	1.63 Number of covered lives	.....
	All years prior to most current three years:		
	1.64 Total premium earned	\$	
	1.65 Total incurred claims	\$	
	1.66 Number of covered lives	.....
1.7	Group policies:		
	Most current three years:		
	1.71 Total premium earned	\$	
	1.72 Total incurred claims	\$	
	1.73 Number of covered lives	.....
	All years prior to most current three years:		
	1.74 Total premium earned	\$	
	1.75 Total incurred claims	\$	
	1.76 Number of covered lives	.....
2.	Health Test:		
		1 Current Year	2 Prior Year
	2.1 Premium Numerator	\$	\$
	2.2 Premium Denominator	\$	\$
	2.3 Premium Ratio (2.1/2.2)	\$	\$
	2.4 Reserve Numerator	\$	\$
	2.5 Reserve Denominator	\$	\$
	2.6 Reserve Ratio (2.4/2.5)	\$	\$
3.1	Does the reporting entity issue both participating and non-participating policies?		Yes () No (X)
3.2	If yes, state the amount of calendar year premiums written on:		
	3.21 Participating policies		\$
	3.22 Non-participating policies		\$
4.	For Mutual reporting entities and Reciprocal Exchange only:		
4.1	Does the reporting entity issue assessable policies?		Yes () No (X)
4.2	Does the reporting entity issue non-assessable policies?		Yes () No (X)
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?	 %
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.		\$
5.	For Reciprocal Exchanges only:		
5.1	Does the exchange appoint local agents?		Yes () No (X)
5.2	If yes, is the commission paid:		
	5.21 Out of Attorney's-in-fact compensation		Yes () No () N/A (X)
	5.22 As a direct expense of the exchange		Yes () No () N/A (X)
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?	.....
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?		Yes () No (X)
5.5	If yes, give full information.	.....
6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?	.....
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:	.....
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?	.....

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes (X) No ()
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss.
.....
- 7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes () No (X)
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions.
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes () No (X)
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes () No (X)
- 8.2 If yes, give full information.
.....
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes () No (X)
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of the prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes () No (X)
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes () No (X)
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or, Yes () No (X)
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes () No (X)
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes () No (X)
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes () No () N/A (X)
- 11.1 Has this reporting entity guaranteed policies issued by any other entity and now in force? Yes () No (X)
- 11.2 If yes, give full information.
.....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
12.11 Unpaid losses \$
12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$
- 12.2 Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds: \$
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes () No () N/A (X)

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- 12.41 From %
- 12.42 To %
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by the reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes () No (X)
- 12.6 If yes, state the amount thereof at December 31 of the current year:
- 12.61 Letters of Credit \$
- 12.62 Collateral and other funds \$
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes () No (X)
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes () No (X)
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:

- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes () No (X)
- 14.4 If the answer to 14.3 is no, are the methods described in 14.2 entirely contained in written agreements? Yes () No (X)
- 14.5 If the answer to 14.4 is no, please explain:

- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes () No (X)
- 15.2 If yes, give full information.

- 16.1 Does the reporting entity write any warranty business? Yes () No (X)
- If yes, disclose the following information for each of the following types of warranty coverage:
- | | 1
Direct Losses
Incurred | 2
Direct Losses
Unpaid | 3
Direct Written
Premium | 4
Direct Premium
Unearned | 5
Direct Premium
Earned |
|------------------|--------------------------------|------------------------------|--------------------------------|---------------------------------|-------------------------------|
| 16.11 Home | \$ | \$ | \$ | \$ | \$ |
| 16.12 Products | \$ | \$ | \$ | \$ | \$ |
| 16.13 Automobile | \$ | \$ | \$ | \$ | \$ |
| 16.14 Other* | \$ | \$ | \$ | \$ | \$ |
- * Disclose type of coverage:

- 17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 is exempt from the statutory provision for unauthorized reinsurance? Yes () No (X)
- Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance.
 Provide the following information for this exemption:
- | | |
|---|----------|
| 17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5 | \$ |
| 17.12 Unfunded portion of Interrogatory 17.11 | \$ |
| 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 | \$ |
| 17.14 Case reserves portion of Interrogatory 17.11 | \$ |
| 17.15 Incurred but not reported portion of Interrogatory 17.11 | \$ |
| 17.16 Unearned premium portion of Interrogatory 17.11 | \$ |
| 17.17 Contingent commission portion of Interrogatory 17.11 | \$ |
- 18.1 Do you act as a custodian for health savings accounts? Yes () No (X)
- 18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$
- 18.3 Do you act as an administrator for health savings accounts? Yes () No (X)
- 18.4 If yes, please provide the balance of the funds administered as of the reporting date. \$
19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes () No (X)
- 19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes () No (X)

FIVE-YEAR HISTORICAL DATA

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

	1 2019	2 2018	3 2017	4 2016	5 2015
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	2,566,667	2,429,438	1,705,545	13,441,128	20,471,651
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	19,753,289	15,162,792	8,704,536	13,127,810	14,678,808
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	35,344,659	21,914,423	10,122,770	5,884,254	5,402,042
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	2,121,043	1,285,502	997,903	1,086,461	906,927
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	59,785,638	40,792,155	21,530,754	33,539,653	41,459,428
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	1,374,750	648,951	650,930	12,902,841	20,106,055
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	6,458,144	4,220,957	4,231,057	8,881,232	8,556,850
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	20,075,796	12,761,030	4,795,358	3,498,753	1,661,655
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	1,016,873	877,232	676,625	716,679	439,543
11. Nonproportional reinsurance lines (Line 31, 32 & 33)					
12. Total (Line 35)	28,925,563	18,508,170	10,553,970	25,999,505	30,764,103
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	3,972,160	(351,255)	(5,968,007)	(4,160,251)	985,372
14. Net investment gain (loss) (Line 11)	1,549,178	1,486,391	1,203,326	2,770,434	3,448,774
15. Total other income (Line 15)	178,475	210,658	82,160	20,032	6,118
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	260,000		368,210		
18. Net income (Line 20)	5,439,813	1,345,794	(5,050,731)	(1,369,785)	4,440,264
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	81,529,604	74,610,684	70,541,896	61,061,384	70,294,003
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	13,137,658	7,251,632	4,882,584	2,514,891	3,328,908
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	39,688,104	41,112,715	36,670,547	18,380,012	25,519,953
22. Losses (Page 3, Line 1)	4,628,000	4,142,282	4,571,939	2,178,178	2,359,005
23. Loss adjustment expenses (Page 3, Line 3)	1,059,395	727,596	727,594	750,295	790,645
24. Unearned premiums (Page 3, Line 9)	17,416,566	13,135,674	8,004,312	11,423,248	14,899,089
25. Capital paid up (Page 3, Lines 30 & 31)	2,800,000	2,800,000	2,800,000	2,800,000	2,800,000
26. Surplus as regards policyholders (Page 3, Line 37)	41,841,341	33,497,969	33,871,349	42,681,372	44,774,050
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	6,375,682	6,395,175	(13,240,642)	772,258	2,303,982
Risk-Based Capital Analysis					
28. Total adjusted capital	41,841,341	33,497,969	33,871,349	42,681,372	44,774,050
29. Authorized control level risk-based capital	3,534,191	2,604,719	5,330,477	4,941,289	5,367,658
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1)	53.1	55.8	53.1	66.4	69.2
31. Stocks (Line 2.1 & Line 2.2)	22.6	17.1	20.5	16.0	21.9
32. Mortgage loans on real estate (Lines 3.1 & 3.2)	2.7	2.8	3.4	4.0	4.5
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	19.0	24.2	22.9	13.5	4.5
35. Contact loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)	2.5				
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total investment in parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	1,682,425	(1,719,174)	988,321	279,904	(8,480,084)
52. Dividends to stockholders (Line 35)				(999,997)	(3,248,000)
53. Change in surplus as regards policyholders for the year (Line 38)	8,343,378	(373,380)	(8,810,023)	(2,092,678)	(21,731,783)
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	692,760	593,599	3,315,748	12,262,400	13,988,288
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	8,605,907	61,270,669	12,081,359	466,659	387,582
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	16,691,036	54,009,353	9,509,482	1,294,167	981,574
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	38,640	29,923	(3,966,299)	6,344	38,707
58. Nonproportional reinsurance lines (Lines 31, 32, & 33)					
59. Total (Line 35)	26,028,343	115,903,544	20,940,290	14,031,570	15,396,151
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	616,968	580,116	3,315,748	12,261,293	13,860,288
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	15,676	631,667	606,286	468,659	366,382
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,448,179	636,253	3,934,564	1,120,862	593,611
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	39,122	29,923	(3,966,299)	6,344	38,607
64. Nonproportional reinsurance lines (Lines 31, 32, & 33)					
65. Total (Line 35)	2,119,945	1,877,959	3,890,299	13,857,158	14,858,888
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	10.6	10.8	45.0	46.4	38.0
68. Loss expenses incurred (Line 3)	8.9	10.1	6.7	4.8	2.2
69. Other underwriting expenses incurred (Line 4)	64.5	81.7	91.0	62.9	57.2
70. Net underwriting gain (loss) (Line 8)	16.1	(2.6)	(42.7)	(14.1)	2.6
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4+5-15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	54.3	57.9	119.7	71.2	70.1
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2+3 divided by Page 4, Line 1 x 100.0)	19.4	20.9	51.7	51.2	40.2
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	69.1	55.3	31.2	60.9	68.7
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)	511	(1,468)	609	(316)	(863)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	1.5	(4.3)	1.4	(0.7)	(1.3)
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(702)	91	3,291	(858)	(2,026)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(2.1)	0.2	7.4	(1.3)	(2.9)

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? If no, please explain:

Yes () No (X)

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X									X X X
2. 2010	33,593	10,515	23,078	1,906	257	353	10	1,500			3,492	X X X
3. 2011	32,854	10,482	22,372	2,360	85	423	7	1,133			3,624	X X X
4. 2012	43,139	10,746	32,393	10,569	245	310	14	1,242	28		11,862	X X X
5. 2013	57,722	21,839	35,883	19,012	6,532	313	5	1,561			14,349	X X X
6. 2014	60,171	18,679	41,492	20,420	3,562	328	11	1,338			18,513	X X X
7. 2015	48,484	10,743	37,741	16,691	212	187	4	1,404			18,066	X X X
8. 2016	37,047	7,572	29,475	11,108	243	185	27	650		19	11,673	X X X
9. 2017	22,526	8,537	13,989	157,916	154,781	3,564	3,419	2,991		140	6,271	X X X
10. 2018	29,706	16,329	13,377	1,955	209	170		371		149	2,287	X X X
11. 2019	55,429	30,785	24,644	1,305	33	126		367		31	1,765	X X X
12. Totals	X X X	X X X	X X X	243,242	166,159	5,959	3,497	12,557		367	92,102	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1.													X X X
2.													X X X
3.	195	100										95	X X X
4.			8	2								6	X X X
5.			88	29			19	15	13	4		72	X X X
6.	2		88	29			19	15	13	4		74	X X X
7.	162	111	88	30			19	15	13	4		122	X X X
8.	13		98	33			19	29	19	9		108	X X X
9.	14,059	13,137	1,333	429	411	132	47	34	42	14		2,146	X X X
10.	803	244	590	199	9	7	94	70	86	27	20	1,035	X X X
11.	1,234	327	796	256	56	6	470	302	538	172		2,031	X X X
12.	16,468	13,919	3,089	1,007	476	145	697	470	734	234	20	5,689	X X X

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter - Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	X X X	X X X	X X X	X X X	X X X	X X X			X X X		
2.	3,759	267	3,492	11.2	2.5	15.1					
3.	4,111	192	3,919	12.5	1.8	17.5				95	
4.	12,129	261	11,868	28.1	2.4	36.6				6	
5.	21,006	6,585	14,421	36.4	30.2	40.2				59	13
6.	22,208	3,621	18,587	36.9	19.4	44.8				61	13
7.	16,564	376	16,188	38.3	3.5	48.2				109	13
8.	12,112	331	11,781	32.7	4.4	40.0				78	30
9.	180,363	171,946	8,417	800.7	2,014.1	60.2				1,826	320
10.	4,078	756	3,322	13.7	4.6	24.8				950	65
11.	4,892	1,096	3,796	8.8	3.6	15.4				1,447	584
12.	X X X	X X X	X X X	X X X	X X X	X X X			X X X	4,631	1,058

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

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT		
	1	2	3	4	5	6	7	8	9	10	11	12	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	One Year	Two Year	
1. Prior													
2. 2010	3,463	2,637	2,429	2,275	2,149	2,105	2,069	2,054	2,009	1,992	(17)	(62)	
3. 2011	XXX	4,132	2,766	2,805	2,692	2,726	2,851	2,829	2,777	2,786	9	(43)	
4. 2012	XXX	XXX	11,833	11,058	10,805	10,725	10,681	10,677	10,677	10,625	(52)	(52)	
5. 2013	XXX	XXX	XXX	14,412	12,929	12,833	12,810	12,861	12,845	12,850	5	(11)	
6. 2014	XXX	XXX	XXX	XXX	16,110	16,730	16,924	17,332	17,261	17,238	(23)	(94)	
7. 2015	XXX	XXX	XXX	XXX	XXX	14,208	15,615	16,852	16,752	16,775	23	(77)	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	12,457	11,347	11,173	11,111	(62)	(236)	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,525	4,515	5,399	884	(126)	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,149	2,892	(257)	XXX	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,062	XXX	XXX	
											12. Totals	510	(701)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior	0 0 0										XXX	XXX
2. 2010	1,371	1,757	1,957	1,967	1,989	1,995	1,991	1,992	1,992	1,992	XXX	XXX
3. 2011	XXX	1,545	2,082	2,304	2,526	2,613	2,636	2,677	2,682	2,691	XXX	XXX
4. 2012	XXX	XXX	9,044	10,455	10,473	10,552	10,581	10,620	10,620	10,620	XXX	XXX
5. 2013	XXX	XXX	XXX	11,619	12,457	12,665	12,730	12,789	12,788	12,788	XXX	XXX
6. 2014	XXX	XXX	XXX	XXX	14,415	14,837	15,176	17,115	17,139	17,175	XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX	14,280	14,867	16,650	16,654	16,662	XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	13,116	10,893	10,999	11,023	XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,109	2,803	3,279	XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,204	1,916	XXX	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,397	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	28	6	3							
2. 2010	1,641	208	97	63	25	18	16			
3. 2011	XXX	1,649	208	97	51	18	16	57		
4. 2012	XXX	XXX	1,662	208	77	42	16	57	56	
5. 2013	XXX	XXX	XXX	1,651	169	59	35	57	56	61
6. 2014	XXX	XXX	XXX	XXX	1,289	128	51	65	56	61
7. 2015	XXX	XXX	XXX	XXX	XXX	997	112	121	65	61
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	871	247	119	69
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,006	250	130
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,007	869
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,061

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States And Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. Dist. Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	L	59,785,638	55,429,458	26,028,342	8,203,062	19,556,000		
55. U. S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien	OT	XXX							
59. Totals	XXX		59,785,638	55,429,458	26,028,342	8,203,062	19,556,000		
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX								
58999. Totals (Lines 58001 through 58003+58998) (Line 58 above)	XXX								

Explanation of basis of allocation of premiums by states, etc.

(a) Active Status Counts:

- L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG 1
- R - Registered - Non-domiciled RRGs
- E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - See DSLI)
- Q - Qualified - Qualified or accredited reinsurer
- D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile
- N - None of the above - Not allowed to write business in the state 56

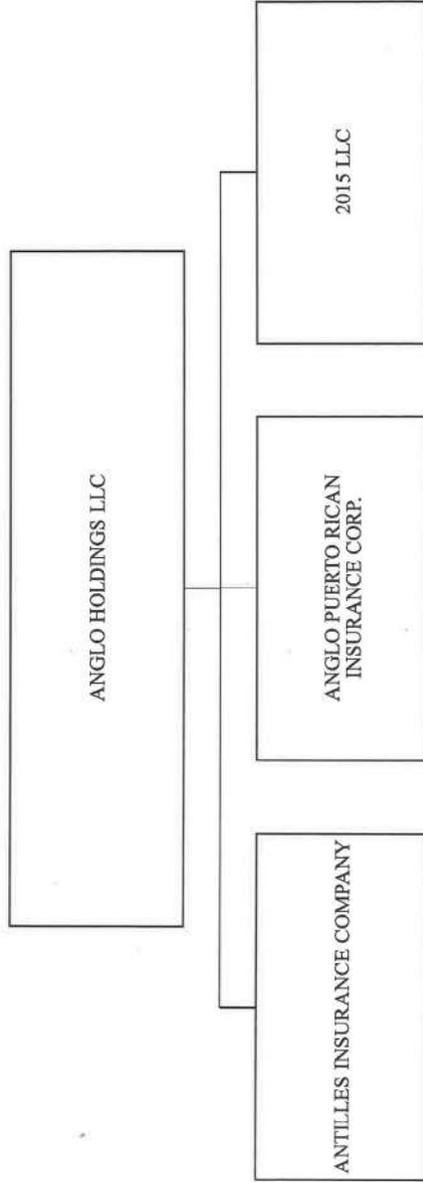
(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9 and 10, or with Schedule H, Part 1, Column 1, Line 1 indicate which;

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ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Antilles Insurance Company
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



ORGANIZATION CHART



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