Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
PLAN DE PENSIONES DE BENEFICIOS DEFINIDOS PARA LA COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1965

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

P.O. BOX 363428
SAN JUAN, PR 00936-3428

2b Employer Identification Number (EIN) 66-0231517

2c Plan Sponsor's telephone number 787-751-5656

2d Business code (see instructions) 524140

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	MARIGELI BAEZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	MARIGELI BAEZ
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	348
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	87
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	82
b	Retired or separated participants receiving benefits	**6b**	51
c	Other retired or separated participants entitled to future benefits	**6c**	205
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	338
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	6
f	Total. Add lines **6d** and **6e**.	**6f**	344
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

1A 1I 3C

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1) [ ]	Insurance	**(1)** [ ]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	**(2)** [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	**(3)** [X]	Trust
(4) [ ]	General assets of the sponsor	**(4)** [ ]	General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [X] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
PLAN DE PENSIONES DE BENEFICIOS DEFINIDOS PARA LA COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

D Employer Identification Number (EIN)
66-0231517

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [X] 101-500 [ ] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	18776239
b Actuarial value	**2b**	18776239

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	57	5651580	5651580
b For terminated vested participants	204	5309798	5309798
c For active participants	87	5374351	5374351
d Total	348	16335729	16335729

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.36 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	73491
c Target normal cost	**6c**	73491

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary

09/22/2026
Date

HECTOR D. GAITAN, FCA, ASA, EA
Type or print name of actuary

26-04646
Most recent enrollment number

BPAS TRUST COMPANY OF PUERTO RICO
Firm name

787-340-5593
Telephone number (including area code)

1225 PONCE DE LEON AVENUE
VIG TOWER, SUITE 804
SAN JUAN, PR 00907
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	735120
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	735120
10	Interest on line 9 using prior year's actual return of 8.44 %	0	62044
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		193528
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.24 %		10141
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		203669
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	797164

Part III Funding Percentages

14	Funding target attainment percentage	14	110.05 %
15	Adjusted funding target attainment percentage	15	114.93 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	103.60 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
07/08/2025	100000	0			
10/08/2025	50000	0			
12/03/2025	50000	0			
			Totals ► 18(b)	200000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	193166

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:	1st segment: 5.00 %	2nd segment: 5.27 %	3rd segment: 5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	65

23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☐ Yes ☒ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	**31a**	73491
b Excess assets, if applicable, but not greater than line 31a	**31b**	73491

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____)_and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	193166
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	193166
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
PLAN DE PENSIONES DE BENEFICIOS DEFINIDOS PARA LA COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

D Employer Identification Number (EIN)
66-0231517

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

BPAS ACTUARIAL & PENSION SERVICES

30-0192194

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	41213	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

ORIENTAL FINANCIAL GROUP

66-0259436

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21	NONE	30537	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
PLAN DE PENSIONES DE BENEFICIOS DEFINIDOS PARA LA COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

D Employer Identification Number (EIN)
66-0231517

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	169562	19063
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	44279	50464
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	252905	684594
(2) U.S. Government securities	1c(2)	4030786	3427915
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	2537524	2577412
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	11741183	13154374
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	18776239	19913822
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	18776239	19913822

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	200000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		200000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	196170	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		196170
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	507520	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		507520
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	1464452	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		1464452

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		2368142
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1082778	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		1082778
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	76031	
(6) Bank or trust company trustee/custodial fees	2i(6)	30537	
(7) Actuarial fees	2i(7)	41213	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		147781
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1230559
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1137583
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: LANDA UMPIERRE PSC **(2)** EIN: 30-0116076

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ..... ☐ Yes ☒ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
PLAN DE PENSIONES DE BENEFICIOS DEFINIDOS PARA LA COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

D Employer Identification Number (EIN)
66-0231517

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... | 1 | 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 66-0231517

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | 3 | 1

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ Yes ☐ No ☒ N/A

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a	Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b	Enter the amount contributed by the employer to the plan for this plan year	6b	
c	Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c	

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ Yes ☐ No ☐ N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ Yes ☐ No ☒ N/A

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ Increase ☐ Decrease ☐ Both ☒ No

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ Yes ☐ No

11 a Does the ESOP hold any preferred stock? ..... ☐ Yes ☐ No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ Yes ☐ No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ Yes ☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

LANDA UMPIERRE PSC
CERTIFIED PUBLIC ACCOUNTANTS & CONSULTANTS

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Financial Statements and Supplemental Schedules

December 31, 2025 and 2024

(With Independent Auditors' Report Thereon)

MOORE

An independent member of Moore North America, Inc.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

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December 31, 2025 and 2024

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LANDA UMPIERRE PSC
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Independent Auditors' Report

To the Administrative Committee of the Plan de Pensiones
de Beneficios Definidos para la Cooperativa de
Seguros de Vida de Puerto Rico:

Opinion

We have audited the accompanying financial statements of Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2025 and 2024, and the changes in its net assets available for benefits for the year ended December 31, 2025, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments; administering the plan; and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedules of Assets (Held at End of Year) and of Reportable Transactions as of or for the year ended December 31, 2025, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

San Juan, Puerto Rico
October 7, 2026

Certified Public Accountants
License No. 95 expires on December 1, 2026.

COLEGIO DE CONTADORES PÚBLICOS AUTORIZADOS DE PUERTO RICO
CPA
$5.00 SELLO $2.00 INDCI

DPSC95-531

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Statements of Net Assets Available for Benefits

December 31, 2025 and 2024

Assets

	2025	2024
Investments at fair value:		
Corporate bonds	$ 2,577,412	2,537,524
U.S. government and agency securities	3,427,915	4,030,786
Mutual funds	13,154,374	11,741,183
Money market	684,594	252,905
Total investments	19,844,295	18,562,398
Accrued interest receivable	50,464	44,279
Cash	19,063	169,562
Net assets available for benefits	$ 19,913,822	18,776,239

See accompanying notes to financial statements.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Statement of Changes in Net Assets Available for Benefits

Year ended December 31, 2025

Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$	1,464,452
Interest income and dividends		703,690
Total investment income		2,168,142
Employer contributions		200,000
Net additions attributed to investments and contributions		2,368,142
Deductions from net assets attributed to:		
Benefits paid to participants		1,082,778
Administrative expenses		147,781
Total deductions		1,230,559
Net increase		1,137,583
Net assets available for benefits at beginning of year		18,776,239
Net assets available for benefits at end of year	$	19,913,822

See accompanying notes to financial statements.

(1) Description of the Plan

The following brief description of Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico (the Plan) is provided for general informational purposes only. Participants should refer to the Plan agreement for a more complete description.

(a) General

The Plan is a defined-benefit pension plan established on July 1, 1965 and sponsored by Cooperativa de Seguros de Vida de Puerto Rico (COSVI or the Employer). As further described in Note 8, effective January 1, 2009, the Board of Directors determined to hard-freeze the Plan, with no additional benefits accruing for any current plan participants. Substantially all employees were eligible to participate in the Plan after attaining 21 years of age and completing the equivalent of one year of continued service. No new employees can become a participant after January 1, 2009. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA) and Section 1081.01 (a) and (d) of the Puerto Rico Internal Revenue Code of 2011 (the 2011 Code), as amended.

(b) Benefits

The Plan provides the following types of benefits:

(i) Normal Retirement Benefit

Participants employed before January 1, 2004, are entitled to annual pension benefits equivalent to the highest of:

- 3.2 percent of the average of their compensation at December 31, 2003, minus 0.75 percent of the average compensation for Social Security at December 31, 2003, the result multiplied by the years of service at December 31, 2003 up to a maximum of 30 years; and

- 2 1/6 percent of the average compensation multiplied by the years of service, up to a maximum of 30 years.

Participants employed on or after January 1, 2004 are entitled to an annual pension benefit equivalent to 2 1/6 percent of the average compensation multiplied by the years of service, up to a maximum of 30 years.

(ii) Early Retirement Benefit

Participants can elect to retire early after 10 years of service and after reaching 50 years of age, if employed prior to January 1, 1997, or 10 years of service and after reaching 55 years, if employed on or after January 1, 1997. The benefit provided is equal to the accrued normal retirement benefit actuarially reduced for early retirement.

(iii) Vested Deferred Benefit

A participant with at least five years of credited service who terminates employment will have a non-forfeitable right to the vested portion of the accrued retirement benefit at the date of termination.

Once retired, participants can elect to receive their benefits as follows:

- ***Normal Retirement***

  If the participant is married at the time of retirement, the pension will be paid in the form of an actuarially reduced joint-and-survivor monthly annuity, with payments continuing in half of the amount to the spouse for life, if surviving the participant's death. If the participant is unmarried at the time of retirement, the pension will be paid in the form of a monthly annuity, with payments guaranteed for a period of five years and continuing thereafter in an equal amount until the participant's death.

- ***Other Options***

  Options available are as follows:

  - A single life annuity.
  - A joint-and-survivor annuity with 50 percent, 75 percent, or 100 percent of the participant's reduced benefit continuing to a designated beneficiary, if surviving at the time of the participant's death. The beneficiary could be someone other than the spouse.
  - A life and contingent annuity with 50 percent, 75 percent, or 100 percent of the participant's reduced benefit continuing to a designated beneficiary, if surviving at the participant's death. The beneficiary could be someone other than the spouse.
  - An annuity with payments guaranteed for periods of 5, 10, 15, or 20 years and continuing thereafter during the remainder lifetime of the participant.
  - A lump-sum payment based on the present value of normal or defined pension. (Applicable only for those participants that were employed before January 1, 1997).

- ***Death Benefits***

  Before retirement:

  - If the participant (either single or married) is not vested, the participant's accumulated contributions with interest up to the date of death are returned to the designated beneficiaries.
  - In the case of a single participant with vested benefits, the designated beneficiaries will receive an amount equal to the present value of vested benefits.

- In the case of a married employee who has acquired vested rights, and at the time of death was eligible for early retirement, the spouse will begin to receive a pension for life equal to 50 percent of the benefit the employee would have been entitled to receive if retirement had occurred on the date of death and the 50 percent joint-and-survivor option had been elected.

- If the married vested employee was not eligible for early retirement at the moment of death, the spouse will receive, starting on the date the employee would have been eligible for early retirement, a pension for life equal to 50 percent of the benefit the employee would have been entitled to receive had employment terminated on the date of death and the form of a 50 percent joint-and-survivor option had been elected starting on the date of eligibility for early retirement.

After retirement:

- In accordance with the terms of an elected option.

The Plan is funded by contributions from the Employer. Payments of benefits are paid from this account. As further discussed in Note 8, effective January 1, 2009, the Plan was frozen and, therefore, participants no longer accumulate benefits under the Plan.

(2) Summary of Significant Accounting Policies

(a) Basis of Presentation

The accompanying financial statements have been prepared under the accrual basis of accounting.

(b) Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 7 for a discussion of fair value measurements.

Purchase and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's realized gains and losses on investments bought and sold as well as held during the year.

(c) Payment of Benefits

Benefits payments to participants are recorded upon distribution.

(d) Administrative Expenses

Expenses incurred in connection with the general administration of the Plan are paid by the Plan and are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits.

(e) Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein; disclosure of contingent assets and liabilities; and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

(3) Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are accumulated based on employees' compensation during each year of credited services. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances - retirement, death, disability, and termination of employment - are included to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from Plan assets are excluded from accumulated plan benefits. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The significant actuarial assumptions used in the valuations as of December 31, 2025 were (a) life expectancy of participants (mortality tables were updated as of January 1, 2026 to the optional combined sex distinct table for 2026 valuations under PPA), (b) retirement age assumptions (the assumed average retirement age was 65), and (c) assumed rate of return of investments was 6% in 2025 and 2024, respectively. The interest rates used to discount the obligation for 2025 and 2024 were as follow:

Segments	2025 Discount Rates	2024 Discount Rates
1	4.07%	4.66%
2	5.15%	5.25%
3	6.01%	5.57%

These discount rates were determined following Code Section 417(e) for 2025 Lump Sum Payments and ERISA 205(g) (2) for November 2025, taking into account the Corporate Bond Yield Curve for the corresponding Segment (5 years, 15 years or over 15 years).

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2026. Had the valuations been performed as of December 31, 2025 there would be no material differences.

In 2025 and 2024, the changes in actuarial assumptions increased (decreased) the accumulated plan benefits by ($134,709) and $751,043, respectively. The main driver for such decrease in 2025 was the net increase in the discount rates. Also, the Mortality Tables were updated as of January 1, 2026 to the optional combined sex distinct table for 2026 valuations.

The Plan's funding ratio was 125.32% and 114.96% in 2025 and 2024, respectively.

(4) Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits as of the most recent actuarial valuation date (January 1, 2026):

	2025	2024
Participants currently receiving payments	$ 5,753,561	5,675,073
Other vested participants	10,136,079	10,657,315
Total vested benefits	15,889,640	16,332,388
Non vested accrued benefits	—	—
Total actuarial present value of accumulated plan benefits	$ 15,889,640	16,332,388

The changes in the actuarial present value of accumulated plan benefits for the year ended December 31, 2025, were as follow:

Actuarial present value of accumulated Plan benefits at beginning of year	$ 16,332,388
Increase/(decrease) during the year attributable to:	
Benefits accumulated and actuarial gains and losses	(71,659)
Increase for interest due to the decrease in the discount period at 5.36% (5.78% in 2024)	846,398
Benefits paid	(1,082,778)
Changes in actuarial assumptions	(134,709)
Net decrease	(442,748)
Actuarial present value of accumulated Plan benefits at end of year	$ 15,889,640

(5) Funding Policy

Due to the frozen status of the Plan, the only contributions that enter the Plan are those performed by the Employer based on actuarial results and accumulated plan benefits.

(6) Plan Termination

The Plan has been established with the intention and expectation that it will continue indefinitely; however, the Employer retains the right to amend, curtail or terminate any aspect of the Plan at any time, subject to the provisions of ERISA.

In the event the Plan terminates, the net assets of the Plan will be allocated as prescribed by ERISA and its related regulations generally to provide the following benefits in the order indicated:

(a) Benefits attributable to employee contributions, taking into account those paid out before termination.

(b) Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.

(c) All nonvested benefits.

Benefits to be provided via annuity contracts would be excluded for allocation purposes.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan Sponsor.

(7) Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Corporate and municipal bonds: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

U.S. government securities and agency securities: Valued using pricing models maximizing the use of observable inputs for similar securities.

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common stocks and money market instruments: Valued at the closing price reported on the active exchange market on which the individual securities are traded.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2025 and 2024:

	Assets at Fair Value as of December 31, 2025			
	Level 1	**Level 2**	**Level 3**	**Total**
Corporate bonds	$ —	2,577,412	—	2,577,412
U.S. government and agency securities	—	3,427,915	—	3,427,915
Mutual funds:				
Equity	8,876,033	—	—	8,876,033
Fixed income	4,130,822	—	—	4,130,822
Alternative investments	147,519	—	—	147,519
Money market	684,594	—	—	684,594
Total investments at fair value	$ 13,838,968	6,005,327	—	19,844,295

	Assets at Fair Value as of December 31, 2024			
	Level 1	**Level 2**	**Level 3**	**Total**
Corporate bonds	$ —	2,537,524	—	2,537,524
U.S. government and agency securities	—	4,030,786	—	4,030,786
Mutual funds:				
Equity	7,733,693	—	—	7,733,693
Fixed income	4,007,490	—	—	4,007,490
Money market	252,905	—	—	252,905
Total investments at fair value	$ 11,994,088	6,568,310	—	18,562,398

(8) Plan Status

On May 28, 2008, the Board of Directors of COSVI decided to partially freeze the Plan effective August 1, 2008. As a result of this partial freeze, participants already covered by the Plan continued to accrue benefits but restricted future employees or existing employees not yet eligible from participating in the Plan. On October 27, 2008, the Board of Directors of COSVI determined to hard-freeze the Plan effective January 1, 2009. This hard-freeze stopped the accrual of future benefits, with no additional benefits accruing for any current plan participants regardless of their length of employment or salary increases.

In addition, effective November 14, 2008, COSVI determined to fund the Plan through a trust established under the laws of the Commonwealth of Puerto Rico. The trust was established to hold and administer the assets of the Plan in accordance with the terms of the Plan and to perform actuarial and recordkeeping services.

(9) Tax Status

The Puerto Rico Treasury Department (PRTD) has determined and informed the Plan Sponsor by a letter dated January 23, 2009 that the Plan is designed in accordance with Section 1165 of the 1994 Puerto Rico Internal Revenue Code, as amended. Effective January 1, 2011, a new Internal Revenue Code was established (the 2011 PR Code) repealing the 1994 Code. Section 1081.01 of 2011 PR Code (former section 1165) contains new rules governing retirement plans intended to be qualified in Puerto Rico. The Plan Administrator amended the Plan in compliance with the provisions of the 2011 PR Code and consequently, on February 14, 2014, requested an updated favorable determination letter as required by the 2011 PR Code. The Plan received a favorable determination letter from the PRTD on September 28, 2016 as to its qualified status under the 2011 PR Code.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Puerto Rico Treasury Department. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

(10) Risks and Uncertainties

The Plan invests in various types of investment securities, which are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

(11) Subsequent Events

The Plan has evaluated subsequent events through October 7, 2026, the date at which the financial statements were available to be issued. The Plan Administrator has determined that no events exist in that period that require disclosure in or any adjustments to the accompanying financial statements.

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LANDA UMPIERRE PSC
CERTIFIED PUBLIC ACCOUNTANTS & CONSULTANTS

Supplemental Schedules

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value		(d) Cost	(e) Current Value
-	**Money Market Funds:**				
	PREFERRED DEPOSIT	Money Market		$ 189,732	189,732
	ML BANK DEPOSIT PROGRAM	Money Market		115	115
	BLF FEDFUND CASH RESERVE	Money Market		341,502	341,502
	BLF FEDFUND CASH RESERVE	Money Market		153,245	153,245
		Total Money Market Funds		$ 684,594	684,594
	Mutual Funds:				
-	NOMURA CORPORATE BOND	2,295.00	Shares	$ 40,208	35,320
-	AMG GW&K MUNICIPAL	71,136.84	Shares	679,854	621,025
-	ANGEL OAK MULTI STRATEGY	80,241.00	Shares	819,867	701,306
-	BATS SHORT DUR TAX SERIES S	0.07	Shares	1	1
-	BATS CORP CREDIT SERIES C	12,979.67	Shares	136,133	118,375
-	BATS MORTGAGE SERIES M	103,900.58	Shares	1,002,755	888,350
-	BATS SECURITIZED SERIES A	11,498.00	Shares	107,736	110,151
-	PIMCO INCOME FUND CL I2	64,002.00	Shares	762,945	703,382
-	PRINCIPAL SPECTRUM PRFRD	67,557.00	Shares	699,800	632,334
-	ARTISAN HIGH INCOME	3,745.00	Shares	33,467	34,454
-	AVANTIS EMERGING MARKETS	3,132.00	Shares	236,336	241,227
-	BLACKROCK TECHNOLOGY	1,565.00	Shares	108,225	121,929
-	FUTURE AI AND TECG ETF	5,395.00	Shares	175,810	179,654
-	GLOBAL X FDS GLOBAL X	1,833.00	Shares	121,648	118,760
-	INVESCO S & P 500	2,493.00	Shares	260,881	297,465
-	ISHARES U.S. THEMATIC	7,731.00	Shares	264,926	298,107
-	ISHARES S&P 500 VALUE	3,642.00	Shares	692,501	772,359
-	ISHARES TR MSCI EAFE	6,706.00	Shares	404,855	478,875
-	ISHARES IBOXX $	312.00	Shares	34,927	34,379
-	ISHARES U.S. EQUITY FAC	11,283.00	Shares	540,481	686,119
-	ISHARES S&P 500	5,106.00	Shares	439,721	629,366
-	ISHARES S&P 100	1,658.00	Shares	510,827	568,644
-	ISHARES EDGE MSCI	1,496.00	Shares	255,747	297,135
-	ISHARES INTERNATIONAL	2,977.00	Shares	150,686	148,878
-	ISHARES INC CORE MSCI	8,646.00	Shares	465,945	581,184
-	ISHARES TR CORE MSCI EAF	4,450.00	Shares	298,151	398,097
-	JP MORGAN EMERGING	3,431.00	Shares	99,875	142,833
-	JP MORGAN US EQUITY FD	10,988.00	Shares	258,212	295,357
-	JP MORGAN LARGE CAP	19,741.00	Shares	382,233	414,956
-	JP MORGAN LARGE CAP	4,790.00	Shares	279,657	391,822
-	JP MORGAN VALUE	4,245.00	Shares	158,431	155,112
-	JP MORGAN CORE PLUS BOND	4,683.00	Shares	33,998	34,233
-	JP MORGAN BETABUILDERS	1,476.00	Shares	68,501	68,634
-	JP MORGAN US RESEARCH	11,899.00	Shares	523,260	571,152
-	JP MORGAN INTERNATIONAL	3,565.00	Shares	89,088	105,346
-	PARNASSUS CORE EQUITY	3,081.00	Shares	162,542	172,967
-	VANGUARD MID-CAP ETF	176.00	Shares	45,182	51,079
-	VANGUARD RUSSELL 2000	2,618.00	Shares	201,366	260,543
-	VANGUARD 500 INDEX FUND	1,030.00	Shares	421,814	645,944
-	WORLD GOLD TR SHS SPDR	1,728.00	Shares	111,305	147,520
		Total Mutual Funds		$ 12,079,897	13,154,374

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	Corporate Bonds:			
-	MORGAN STANLEY	RATE VAR% MATURES JUL 22 2028		
		35,000.00 Shares	$ 35,009	34,761
-	JP MORGAN CHASE & CO	RATE VAR% MATURES DEC 5 2029		
		64,000.00 Shares	65,225	64,659
-	COMCAST CORP	RATE 4.250% MATURES OCT 15 2030		
		64,000.00 Shares	65,467	64,026
-	GENERAL ELEC CAP CORP	RATE 5.875% MATURES JAN 14 2038		
		48,000.00 Shares	53,131	52,009
-	ENTERPRISE PRODUCTS OPER	RATE 5.700% MATURES FEB 15 2042		
		29,000.00 Shares	30,715	29,554
-	CVS HEALTH CORP	RATE 5.050% MATURES MAR 25 2048		
		51,000.00 Shares	50,495	44,959
-	CVS HEALTH CORP	RATE 5.000% MATURES FEB 20 2026		
		42,000.00 Shares	41,860	42,016
-	JP MORGAN CHASE & CO	RATE VAR% MATURES MAY 1 2028		
		39,000.00 Shares	40,140	38,780
-	US BANCORP	RATE VAR% MATURES JUN 29 2029		
		63,000.00 Shares	63,942	65,482
-	GENERAL MOTORS FINL CO	RATE 5.500% MATURES JUL 15, 2029		
		44,000.00 Shares	44,222	45,613
-	TRUIST FINANCIAL CORP	RATE VAR% MATURES JAN 29 2030		
		45,000.00 Shares	44,963	46,590
-	UNITEDHEALTH GROUP INC	RATE 2.000% MATURES MAY 15 2030		
		46,000.00 Shares	46,940	41,953
-	LOWE'S COS INC	RATE 1.700% MATURES OCT 15 2030		
		52,000.00 Shares	52,127	46,186
-	GOLDMAN SACHS GROUP INC.	RATE VAR% MATURES JAN 28 2031		
		45,000.00 Shares	45,080	46,469
-	CITIGROUP INC	RATE VAR% MATURES JUN 03 2031		
		49,000.00 Shares	50,586	45,400
-	WELLS FARGO & COMPANY	RATE VAR% MATURES JUL 25 2034		
		49,000.00 Shares	49,210	51,372
-	ENERGY TRANSFER LP	RATE 5.700% MATURES APR 01 2035		
		62,000.00 Shares	64,565	64,178
-	SYNOPSYS INC	RATE 5.150% MATURES APR 01 2035		
		55,000.00 Shares	56,553	55,899
-	CAPITAL ONE FINANC IAL CO	RATE VAR% MATURES JAN 30 2036		
		45,000.00 Shares	45,255	46,975
-	JP MORGAN CHASE & CO	RATE VAR% MATURES JUL 23 2036		
		52,000.00 Shares	54,076	53,791
-	ORACLE CORP	RATE 3.600% MATURES APR 01 2040		
		39,000.00 Shares	44,679	28,924
-	ENTERPRISE PRODUCTS OPER	RATE 4.450% MATURES FEB 15 2043		
		28,000.00 Shares	29,448	24,607
-	MORGAN STANLEY	RATE 4.375% MATURES JAN 22 2047		
		31,000.00 Shares	38,183	26,766
-	ABBVIE	RATE 4.250% MATURES NOV 21 2049		
		48,000.00 Shares	58,446	39,531
-	COMCAST CORP	RATE 3.450% MATURES FEB 01 2050		
		55,000.00 Shares	62,066	36,771
-	VERIZON COMMUNICATIONS	RATE 2.875% MATURES NOV 20 2050		
		52,000.00 Shares	53,488	32,238
		Balance carried forward	$ 1,285,871	1,169,509

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
		Balance brought forward	$ 1,285,871	1,169,509
-	USD ENBRIDGE INC	RATE 6.700% MATURES NOV 15 2053 41,000.00 Shares	42,032	45,012
-	RTX CORP	RATE 6.400% MATURES MAR 15 2054 46,000.00 Shares	47,332	50,621
-	CONNECTICUT ST SPL TAX	RATE 5.000% MATURES NOV 01 2041 50,000.00 Shares	59,461	53,651
-	ILLINOIS ST TOLL HWY	RATE 5.250% MATURES JAN 01 2045 40,000.00 Shares	43,455	42,714
-	METRO NSH-DVD CO TN ELEC	RATE 5.000% MATURES MAY 15 2046 60,000.00 Shares	70,866	62,312
-	MASSACHUSETTS ST GO	RATE 5.000% MATURES JUL 01 2048 40,000.00 Shares	45,508	41,102
-	PENNSYLVANIA ST TPK	RATE 5.000% MATURES DEC 01 2048 55,000.00 Shares	55,615	57,561
-	HARRIS CNTY TEX TOLL RD	RATE 5.250% MATURES AUG 15 2049 40,000.00 Shares	43,523	42,662
-	LAFAYETTE LA UTILS REV	RATE 5.000% MATURES NOV 01 2049 80,000.00 Shares	85,412	83,094
-	CHICAGO ILL TRAN AUTH	RATE 5.000% MATURES DEC 01 2049 80,000.00 Shares	85,453	82,888
-	WAYNE CNTY MICH ARPT	RATE 5.500% MATURES DEC 01 2050 50,000.00 Shares	52,693	54,310
-	NEW YORK NY MUN WFA	RATE 5.250% MATURES JUN 15 2053 40,000.00 Shares	44,205	42,228
-	NEW YORK NY CTY TRANS	RATE 5.000% MATURES NOV 01 2053 80,000.00 Shares	85,132	82,205
-	LOWER COLO RIV AT TGEX	RATE 5.250% MATURES MAY 15 2054 60,000.00 Shares	64,904	62,644
-	UNIVERSITY CINCINNATI	RATE 5.250% MATURES JUN 01 2054 50,000.00 Shares	53,123	52,280
-	OKLAHOMA CITY OKLA WTR	RATE 5.000% MATURES JUL 01 2054 40,000.00 Shares	43,066	41,955
-	METROPOLITAN GOVT CO TN	RATE 5.000% MATURES OCT 01 2054 80,000.00 Shares	86,160	84,314
-	COLUMBUS OHIO REGL ARPT	RATE 5.250% MATURES JAN 01 2055 50,000.00 Shares	53,396	52,609
-	NEW YORK NY MUN WFA	RATE 5.000% MATURES JUN 15 2055 60,000.00 Shares	62,190	62,300
-	METROPOLITAN ATLANTA	RATE 5.000% MATURES JUL 01 2055 60,000.00 Shares	63,012	62,614
-	BATTERY PK CITY AUTH NY	RATE 5.250% MATURES NOV 01 2055 30,000.00 Shares	31,942	32,047
-	MEMPHIS TENN LT GAS & WT	RATE 5.000% MATURES DEC 01 2055 50,000.00 Shares	52,471	52,196
-	PENNSYLVANIA ST TPK	RATE 5.250% MATURES DEC 01 2058 60,000.00 Shares	61,629	64,213
-	ALLEGHENY CNTY PA SAN	RATE 5.250% MATURES DEC 01 2058 35,000.00 Shares	36,803	36,990
-	MICHIGAN ST BLDG AUTH	RATE 5.250% MATURES APR 15 2059 60,000.00 Shares	64,631	63,381
		Total Corporate Bonds	$ 2,719,885	2,577,412

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	U.S. Government and Agency Securities:			
-	U.S. TREASURY NOTE	RATE 4.375% MATURES NOV 30 2028 73,000.00 Shares	$ 79,100	74,657
-	U.S. TREASURY NOTE	RATE 1.750% MATURES JAN 31 2029 146,000.00 Shares	143,833	138,335
-	U.S. TREASURY NOTE	RATE 4.250% MATURES FEB 28 2029 66,000.00 Shares	64,760	67,335
-	U.S. TREASURY NOTE	RATE 4.250% MATURES JAN 31 2030 82,000.00 Shares	82,155	83,823
-	U.S. TREASURY NOTE	RATE 1.500% MATURES FEB 15 2030 52,000.00 Shares	53,734	47,763
-	U.S. TREASURY NOTE	RATE 4.000% MATURES MAR 31 2030 57,000.00 Shares	57,350	57,726
-	U.S. TREASURY NOTE	RATE 4.125% MATURES AUG 31 2030 243,000.00 Shares	240,898	247,272
-	FEDERAL NATL MTG ASSOC	RATE 6.625% MATURES NOV 15 2030 29,000.00 Shares	36,534	32,699
-	U.S. TREASURY NOTE	RATE 4.250% MATURES JUN 30 2031 117,000.00 Shares	118,053	119,651
-	U.S. TREASURY NOTE	RATE 4.500% MATURES DEC 31 2031 86,000.00 Shares	87,261	88,996
-	U.S. TREASURY NOTE	RATE 2.875% MATURES MAY 15 2032 119,000.00 Shares	110,627	112,204
-	U.S. TREASURY NOTE	RATE 4.35% MATURES MAY 15 2034 90,000.00 Shares	91,999	91,972
-	U.S. TREASURY NOTE	RATE 4.625% MATURES FEB 15 2035 76,000.00 Shares	78,384	78,889
-	U.S. TREASURY NOTE	RATE 4.250% MATURES MAY 15 2035 44,000.00 Shares	43,204	44,364
-	FNMA PAD 8529	RATE 4.500% MATURES 2040 140,000.00 Shares	3,791	3,420
-	U.S. TREASURY BOND	RATE 1.875% MATURES FEB 15 2041 67,000.00 Shares	54,236	46,806
-	U.S. TREASURY BOND	RATE 4.000% MATURES NOV 15 2042 59,000.00 Shares	60,850	54,077
-	U.S. TREASURY BOND	RATE 3.625% MATURES FEB 15 2044 35,000.00 Shares	48,491	30,047
-	U.S. TREASURY BOND	RATE 4.750% MATURES FEB 15 2045 45,000.00 Shares	46,054	44,771
-	U.S. TREASURY BOND	RATE 5.000% MATURES MAY 15 2045 130,000.00 Shares	132,998	133,453
-	U.S. TREASURY BOND	RATE 2.500% MATURES MAY 15 2046 115,000.00 Shares	139,915	79,763
-	FNMA PMA 3416	RATE 4.500% MATURES 2048 66,000.00 Shares	5,631	5,148
-	FHLMC SD 8001	RATE 3.500% MATURES 2049 221,000.00 Shares	22,378	19,795
-	FHLMC SD 8016	RATE 3.000% MATURES 2049 151,000.00 Shares	26,214	22,330
-	FNMA PMA 3939	RATE 3.500% MATURES 2050 67,000.00 Shares	10,446	9,200
-	U.S. TREASURY BOND	RATE 1.875% MATURES FEB 15 2051 91,000.00 Shares	73,866	50,854
-	FNMA PMA 4357	RATE 3.000% MATURES 2051 81,000.00 Shares	46,875	40,059
-	FNMA PMA 4378	RATE 2.000% MATURES 2051 97,000.00 Shares	72,823	58,808
-	FNMA PMA 4379	RATE 2.500% MATURES 2051 71,000.00 Shares	49,733	41,091
-	FNMA PMA 4842	RATE 5.500% MATURES 2052 125,000.00 Shares	93,808	94,805
-	FNMA PMA 5026	RATE 3.500% MATURES 2053 13,000.00 Shares	10,089	10,251
-	FHLMC SD 4122	RATE 3.000% MATURES 2053 12,000.00 Shares	8,418	9,484
-	U.S. TREASURY BILL	RATE ZERO% MATURES JAN 20 2026 1,100.00 Shares	1,091,520	1,098,053
-	U.S. TREASURY NOTE	RATE 3.250% MATURES JUN 30 2027 45,000.00 Shares	44,100	44,845
-	U.S. TREASURY NOTE	RATE 4.125% MATURES SEP 30 2027 115,000.00 Shares	113,477	116,230
-	U.S. TREASURY NOTE	RATE 4.250% MATURES FEB 15 2028 127,000.00 Shares	127,620	128,939
	Total U.S. Government and Agency Securities		$ 3,571,225	3,427,915
			$ 19,055,601	19,844,295

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4j – Schedule of Reportable Transactions

Year ended December 31, 2025

(a) Identity of party involved	(b) Description of assets	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
U.S. TREASURY BILL ZERO% OCT 07 2025	U.S.Government and Agency Securities	$ 1,346,021	—	—	—	1,346,021	1,346,021	—
U.S. TREASURY BILL ZERO% NOV 04 2025	U.S.Government and Agency Securities	$ 1,196,371	—	—	—	1,196,371	1,196,371	—
U.S. TREASURY BILL ZERO% JAN 20 2026	U.S.Government and Agency Securities	$ 1,091,520	—	—	—	1,091,520	1,091,520	—
U.S. TREASURY BILL ZERO% SEP 09 2025	U.S.Government and Agency Securities	$ —	1,454,000	—	—	1,437,792	1,454,000	16,208
U.S. TREASURY BILL ZERO% OCT 07 2025	U.S.Government and Agency Securities	$ —	1,350,000	—	—	1,346,021	1,350,000	3,979
U.S. TREASURY BILL ZERO% NOV 04 2025	U.S.Government and Agency Securities	$ —	1,200,000	—	—	1,196,371	1,200,000	3,629

See accompanying independent auditors' report.

Actuarial Assumptions and Methods

The valuation of a defined benefit pension plan involves estimates and assumptions about the probability of events occurring far into the future. Examples include assumptions about future employment, mortality, and retirement. Below is a description of the actuarial assumptions and methods used in the valuation.

Funding Target Liability

Valuation Date: January 1, 2025

Demographic Information: The demographic information was provided as of January 1, 2025 by Cooperativa de Seguros de Vida de Puerto Rico. Although we did not audit the data, we did review the data for reasonableness.

Actuarial Cost Method: As required by PPA, the Traditional Unit Credit Cost Method was used.

Asset Valuation Method: Market Value of Assets

Anticipated Rate of Return on Plan Assets: 6.00%, based on Cooperativa de Seguros de Vida de Puerto Rico's expectation and expert opinions from the Herrans Group. The scope of this project did not allow for us to perform a refined analysis of the selected Expected Long-Term Rate of Return using recent capital market assumptions. However, based on the Plan's current asset allocation, and general research on forward looking expected returns, the selected Expected Long-Term Rate of Return does not significantly conflict with what we believe is reasonable for the assumption and purpose of the measurement.

Actuarial Valuation Software: For purposes of developing the projected future benefit payments as well as determining attributed liabilities and normal costs as of the valuation date, we utilized the ProVal software platform developed by Winklevoss Technologies. We believe this externally developed valuation system is appropriate, was used for its intended purpose, and did not produce unreasonable results.

Interest Rates for Minimum Required Contribution: The January 2025 funding segment rates were utilized as prescribed by ERISA Section 303(h) and elected by Cooperativa de Seguros de Vida de Puerto Rico. Below, please find the segment rates after reflection of the segment rate stabilization provisions of ERISA Section 303(h)(2)(C)(iv).

Segment	Interest Rate
Segment 1	5.00%
Segment 2	5.27%
Segment 3	5.50%

Effective Interest Rate
5.36%

Segment 1 is applied to benefit payments expected to be made in the first 5 years, segment 2 is applied to benefit payments expected to be made in the next 15 years and segment 3 is applied thereafter.

Interest Rates without reflection of the segment rate stabilization provisions of ERISA Section 303(h)(2)(C)(iv): Below, please find the segment rates without reflection of the segment rate stabilization provisions of ERISA Section 303(h)(2)(C)(iv). These rates were utilized to determine the low-default risk obligation measurement ("LDROM") of the accrued benefits as of the Valuation Date.

Segment	Interest Rate
Segment 1	5.00%
Segment 2	5.27%
Segment 3	5.40%

Effective Interest Rate
5.31%

Segment 1 is applied to benefit payments expected to be made in the first 5 years, segment 2 is applied to benefit payments expected to be made in the next 15 years and segment 3 is applied thereafter.

Mortality:

Base mortality table: The blended sex distinct RP-2014 mortality tables, adjusted backward from 2006 with Scale MP-2014.

Mortality improvements: The base mortality table is adjusted by projecting mortality improvements using Scale MP-2021 from the year 2007 through 2025, with an additional projection period of 8 years for males and 9 years for females. For ages below 80, the additional projection period is increased by 1 year for each year below age 80. For ages above 80, the additional projection period is reduced (but not below zero) by 1/3 year for each year above 80.

Retirement Incidence: Employees and terminated vested participants were assumed to retire at normal retirement age. Due to limited available experience, the assumption was determined by the prior actuary (Oriental Pension Consultants). The scope of our engagement did not allow us to determine the reasonability of this assumption.

Turnover: The Crocker Sarason T-3 Turnover Table. Due to limited available experience, the assumption was determined by the prior actuary (Oriental Pension Consultants). The scope of our engagement did not allow us to determine the reasonability of this assumption. Representative values of the assumed annual rates of retirement among members in active service are set forth in the following table:

Age	Percentage
30	4.83%
35	4.47%
40	3.84%
45	3.21%
50	1.52%
55	0.33%
60	0.00%

Disability: Rates of decrement due to disability are assumed to be 0%.

Mortality Table used to Annuitize Employee Contribution Account Balances/Convert Annuities to Actuarially Equivalent Lump Sum Amounts: The applicable mortality table for the determination of present values under ERISA Section 205(g)(3)(A). This table is currently a 50/50 blend of male and female rates from the 2025 sex distinct optional combined mortality tables, as prescribed under ERISA Section 303. Pre-retirement mortality was not assumed for annuitizing Employee Contribution Account Balances.

Interest Rates used to Annuitize Employee Contribution Account Balances/Convert Annuities to Actuarially Equivalent Lump Sum Amounts: The applicable funding segment rates identified earlier based on the purpose for which the liability was calculated, as prescribed.

Administrative Expenses: Actual plan expenses, not including investment advisory fees, paid out of the trust during the previous plan.

Spouse Assumptions: 80% of participants not currently collecting benefits are assumed to be married, with male spouses assumed to be three years older and female spouses assumed to be three years younger than the participant. This assumption was based on national averages.

Form of Benefit: The assumed form of benefit was based on the Plan provisions.

Death:	Single Participants: Beneficiaries are assumed to elect an immediate lump sum distribution. Married Participants: Beneficiaries are assumed to elect the survivor portion of the qualified joint and survivor annuity.
Termination:	Participants are assumed to defer receipt of a 5 Year Certain and Life Annuity until their normal retirement date.
Retirement:	Participants are assumed to elect an immediate 5 Year Certain and Life Annuity.

All assumptions used in determining the low-default risk obligation measurement were consistent with those used in determining the Funding Target Liability, except the interest rates which were disclosed above.

Actuarial Present Value of Accumulated Plan Benefits (ASC 960)

Interest Rate: The segment interest rates in the table below. This assumption was selected based on the November 2024 segment rates under ERISA Section 303(h) for the plan year beginning on the valuation date.

Segment	Interest Rate
Segment 1	4.66%
Segment 2	5.25%
Segment 3	5.57%

Effective Interest Rate
5.36%

Segment 1 is applied to benefit payments expected to be made in the first 5 years, segment 2 is applied to benefit payments expected to be made in the next 15 years and segment 3 is applied thereafter.

Interest Rates used to Annuitize Employee Contribution Account Balances/Convert Annuities to Actuarially Equivalent Lump Sum Amounts: The applicable segment rates under ERISA Section 303(h) identified above based on the purpose for which the liability was calculated, as prescribed.

Unless specifically mentioned, all remaining assumptions for the Actuarial Present Value of Accumulated Plan Benefits remain the same as described for the Funding Target Liability above.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4j – Schedule of Reportable Transactions

Year ended December 31, 2025

(a) Identity of party involved	(b) Description of assets	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
U.S. TREASURY BILL ZERO% OCT 07 2025	U.S.Government and Agency Securities	$ 1,346,021	—	—	—	1,346,021	1,346,021	—
U.S. TREASURY BILL ZERO% NOV 04 2025	U.S.Government and Agency Securities	$ 1,196,371	—	—	—	1,196,371	1,196,371	—
U.S. TREASURY BILL ZERO% JAN 20 2026	U.S.Government and Agency Securities	$ 1,091,520	—	—	—	1,091,520	1,091,520	—
U.S. TREASURY BILL ZERO% SEP 09 2025	U.S.Government and Agency Securities	$ —	1,454,000	—	—	1,437,792	1,454,000	16,208
U.S. TREASURY BILL ZERO% OCT 07 2025	U.S.Government and Agency Securities	$ —	1,350,000	—	—	1,346,021	1,350,000	3,979
U.S. TREASURY BILL ZERO% NOV 04 2025	U.S.Government and Agency Securities	$ —	1,200,000	—	—	1,196,371	1,200,000	3,629

See accompanying independent auditors' report.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
PLAN DE PENSIONES DE BENEFICIOS DEFINIDOS PARA LA COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
COOPERATIVA DE SEGUROS DE VIDA DE PUERTO RICO

D Employer Identification Number (EIN)
66-0231517

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [X] 101-500 [ ] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	18,776,239
b Actuarial value	**2b**	18,776,239

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	57	5,651,580	5,651,580
b For terminated vested participants	204	5,309,798	5,309,798
c For active participants	87	5,374,351	5,374,351
d Total	348	16,335,729	16,335,729

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	5.36%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	73,491
c Target normal cost	**6c**	73,491

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

H. D. Gaitan
Signature of actuary

September 22, 2026
Date

HECTOR D. GAITAN, FCA, ASA, EA
Type or print name of actuary

2604646
Most recent enrollment number

BPAS Trust Company of Puerto Rico
Firm name

787-340-5593
Telephone number (including area code)

1225 Ponce de Leon Avenue
VIG Tower, Suite 804
San Juan PR 00907
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	735,120
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	735,120
10	Interest on line 9 using prior year's actual return of 8.44%	0	62,044
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		193,528
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.24%		10,141
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		203,669
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	797,164

Part III Funding Percentages

14	Funding target attainment percentage	14	110.05%
15	Adjusted funding target attainment percentage	15	114.93%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	103.60%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
07/08/2025	100,000	0			
10/08/2025	50,000	0			
12/03/2025	50,000	0			
		Totals ▶	18(b)	200,000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	193,166

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
5.00 %	5.27 %	5.50%	

b Applicable month (enter code)	21b	0
22 Weighted average retirement age	22	65

23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a		73,491
b Excess assets, if applicable, but not greater than line 31a	31b		73,491
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		0	0
b Waiver amortization installment		0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34		0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	193,166
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	193,166
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

Plan qualified only and exclusively under the Puerto Rico Code. PBGC has notified the Plan Sponsor that the plan is not covered by Title IV of ERISA

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico
EIN: 66-0231517; PN: 001

All Participants are assumed to retire at the Normal Retirement Age (62 or 65, depending on the participation date), or current age, if later.

Plan Provisions

This summary is intended as an outline of plan provisions and does not alter the intent or meaning of the provisions contained in the plan document.

Plan Sponsor: **Cooperativa de Seguros de Vida de Puerto Rico**
EIN/PN: **66-0231517/001**

Effective Date:

July 1, 1965. Last amended on April 29, 2013 to adopt de Puerto Rico Code of 2011.

Plan Year:

Calendar year.

Eligibility for Participation:

All employees participating on January 1, 1990 shall continue participation pursuant to the Plan rules in effect at that time. After that date, participation requirement is attainment of age eighteen (18) and completion of one (1) Year of Service. Plan was amended on May 28, 2008 to freeze Plan participation so no employees can enter the Plan on or after August 1, 2008.

Year of Service:

A Plan year in which the participant completes one thousand (1,000) hours of service.

Credited Service:

After July 1, 1965, credited service is continuous service. One (1) year of credited service will be granted in the last partial year of employment for completion of 1,000 hours of service. For benefit accrual purposes, no credited service is credited after December 31, 2008.

Normal Retirement Date:

The normal retirement date for participants on December 31, 1996 is the first of the month coincident with or following the attainment of age sixty two (62). The normal retirement date for participants after that date is the first of the month coincident with or next following age sixty five (65).

Early Retirement Eligibility:

Early retirement eligibility for participants hired on or before December 31, 1996 is attainment of age fifty (50) and completion of ten (10) years of credited service. For all others, eligibility is the attainment of age fifty five (55) and completion of ten (10) years of credited service.

Actuarial Equivalence:

The actuarial equivalent of a given amount of benefit payable in another manner, at another time, or by other means. Before July 31, 2008, an interest rate of 6% and the Mortality Table UP-84 behind 1 year. After July 31, 2008 the actuarially equivalent value of an accrued benefit shall be determined using the actuarial assumptions required by the Pension Protection Act for such purposes, pursuant to ERISA section 205(g)(3)(A) (the Applicable Mortality Table and the Applicable Interest Rate).

Mandatory Contributions:

Participant contributions of 4.00% of compensation are required for Plan participation. No mandatory contributions are permitted after December 31, 2008 (the "Plan Freeze Date"). Mandatory contributions are credited with interest every year based on the 120% AFR rates in effect on January of every year.

Pre-1982 Participant Contributions:

All pre 1982 contributions made by participants are credited with 6.00% annually up to the Participant's normal retirement date or earlier date of retirement or termination of employment. The actuarially equivalent value of these pre 1982 contributions represent an additional benefit to the participant and is added to the participant's accrued benefit.

Voluntary Contributions:

Participants were allowed to make voluntary contributions to the Plan until April 30, 2003. Voluntary contributions are credited with 6.00% annually up to the participant's normal retirement date or earlier date of retirement or termination of employment. The actuarially equivalent value of these voluntary contributions represent an additional benefit to the participant and is added to the participant's accrued benefit.

Moral Debt Contributions:

Moral debt contributions were contributions credited to participants when the actuarially determined minimum funding requirements as a percentage of payroll did not exceed certain thresholds. These moral debt contributions are credited with interest every year based on the 120% AFR rates in effect on January of every year. The actuarially equivalent value of these moral debt contributions represent an additional benefit to the participant and is added to the participant's accrued benefit.

5-Year Social Security Wage Base Average:

Average of the Social Security wage bases for the final five consecutive years in which the participant received compensation from the employer. The wage bases after December 31, 2008 shall be disregarded for purposes of determining this average in the determination of a participant's accrued benefit.

Compensation

Base salary plus agent commissions plus applicable sales distributions received by executives and supervisors, exclusive of overtime, Christmas bonus, and other irregular payments, but including amounts deferred under a 1081.01(d) plan sponsored by the employer. Compensation after December 31, 2008 shall not be considered for purposes of the pension benefit.

Final Average Compensation:

Average of the final five (5) consecutive years in which the participant received compensation from the Employer. Compensation after December 31, 2008 shall not be considered for purposes of determining the final average compensation in the determination of a participant's accrued benefit.

Vesting on Termination of Employment:

Participants are 100% vested in their accrued benefit upon completion of five (5) Years of Service. Participants are always 100% in their mandatory contributions, voluntary contributions, pre 1982 contributions, and moral debt contributions.

Accrued Benefit:

The sum of (a), (b), and (c) as follows:

(a) The greater of (i) or (ii)

(i) The benefit computed as of January 1, 1982, based on the pre 1982 employee contributions.

(ii) The actuarially equivalent benefit generated by converting the pre 1982 employee contributions with interest to a five (5) year certain and life annuity at the date of determination.

(b) For all participants employed before January 1, 2004, the greater of (i) or (ii) below. For participants on or after January 1, 2004, only item (ii) below, as follows:

(i) The accumulated accrued benefit at December 31, 2003, which is the difference of (A) minus (B) below:

(A) 3.20% of the final average compensation at that date multiplied by credited service at that date, up to thirty (30) years of credited service.

(B) 0.75% of final average compensation at that date up to the 5-Year Social Security wage base average multiplied by credited service at that date, up to thirty (30) years of credited service.

(ii) 2.167% of the final average compensation multiplied by credited service, up to thirty (30) years of credited service.

The monthly benefit resulting from this item (b) must be at least $100 for a participant who has completed at least ten (10) years of credited service.

(c) The actuarially equivalent benefit generated by converting the voluntary and moral debt employee contributions with interest to a five (5) year certain and life annuity.

The accrued benefit was frozen effective on December 31, 2008.

Normal Retirement Benefit:

The accrued benefit at the applicable normal retirement date.

Early Retirement Benefit:

The actuarially equivalent value of the accrued benefit at the applicable early retirement date.

Vested Deferred Benefit:

The accrued benefit as of the termination of employment payable commencing at the applicable normal retirement date. A participant that terminates employment having completed the required numbers of years of credited service for early retirement eligibility may also elect to receive an actuarially equivalent benefit upon attainment of the age requirement for early retirement.

Disability Benefit:

There is no special disability benefit under this Plan. The pension benefit payable to a disabled employee is the benefit that would be payable to a terminating employee.

Death Benefit:

Single participants: The beneficiary of a deceased vested participant shall receive in a single lump sum the greater of (i) or (ii), as follows:

(i) The actuarially equivalent value of his accrued benefit at the date of death, or
(ii) The mandatory employee contributions with interest at the date of death.

In addition to the above, the deceased participant shall also receive his pre 1982, voluntary, and moral debt contributions with interest at the date of death.

Married participants who have attained early retirement eligibility: The surviving spouse (or designated beneficiary) will receive an immediate annuity which will be equal to one-half of the joint and 50% survivor actuarially equivalent of the participant's accrued benefit at the time of death.

Married participants who have attained five (5) years of service, but not eligibility for early retirement: the surviving spouse (or designated beneficiary) will receive, starting on the earliest date when the participant would have been eligible for early retirement, an annuity will be equal to one-half of the joint and 50% survivor actuarially equivalent of the participant's accrued benefit at that earliest retirement date.

Should the deceased participant's spouse also die before that participant's earliest retirement date, then the spouse's or beneficiary's estate shall receive the actuarially equivalent value of the benefit such spouse or beneficiary would have received had she survived to the deceased participant's earliest retirement date.

Normal Form of Benefit:

For single participants, a five (5) year certain & life annuity. Married participants received the actuarially equivalent value of the benefit payable to a single participant, but payable as a Joint and 50% survivor annuity.

Optional Forms of Benefit:

The following actuarially equivalent optional forms of benefit are available under the Plan:

1. Life annuity.
2. 5,10,15,20 year certain & life annuity.
3. 5,10,15,20 year certain only annuity.
4. 50%, 75%, 100% joint & survivor annuity (participant's benefit is not reduced if the spouse / beneficiary dies first).
5. 50%, 75%, 100% joint & contingent annuity (participant's benefit is reduced if the spouse / beneficiary dies first).

Lump Sum. Participants employed on or before December 31, 1996 are eligible for a full lump sum benefit, actuarially equivalent to the accrued benefit at the time of distribution.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value		(d) Cost	(e) Current Value
-	**Money Market Funds:**				
	PREFERRED DEPOSIT	Money Market		$ 189,732	189,732
	ML BANK DEPOSIT PROGRAM	Money Market		115	115
	BLF FEDFUND CASH RESERVE	Money Market		341,502	341,502
	BLF FEDFUND CASH RESERVE	Money Market		153,245	153,245
		Total Money Market Funds		$ 684,594	684,594
	Mutual Funds:				
-	NOMURA CORPORATE BOND	2,295.00	Shares	$ 40,208	35,320
-	AMG GW&K MUNICIPAL	71,136.84	Shares	679,854	621,025
-	ANGEL OAK MULTI STRATEGY	80,241.00	Shares	819,867	701,306
-	BATS SHORT DUR TAX SERIES S	0.07	Shares	1	1
-	BATS CORP CREDIT SERIES C	12,979.67	Shares	136,133	118,375
-	BATS MORTGAGE SERIES M	103,900.58	Shares	1,002,755	888,350
-	BATS SECURITIZED SERIES A	11,498.00	Shares	107,736	110,151
-	PIMCO INCOME FUND CL I2	64,002.00	Shares	762,945	703,382
-	PRINCIPAL SPECTRUM PRFRD	67,557.00	Shares	699,800	632,334
-	ARTISAN HIGH INCOME	3,745.00	Shares	33,467	34,454
-	AVANTIS EMERGING MARKETS	3,132.00	Shares	236,336	241,227
-	BLACKROCK TECHNOLOGY	1,565.00	Shares	108,225	121,929
-	FUTURE AI AND TECG ETF	5,395.00	Shares	175,810	179,654
-	GLOBAL X FDS GLOBAL X	1,833.00	Shares	121,648	118,760
-	INVESCO S & P 500	2,493.00	Shares	260,881	297,465
-	ISHARES U.S. THEMATIC	7,731.00	Shares	264,926	298,107
-	ISHARES S&P 500 VALUE	3,642.00	Shares	692,501	772,359
-	ISHARES TR MSCI EAFE	6,706.00	Shares	404,855	478,875
-	ISHARES IBOXX $	312.00	Shares	34,927	34,379
-	ISHARES U.S. EQUITY FAC	11,283.00	Shares	540,481	686,119
-	ISHARES S&P 500	5,106.00	Shares	439,721	629,366
-	ISHARES S&P 100	1,658.00	Shares	510,827	568,644
-	ISHARES EDGE MSCI	1,496.00	Shares	255,747	297,135
-	ISHARES INTERNATIONAL	2,977.00	Shares	150,686	148,878
-	ISHARES INC CORE MSCI	8,646.00	Shares	465,945	581,184
-	ISHARES TR CORE MSCI EAF	4,450.00	Shares	298,151	398,097
-	JP MORGAN EMERGING	3,431.00	Shares	99,875	142,833
-	JP MORGAN US EQUITY FD	10,988.00	Shares	258,212	295,357
-	JP MORGAN LARGE CAP	19,741.00	Shares	382,233	414,956
-	JP MORGAN LARGE CAP	4,790.00	Shares	279,657	391,822
-	JP MORGAN VALUE	4,245.00	Shares	158,431	155,112
-	JP MORGAN CORE PLUS BOND	4,683.00	Shares	33,998	34,233
-	JP MORGAN BETABUILDERS	1,476.00	Shares	68,501	68,634
-	JP MORGAN US RESEARCH	11,899.00	Shares	523,260	571,152
-	JP MORGAN INTERNATIONAL	3,565.00	Shares	89,088	105,346
-	PARNASSUS CORE EQUITY	3,081.00	Shares	162,542	172,967
-	VANGUARD MID-CAP ETF	176.00	Shares	45,182	51,079
-	VANGUARD RUSSELL 2000	2,618.00	Shares	201,366	260,543
-	VANGUARD 500 INDEX FUND	1,030.00	Shares	421,814	645,944
-	WORLD GOLD TR SHS SPDR	1,728.00	Shares	111,305	147,520
		Total Mutual Funds		$ 12,079,897	13,154,374

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	Corporate Bonds:			
-	MORGAN STANLEY	RATE VAR% MATURES JUL 22 2028		
		35,000.00 Shares	$ 35,009	34,761
-	JP MORGAN CHASE & CO	RATE VAR% MATURES DEC 5 2029		
		64,000.00 Shares	65,225	64,659
-	COMCAST CORP	RATE 4.250% MATURES OCT 15 2030		
		64,000.00 Shares	65,467	64,026
-	GENERAL ELEC CAP CORP	RATE 5.875% MATURES JAN 14 2038		
		48,000.00 Shares	53,131	52,009
-	ENTERPRISE PRODUCTS OPER	RATE 5.700% MATURES FEB 15 2042		
		29,000.00 Shares	30,715	29,554
-	CVS HEALTH CORP	RATE 5.050% MATURES MAR 25 2048		
		51,000.00 Shares	50,495	44,959
-	CVS HEALTH CORP	RATE 5.000% MATURES FEB 20 2026		
		42,000.00 Shares	41,860	42,016
-	JP MORGAN CHASE & CO	RATE VAR% MATURES MAY 1 2028		
		39,000.00 Shares	40,140	38,780
-	US BANCORP	RATE VAR% MATURES JUN 29 2029		
		63,000.00 Shares	63,942	65,482
-	GENERAL MOTORS FINL CO	RATE 5.500% MATURES JUL 15, 2029		
		44,000.00 Shares	44,222	45,613
-	TRUIST FINANCIAL CORP	RATE VAR% MATURES JAN 29 2030		
		45,000.00 Shares	44,963	46,590
-	UNITEDHEALTH GROUP INC	RATE 2.000% MATURES MAY 15 2030		
		46,000.00 Shares	46,940	41,953
-	LOWE'S COS INC	RATE 1.700% MATURES OCT 15 2030		
		52,000.00 Shares	52,127	46,186
-	GOLDMAN SACHS GROUP INC.	RATE VAR% MATURES JAN 28 2031		
		45,000.00 Shares	45,080	46,469
-	CITIGROUP INC	RATE VAR% MATURES JUN 03 2031		
		49,000.00 Shares	50,586	45,400
-	WELLS FARGO & COMPANY	RATE VAR% MATURES JUL 25 2034		
		49,000.00 Shares	49,210	51,372
-	ENERGY TRANSFER LP	RATE 5.700% MATURES APR 01 2035		
		62,000.00 Shares	64,565	64,178
-	SYNOPSYS INC	RATE 5.150% MATURES APR 01 2035		
		55,000.00 Shares	56,553	55,899
-	CAPITAL ONE FINANC IAL CO	RATE VAR% MATURES JAN 30 2036		
		45,000.00 Shares	45,255	46,975
-	JP MORGAN CHASE & CO	RATE VAR% MATURES JUL 23 2036		
		52,000.00 Shares	54,076	53,791
-	ORACLE CORP	RATE 3.600% MATURES APR 01 2040		
		39,000.00 Shares	44,679	28,924
-	ENTERPRISE PRODUCTS OPER	RATE 4.450% MATURES FEB 15 2043		
		28,000.00 Shares	29,448	24,607
-	MORGAN STANLEY	RATE 4.375% MATURES JAN 22 2047		
		31,000.00 Shares	38,183	26,766
-	ABBVIE	RATE 4.250% MATURES NOV 21 2049		
		48,000.00 Shares	58,446	39,531
-	COMCAST CORP	RATE 3.450% MATURES FEB 01 2050		
		55,000.00 Shares	62,066	36,771
-	VERIZON COMMUNICATIONS	RATE 2.875% MATURES NOV 20 2050		
		52,000.00 Shares	53,488	32,238
		Balance carried forward	$ 1,285,871	1,169,509

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
		Balance brought forward	$ 1,285,871	1,169,509
-	USD ENBRIDGE INC	RATE 6.700% MATURES NOV 15 2053 41,000.00 Shares	42,032	45,012
-	RTX CORP	RATE 6.400% MATURES MAR 15 2054 46,000.00 Shares	47,332	50,621
-	CONNECTICUT ST SPL TAX	RATE 5.000% MATURES NOV 01 2041 50,000.00 Shares	59,461	53,651
-	ILLINOIS ST TOLL HWY	RATE 5.250% MATURES JAN 01 2045 40,000.00 Shares	43,455	42,714
-	METRO NSH-DVD CO TN ELEC	RATE 5.000% MATURES MAY 15 2046 60,000.00 Shares	70,866	62,312
-	MASSACHUSETTS ST GO	RATE 5.000% MATURES JUL 01 2048 40,000.00 Shares	45,508	41,102
-	PENNSYLVANIA ST TPK	RATE 5.000% MATURES DEC 01 2048 55,000.00 Shares	55,615	57,561
-	HARRIS CNTY TEX TOLL RD	RATE 5.250% MATURES AUG 15 2049 40,000.00 Shares	43,523	42,662
-	LAFAYETTE LA UTILS REV	RATE 5.000% MATURES NOV 01 2049 80,000.00 Shares	85,412	83,094
-	CHICAGO ILL TRAN AUTH	RATE 5.000% MATURES DEC 01 2049 80,000.00 Shares	85,453	82,888
-	WAYNE CNTY MICH ARPT	RATE 5.500% MATURES DEC 01 2050 50,000.00 Shares	52,693	54,310
-	NEW YORK NY MUN WFA	RATE 5.250% MATURES JUN 15 2053 40,000.00 Shares	44,205	42,228
-	NEW YORK NY CTY TRANS	RATE 5.000% MATURES NOV 01 2053 80,000.00 Shares	85,132	82,205
-	LOWER COLO RIV AT TGEX	RATE 5.250% MATURES MAY 15 2054 60,000.00 Shares	64,904	62,644
-	UNIVERSITY CINCINNATI	RATE 5.250% MATURES JUN 01 2054 50,000.00 Shares	53,123	52,280
-	OKLAHOMA CITY OKLA WTR	RATE 5.000% MATURES JUL 01 2054 40,000.00 Shares	43,066	41,955
-	METROPOLITAN GOVT CO TN	RATE 5.000% MATURES OCT 01 2054 80,000.00 Shares	86,160	84,314
-	COLUMBUS OHIO REGL ARPT	RATE 5.250% MATURES JAN 01 2055 50,000.00 Shares	53,396	52,609
-	NEW YORK NY MUN WFA	RATE 5.000% MATURES JUN 15 2055 60,000.00 Shares	62,190	62,300
-	METROPOLITAN ATLANTA	RATE 5.000% MATURES JUL 01 2055 60,000.00 Shares	63,012	62,614
-	BATTERY PK CITY AUTH NY	RATE 5.250% MATURES NOV 01 2055 30,000.00 Shares	31,942	32,047
-	MEMPHIS TENN LT GAS & WT	RATE 5.000% MATURES DEC 01 2055 50,000.00 Shares	52,471	52,196
-	PENNSYLVANIA ST TPK	RATE 5.250% MATURES DEC 01 2058 60,000.00 Shares	61,629	64,213
-	ALLEGHENY CNTY PA SAN	RATE 5.250% MATURES DEC 01 2058 35,000.00 Shares	36,803	36,990
-	MICHIGAN ST BLDG AUTH	RATE 5.250% MATURES APR 15 2059 60,000.00 Shares	64,631	63,381
		Total Corporate Bonds	$ 2,719,885	2,577,412

See accompanying independent auditors' report.

Plan de Pensiones de Beneficios Definidos para la Cooperativa de Seguros de Vida de Puerto Rico

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	U.S. Government and Agency Securities:			
-	U.S. TREASURY NOTE	RATE 4.375% MATURES NOV 30 2028 73,000.00 Shares	$ 79,100	74,657
-	U.S. TREASURY NOTE	RATE 1.750% MATURES JAN 31 2029 146,000.00 Shares	143,833	138,335
-	U.S. TREASURY NOTE	RATE 4.250% MATURES FEB 28 2029 66,000.00 Shares	64,760	67,335
-	U.S. TREASURY NOTE	RATE 4.250% MATURES JAN 31 2030 82,000.00 Shares	82,155	83,823
-	U.S. TREASURY NOTE	RATE 1.500% MATURES FEB 15 2030 52,000.00 Shares	53,734	47,763
-	U.S. TREASURY NOTE	RATE 4.000% MATURES MAR 31 2030 57,000.00 Shares	57,350	57,726
-	U.S. TREASURY NOTE	RATE 4.125% MATURES AUG 31 2030 243,000.00 Shares	240,898	247,272
-	FEDERAL NATL MTG ASSOC	RATE 6.625% MATURES NOV 15 2030 29,000.00 Shares	36,534	32,699
-	U.S. TREASURY NOTE	RATE 4.250% MATURES JUN 30 2031 117,000.00 Shares	118,053	119,651
-	U.S. TREASURY NOTE	RATE 4.500% MATURES DEC 31 2031 86,000.00 Shares	87,261	88,996
-	U.S. TREASURY NOTE	RATE 2.875% MATURES MAY 15 2032 119,000.00 Shares	110,627	112,204
-	U.S. TREASURY NOTE	RATE 4.35% MATURES MAY 15 2034 90,000.00 Shares	91,999	91,972
-	U.S. TREASURY NOTE	RATE 4.625% MATURES FEB 15 2035 76,000.00 Shares	78,384	78,889
-	U.S. TREASURY NOTE	RATE 4.250% MATURES MAY 15 2035 44,000.00 Shares	43,204	44,364
-	FNMA PAD 8529	RATE 4.500% MATURES 2040 140,000.00 Shares	3,791	3,420
-	U.S. TREASURY BOND	RATE 1.875% MATURES FEB 15 2041 67,000.00 Shares	54,236	46,806
-	U.S. TREASURY BOND	RATE 4.000% MATURES NOV 15 2042 59,000.00 Shares	60,850	54,077
-	U.S. TREASURY BOND	RATE 3.625% MATURES FEB 15 2044 35,000.00 Shares	48,491	30,047
-	U.S. TREASURY BOND	RATE 4.750% MATURES FEB 15 2045 45,000.00 Shares	46,054	44,771
-	U.S. TREASURY BOND	RATE 5.000% MATURES MAY 15 2045 130,000.00 Shares	132,998	133,453
-	U.S. TREASURY BOND	RATE 2.500% MATURES MAY 15 2046 115,000.00 Shares	139,915	79,763
-	FNMA PMA 3416	RATE 4.500% MATURES 2048 66,000.00 Shares	5,631	5,148
-	FHLMC SD 8001	RATE 3.500% MATURES 2049 221,000.00 Shares	22,378	19,795
-	FHLMC SD 8016	RATE 3.000% MATURES 2049 151,000.00 Shares	26,214	22,330
-	FNMA PMA 3939	RATE 3.500% MATURES 2050 67,000.00 Shares	10,446	9,200
-	U.S. TREASURY BOND	RATE 1.875% MATURES FEB 15 2051 91,000.00 Shares	73,866	50,854
-	FNMA PMA 4357	RATE 3.000% MATURES 2051 81,000.00 Shares	46,875	40,059
-	FNMA PMA 4378	RATE 2.000% MATURES 2051 97,000.00 Shares	72,823	58,808
-	FNMA PMA 4379	RATE 2.500% MATURES 2051 71,000.00 Shares	49,733	41,091
-	FNMA PMA 4842	RATE 5.500% MATURES 2052 125,000.00 Shares	93,808	94,805
-	FNMA PMA 5026	RATE 3.500% MATURES 2053 13,000.00 Shares	10,089	10,251
-	FHLMC SD 4122	RATE 3.000% MATURES 2053 12,000.00 Shares	8,418	9,484
-	U.S. TREASURY BILL	RATE ZERO% MATURES JAN 20 2026 1,100.00 Shares	1,091,520	1,098,053
-	U.S. TREASURY NOTE	RATE 3.250% MATURES JUN 30 2027 45,000.00 Shares	44,100	44,845
-	U.S. TREASURY NOTE	RATE 4.125% MATURES SEP 30 2027 115,000.00 Shares	113,477	116,230
-	U.S. TREASURY NOTE	RATE 4.250% MATURES FEB 15 2028 127,000.00 Shares	127,620	128,939
	Total U.S. Government and Agency Securities		$ 3,571,225	3,427,915
			$ 19,055,601	19,844,295

See accompanying independent auditors' report.