

AMENDED GENERAL INFORMATION SHEET (GIS)

FOR THE YEAR 2021

STOCK CORPORATION

GENERAL INSTRUCTIONS:

1. FOR USER CORPORATION: THIS GIS SHOULD BE SUBMITTED WITHIN THIRTY (30) CALENDAR DAYS FROM THE DATE OF THE ANNUAL STOCKHOLDERS' MEETING. **DO NOT LEAVE ANY ITEM BLANK.** WRITE "N.A." IF THE INFORMATION REQUIRED IS NOT APPLICABLE TO THE CORPORATION OR "NONE" IF THE INFORMATION IS NON-EXISTENT. IF THE ANNUAL STOCKHOLDERS' MEETING IS HELD ON A DATE OTHER THAN THAT STATED IN THE BY-LAWS, THE GIS SHALL BE SUBMITTED WITHIN THIRTY (30) CALENDAR DAYS AFTER THE ELECTION OF THE DIRECTORS, TRUSTEES AND OFFICERS OF THE CORPORATION AT THE ANNUAL MEMBERS' MEETING.
2. IF NO MEETING IS HELD, THE CORPORATION SHALL SUBMIT THE GIS NOT LATER THAN JANUARY 30 OF THE FOLLOWING YEAR. HOWEVER, SHOULD AN ANNUAL STOCKHOLDERS' MEETING BE HELD THEREAFTER, A NEW GIS SHALL BE SUBMITTED/FILED.
3. THIS GIS SHALL BE ACCOMPLISHED IN ENGLISH AND CERTIFIED AND SWORN TO BY THE **CORPORATE SECRETARY** OF THE CORPORATION.
4. THE SEC SHOULD BE TIMELY APPRISED OF RELEVANT CHANGES IN THE SUBMITTED INFORMATION AS THEY ARISE. FOR CHANGES RESULTING FROM ACTIONS THAT AROSE BETWEEN THE ANNUAL MEETINGS, THE CORPORATION SHALL SUBMIT AMENDED GIS CONTAINING THE NEW INFORMATION TOGETHER WITH A COVER LETTER SIGNED THE CORPORATE SECRETARY OF THE CORPORATION. THE AMENDED GIS AND COVER LETTER SHALL BE SUBMITTED WITHIN SEVEN (7) DAYS AFTER SUCH CHANGE OCCURED OR BECAME EFFECTIVE.
5. SUBMIT FOUR (4) COPIES OF THE GIS TO THE RECEIVING SECTION AT THE SEC MAIN OFFICE, OR TO SEC SATELLITE OFFICES OR EXTENSION OFFICES. ALL COPIES SHALL UNIFORMLY BE ON A4 OR LETTER-SIZED PAPER. THE PAGES OF ALL COPIES SHALL USE ONLY ONE SIDE
6. **ONLY THE GIS ACCOMPLISHED IN ACCORDANCE WITH THESE INSTRUCTIONS SHALL BE CONSIDERED AS HAVING BEEN FILED.**
7. THIS GIS MAY BE USED AS EVIDENCE AGAINST THE CORPORATION AND ITS RESPONSIBLE DIRECTORS/OFFICERS FOR ANY VIOLATION OF EXISTING LAWS, RULES AND REGULATIONS

===== PLEASE PRINT LEGIBLY =====

CORPORATE NAME: INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)		DATE REGISTERED: 10/14/1991	
BUSINESS/TRADE NAME: INSULAR HEALTH CARE, INC.		FISCAL YEAR END: Dec-31	
SEC REGISTRATION NUMBER: AS091-196826			
DATE OF ANNUAL MEETING PER BY-LAWS: LAST WEDNESDAY OF APRIL		CORPORATE TAX IDENTIFICATION NUMBER (TIN)	
ACTUAL DATE OF ANNUAL MEETING: 22-Apr-21		WEBSITE/URL ADDRESS: www.insularhealthcare.com.ph	
COMPLETE PRINCIPAL OFFICE ADDRESS: 2/F Insular Health Care Building, 167 Dela Rosa corner Legazpi Streets, Legazpi Village, Makati City		E-MAIL ADDRESS: inquiry@insularhealthcare.com.ph	
COMPLETE BUSINESS ADDRESS: 2/F Insular Health Care Building, 167 Dela Rosa corner Legazpi Streets, Legazpi Village, Makati City		FAX NUMBER: (632) 8813-7903	
OFFICIAL E-MAIL ADDRESS ocs@insularhealthcare.com.ph	ALTERNATE E-MAIL ADDRESS gvpena@insularhealthcare.com.ph	OFFICIAL MOBILE NUMBER 0917-564-3068	ALTERNATE MOBILE NUMBER 0917-530-1119
NAME OF EXTERNAL AUDITOR & ITS SIGNING PARTNER: SGV & CO / MS. JANET PARAISO		SEC ACCREDITATION NUMBER (if applicable): 0778-AR-3 (Group A)	TELEPHONE NUMBER(S): (632) 8813-0131
PRIMARY PURPOSE/ACTIVITY/INDUSTRY PRESENTLY ENGAGED IN: TO ENGAGE IN HEALTH CARE SERVICE		INDUSTRY CLASSIFICATION:	GEOGRAPHICAL CODE:

===== INTERCOMPANY AFFILIATIONS =====

PARENT COMPANY	SEC REGISTRATION NO.	ADDRESS
THE INSULAR LIFE ASSURANCE COMPANY, LTD.	C-171	Insular Life Corporate Centre, Insular Life Drive, Filinvest Corporate City, Alabang, Muntinlupa City
SUBSIDIARY/AFFILIATE	SEC REGISTRATION NO.	ADDRESS

NOTE: USE ADDITIONAL SHEET IF NECESSARY

STOCK CORPORATION

PLEASE PRINT LEGIBLY

Corporate Name: **INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)**

A. Is the Corporation a covered person under the Anti Money Laundering Act (AMLA), as amended? (Rep. Acts. 9160/9164/10167/10365) Yes No

Please check the appropriate box:

<p>1.</p> <p><input type="checkbox"/> a. Banks</p> <p><input type="checkbox"/> b. Offshore Banking Units</p> <p><input type="checkbox"/> c. Quasi-Banks</p> <p><input type="checkbox"/> d. Trust Entities</p> <p><input type="checkbox"/> e. Non-Stock Savings and Loan Associations</p> <p><input type="checkbox"/> f. Pawnshops</p> <p><input type="checkbox"/> g. Foreign Exchange Dealers</p> <p><input type="checkbox"/> h. Money Changers</p> <p><input type="checkbox"/> i. Remittance Agents</p> <p><input type="checkbox"/> j. Electronic Money Issuers</p> <p><input type="checkbox"/> k. Financial Institutions which Under Special Laws are subject to Bangko Sentral ng Pilipinas' (BSP) supervision and/or regulation, including their subsidiaries and affiliates.</p>	<p>4. <input type="checkbox"/> Jewelry dealers in precious metals, who, as a business, trade in precious metals</p>
<p>2.</p> <p><input type="checkbox"/> a. Insurance Companies</p> <p><input type="checkbox"/> b. Insurance Agents</p> <p><input type="checkbox"/> c. Insurance Brokers</p> <p><input type="checkbox"/> d. Professional Reinsurers</p> <p><input type="checkbox"/> e. Reinsurance Brokers</p> <p><input type="checkbox"/> f. Holding Companies</p> <p><input type="checkbox"/> g. Holding Company Systems</p> <p><input type="checkbox"/> h. Pre-need Companies</p> <p><input type="checkbox"/> i. Mutual Benefit Association</p> <p><input type="checkbox"/> j. All Other Persons and entities supervised and/or regulated by the Insurance Commission (IC)</p>	<p>5. <input type="checkbox"/> Jewelry dealers in precious stones, who, as a business, trade in precious stone</p>
<p>3.</p> <p><input type="checkbox"/> a. Securities Dealers</p> <p><input type="checkbox"/> b. Securities Brokers</p> <p><input type="checkbox"/> c. Securities Salesman</p> <p><input type="checkbox"/> d. Investment Houses</p> <p><input type="checkbox"/> e. Investment Agents and Consultants</p> <p><input type="checkbox"/> f. Trading Advisors</p> <p><input type="checkbox"/> g. Other entities managing Securities or rendering similar services</p> <p><input type="checkbox"/> h. Mutual Funds or Open-end Investment Companies</p> <p><input type="checkbox"/> i. Close-end Investment Companies</p> <p><input type="checkbox"/> j. Common Trust Funds or Issuers and other similar entities</p> <p><input type="checkbox"/> k. Transfer Companies and other similar entities</p> <p><input type="checkbox"/> l. Other entities administering or otherwise dealing in currency, commodities or financial derivatives based there on</p> <p><input type="checkbox"/> m. Entities administering of otherwise dealing in valuable objects</p> <p><input type="checkbox"/> n. Entities administering or otherwise dealing in cash Substitutes and other similar monetary instruments or property supervised and/or regulated by the Securities and Exchange Commission (SEC)</p>	<p>6. Company service providers which, as a business, provide any of the following services to third parties:</p> <p><input type="checkbox"/> a. acting as a formation agent of juridical persons</p> <p><input type="checkbox"/> b. acting as (or arranging for another person to act as) a director or corporate secretary of a company, a partner of a partnership, or a similar position in relation to other juridical persons</p> <p><input type="checkbox"/> c. providing a registered office, business address or accommodation, correspondence or administrative address for a company, a partnership or any other legal person or arrangement</p> <p><input type="checkbox"/> d. acting as (or arranging for another person to act as) a nominee shareholder for another person</p>
<p>B. Has the Corporation complied with the requirements on Customer Due Diligence (CDD) or Know Your Customer (KYC), record-keeping, and submission of reports under the AMLA, as amended, since the last filing of its GIS?</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>

8. None of the above
Describe nature of business:

AMENDED GENERAL INFORMATION SHEET

STOCK CORPORATION

===== PLEASE PRINT LEGIBLY =====

CORPORATE NAME: **INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)**

CAPITAL STRUCTURE

AUTHORIZED CAPITAL STOCK

	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP) (No. of shares X Par/Stated Value)
	common	1,000,000	100	100,000,000.00
TOTAL		1,000,000	TOTAL P	100,000,000.00

SUBSCRIBED CAPITAL

FILIPINO	NO. OF STOCK-HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	NUMBER OF SHARES IN THE HANDS OF THE PUBLIC **	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
	12	common	680,000	680,000	100.00	68,000,000.00	100.00%
TOTAL			680,000	TOTAL	TOTAL P	68,000,000.00	

FOREIGN (INDICATE BY NATIONALITY)	NO. OF STOCK-HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	NUMBER OF SHARES IN THE HANDS OF THE PUBLIC **	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
N/A							
TOTAL				TOTAL	TOTAL P		

Percentage of Foreign Equity : **TOTAL** **TOTAL** **TOTAL P** **TOTAL SUBSCRIBED P**

PAID-UP CAPITAL

FILIPINO	NO. OF STOCK-HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
	12	common	680,000	100	68,000,000.00	100.00%
TOTAL			680,000	TOTAL P	68,000,000.00	

FOREIGN (INDICATE BY NATIONALITY)	NO. OF STOCK-HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
0.00 % TOTAL				TOTAL P	68,000,000.00	
				TOTAL PAID-UP P	68,000,000.00	

NOTE: USE ADDITIONAL SHEET IF NECESSARY

* Common, Preferred or other classification

** Other than Directors, Officers, Shareholders owning 10% of outstanding shares.

AMENDED GENERAL INFORMATION SHEET

STOCK CORPORATION

PLEASE PRINT LEGIBLY

CORPORATE NAME: INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)								
DIRECTORS / OFFICERS								
NAME/CURRENT RESIDENTIAL ADDRESS	NATIONALITY	INC'R	BOARD	GENDER	STOCK HOLDER	OFFICER	EXEC. COMM.	TAX IDENTIFICATION NUMBER
1. NINA D. AGUAS	Filipino	N	C	F	Y	Chairman of the Board	M - Exec. Comm. M - Invest. Comm. M - Personnel & Remuneration Comm.	
2. RAOUL ANTONIO E. LITTAUA	Filipino	N	M	M	Y	Vice Chairman of the Board	C - Exec. Comm. M - Innov. & Tech.	
3. MARIA NOEMI G. AZURA	Filipino	N	M	F	Y	President & CEO	VC - Exec. Comm. VC - Invest. Comm VC - Innov. & Tech. Comm.	
4. HENRY RHOEL R. AGUDA	Filipino	N	M	M	Y	N/A	C - Innov. & Tech. Comm. M - Exec. Comm.	
5. MARIA CAROLINA V. DOMINGUEZ	Filipino	N	I	F	Y	N/A	C - Personnel & Remuneration Comm. VC - Corp. Gov. Comm.	
6. EMMANUEL F. DOOC	Filipino	N	I	M	Y	N/A	C - Corp. Gov. Comm. VC - Audit Comm. M - Exec. Comm.	
7. LUIS Y. BENITEZ	Filipino	N	I	M	Y	N/A	M - Innov. & Tech. Comm.	105-339-766
8. SUSAN R. FIGUERAS	Filipino	N	I	F	Y	N/A	C - Audit Comm. M - Corp. Gov. Comm. M - Invest. Comm.	
9. MARIETTA C. GORREZ	Filipino	N	M	F	Y	N/A	M - Audit Comm. M - Personnel & Remuneration Comm.	
10. VERA VICTORIA C. MORALES	Filipino	N	M	F	Y	N/A	C - Invest. Comm.	
11. DEBORAH IGNACIA D. ONA	Filipino	N	M	F	Y	N/A	M-Innov. & Tech. Comm.	
12. EFREN C. CARINGAL, JR.	Filipino	N		M	N	Treasurer		
13. RENATO S. DE IESUS	Filipino	N		M	N	Corporate Secretary		
14. MARIA ROWENA M. RODRIGUEZ	Filipino	N		F	N	Asst. Corporate Secretary		
15. GERONIMO V. FRANCISCO	Filipino	N		M	N	FVP & Compliance Officer		

INSTRUCTION:

FOR SEX COLUMN, PUT "F" FOR FEMALE, "M" FOR MALE.

FOR BOARD COLUMN, PUT "C" FOR CHAIRMAN, "M" FOR MEMBER, "I" FOR INDEPENDENT DIRECTOR.

FOR INC'R COLUMN, PUT "Y" IF AN INCORPORATOR, "N" IF NOT.

FOR STOCKHOLDER COLUMN, PUT "Y" IF A STOCKHOLDER, "N" IF NOT.

FOR OFFICER COLUMN, INDICATE PARTICULAR POSITION IF AN OFFICER, FROM VP UP INCLUDING THE POSITION OF THE TREASURER, SECRETARY, COMPLIANCE OFFICER AND/OR ASSOCIATED PERSON.

FOR EXECUTIVE COMMITTEE, INDICATE "C" IF MEMBER OF THE COMPENSATION COMMITTEE; "A" FOR AUDIT COMMITTEE; "N" FOR NOMINATION AND ELECTION COMMITTEE. ADDITIONALLY WRITE "C" AFTER SLASH IF CHAIRMAN AND "M" IF MEMBER.

AMENDED GENERAL INFORMATION SHEET

STOCK CORPORATION

PLEASE PRINT LEGIBLY

CORPORATE NAME: INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)

DIRECTORS / OFFICERS

NAME/CURRENT RESIDENTIAL ADDRESS	NATIONALITY	INC'R	BOARD	GENDER	STOCK HOLDER	OFFICER	EXEC. COMM.	TAX IDENTIFICATION NUMBER
16. TRICCI ROSE A. SADIAN	Filipino	N		F	N	First Vice President		
17. MARK ROLAND F. MALANAY	Filipino	N		M	N	Vice President		
18. LAARNI F. GARRATON	Filipino	N		F	N	Sr. Asst. Vice President		
19. SHEILA MARIE D. IGLESIA	Filipino	N		F	N	Sr. Asst. Vice President		
20. PEDRITO N. ANTONIO	Filipino	N		M	N	Asst. Vice President		
21. WELHELM TEODORO S. CASTROVERDE	Filipino	N		M	N	Asst. Vice President		
22. CHRISHELLE S. INES	Filipino	N		F	N	Asst. Vice President		
23. JAYBEE N. SANTOS	Filipino	N		M	N	Asst. Vice President		
24. MYRA T. SANTOS	Filipino	N		F	N	Asst. Vice President		
25. IRENE M. SICADSIKAD	Filipino	N		F	N	Asst. Vice President		

INSTRUCTION:

FOR SEX COLUMN, PUT "F" FOR FEMALE, "M" FOR MALE.

FOR BOARD COLUMN, PUT "C" FOR CHAIRMAN, "M" FOR MEMBER, "I" FOR INDEPENDENT DIRECTOR.

FOR INC'R COLUMN, PUT "Y" IF AN INCORPORATOR, "N" IF NOT.

FOR STOCKHOLDER COLUMN, PUT "Y" IF A STOCKHOLDER, "N" IF NOT.

FOR OFFICER COLUMN, INDICATE PARTICULAR POSITION IF AN OFFICER, FROM VP UP INCLUDING THE POSITION OF THE TREASURER, SECRETARY, COMPLIANCE OFFICER AND/OR ASSOCIATED PERSON.

FOR EXECUTIVE COMMITTEE, INDICATE "C" IF MEMBER OF THE COMPENSATION COMMITTEE; "A" FOR AUDIT COMMITTEE; "N" FOR NOMINATION AND ELECTION COMMITTEE. ADDITIONALLY WRITE "C" AFTER SLASH IF CHAIRMAN AND "M" IF MEMBER.

AMENDED GENERAL INFORMATION SHEET

STOCK CORPORATION

===== PLEASE PRINT LEGIBLY =====

CORPORATE NAME: **INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)**

TOTAL NUMBER OF STOCKHOLDERS: **12** **NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH:** **1**

TOTAL ASSETS BASED ON LATEST AUDITED FINANCIAL STATEMENTS: **P890,740,118**

STOCKHOLDER'S INFORMATION

NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNERSHIP		
1 THE INSULAR LIFE ASSURANCE COMPANY, LTD.	Common	679,978	67,997,800.00	99.997%	67,997,800.00	000-464-124
	TOTAL	679,978	67,997,800.00			
2 NINA D. AGUAS, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
3. RAOUL ANTONIO E. LITTAUA, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
4. MARIA NOEMI G. AZURA, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
5. HENRY RHOEL R. AGUDA, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
6. MA. CAROLINA V. DOMINGUEZ, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
7. EMMANUEL F. DOOC	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
TOTAL AMOUNT OF SUBSCRIBED CAPITAL				99.9985%	67,999,000.00	
TOTAL AMOUNT OF PAID-UP CAPITAL						

INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS

Note: For PDTC Nominee included in the list, please indicate further the beneficial owners owning more than 5% of any class of the company's voting securities. Attach separate sheet, if necessary.

AMENDED GENERAL INFORMATION SHEET
STOCK CORPORATION

===== PLEASE PRINT LEGIBLY =====

CORPORATE NAME:		INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)				
TOTAL NUMBER OF STOCKHOLDERS:	12	NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH:			1	
TOTAL ASSETS BASED ON LATEST AUDITED FS:		P890,740,118				
STOCKHOLDER'S INFORMATION						
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED			% OF OWNER-SHIP	AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)			
8. LUIS Y. BENITEZ, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
9. SUSAN R. FIGUERAS, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
10. MARIETTA C. GORREZ, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
11. VERA VICTORIA C. MORALES, Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
12. DEBORAH IGNACIA D. ONA , Filipino	Common	2	200.00	0.0003%	200.00	
	TOTAL	2	200.00			
TOTAL AMOUNT OF SUBSCRIBED CAPITAL				0.0015%	1,000.00	
TOTAL AMOUNT OF PAID-UP CAPITAL					68,000,000.00	
INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS						
<i>Note: For PDTC Nominee included in the list, please indicate further the beneficial owners owning more than 5% of any class of the company's voting securities. Attach separate sheet, if necessary.</i>						

AMENDED GENERAL INFORMATION SHEET
STOCK CORPORATION

----- PLEASE PRINT LEGIBLY -----

CORPORATE NAME: INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)			
1. INVESTMENT OF CORPORATE FUNDS IN ANOTHER CORPORATION	AMOUNT (PhP)	DATE OF BOARD RESOLUTION	
1.1 STOCKS	5,820,970.00		
1.2 BONDS/COMMERCIAL PAPER (Issued by Private Corporations)	65,792,676.49		
1.3 LOANS/ CREDITS/ ADVANCES	N/A		
1.4 GOVERNMENT TREASURY BILLS	397,363,648.69		
1.5 OTHERS	3,745,814.82		
2. INVESTMENT OF CORPORATE FUNDS IN ACTIVITIES UNDER ITS SECONDARY PURPOSES (PLEASE SPECIFY:)	DATE OF BOARD RESOLUTION	DATE OF STOCKHOLDERS RATIFICATION	
3. TREASURY SHARES	NO. OF SHARES	% AS TO THE TOTAL NO. OF SHARES ISSUED	
4. UNRESTRICTED/UNAPPROPRIATED RETAINED EARNINGS AS OF END OF LAST FISCAL YEAR			Php 281,267,433.00
5. DIVIDENDS DECLARED DURING THE IMMEDIATELY PRECEDING YEAR:			
TYPE OF DIVIDEND	AMOUNT (PhP)	DATE DECLARED	
5.1 CASH			
5.2 STOCK			
5.3 PROPERTY			
TOTAL	P		
6. ADDITIONAL SHARES ISSUED DURING THE PERIOD:			
DATE	NO. OF SHARES	AMOUNT	
SECONDARY LICENSE/REGISTRATION WITH SEC AND OTHER GOV'T AGENCY:			
NAME OF AGENCY:	SEC	BSP	IC
TYPE OF LICENSE/REGN.	AS091-196826		HMO-2020-10-R
DATE ISSUED:	14-Oct-91		01-Jan-20
DATE STARTED OPERATIONS:	14-Oct-91		
TOTAL ANNUAL COMPENSATION OF DIRECTORS DURING THE PRECEDING FISCAL YEAR (in PhP)	TOTAL NO. OF OFFICERS	TOTAL NO. OF RANK & FILE EMPLOYEES	TOTAL MANPOWER COMPLEMENT
678,571.32	35	127	162

NOTE: USE ADDITIONAL SHEET IF NECESSARY

I, **RENATO S. DE JESUS**, Corporate Secretary of **INSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)** declare under penalty of perjury that all matters set forth in this GIS have been made in good faith, duly verified by me and to the best of my knowledge and belief are true and correct.


I hereby attest that all the information in this GIS are being submitted in compliance with the rules and regulations of the Securities and Exchange Commission (SEC) the collection, processing, storage and sharing of said information being necessary to carry out the functions of public authority for the performance of the constitutionally and statutorily mandated functions of the SEC as a regulatory agency.

I further attest that I have been authorized by the Board of Directors/Trustees to file this GIS with the SEC.

I understand that the Commission may place the corporation under delinquent status for failure to submit the reportorial requirements three (3) times, consecutively or intermittently, within a period of five (5) years (Section 177, RA No. 11232).

Done this 12 AUG 2021 day of CITY OF MUNTINLUPA 2021 in _____

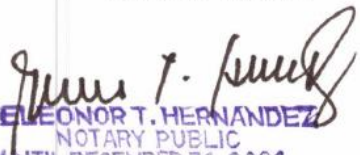
REPUBLIC OF THE PHILIPPINES
CITY OF MUNTINLUPA


ATTY. RENATO S. DE JESUS
(Signature over printed name)

SUBSCRIBED AND SWORN TO before me in CITY OF MUNTINLUPA on 12 AUG 2021 by affiant who personally appeared before me and exhibited to me his competent evidence of identity consisting of Passport ID No. P148125A issued at DFA Manila on 03 September 2016.



NOTARY PUBLIC


ELEONOR T. HERNANDEZ
NOTARY PUBLIC
UNTIL DECEMBER 31, 2021
APPT. NO. 20-014/ATTORNEY'S ROLL NO. 38749
PTR NO. 3950964, JAN. 04, 2021, MUNTINLUPA CITY
/BP LIFETIME MEMBER NO. 05258, TIN: 135478879
MCLE NO. VI-0008131, 04/23/2018, PHILIPPINES
ENAC27 L'PASEO, JOLLIBEE JUNCTION, ALABANG,
1770 MUNTINLUPA CITY, PHILIPPINES

**BENEFICIAL OWNERSHIP DECLARATION
FOR THE YEAR: 2021**

SEC REGISTRATION NUMBER:

AS091-196826

CORPORATE NAME:

NSULAR HEALTH CARE, INC. (Formerly: Insular Life Health Care, Inc.)

Instructions:

1. Identify the Beneficial Owner/s of the corporation as described in the Categories of Beneficial Ownership in items A to I below. List down as many as you can identify. You may use an additional sheet if necessary.
2. Fill in the required information on the beneficial owner in the fields provided for.
3. In the "Category of Beneficial Ownership" column, indicate the letter(s) corresponding thereto. In the event that the person identified as beneficial owner falls under several categories, indicate all the letters corresponding to such categories.
4. If the category is under letter "I", indicate the position held (i.e., Director/Trustee, President, Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, etc.).
5. Do not leave any item blank. Write "N/A" if the information required is not applicable or "NONE" if non-existent.

"Beneficial Owner" refers to any natural person(s) who ultimately own(s) or control(s) or exercise(s) ultimate effective control over the corporation. This definition covers the natural person(s) who actually own or control the corporation as distinguished from the legal owners. Such beneficial ownership may be determined on the basis of the following:

Category

Description

- A** Natural person(s) owning, directly or indirectly or through a chain of ownership, at least twenty-five percent (25%) of the voting rights, voting shares or capital of the reporting corporation.
- B** Natural person(s) who exercise control over the reporting corporation, alone or together with others, through any contract, understanding, relationship, intermediary or tiered entity.
- C** Natural person(s) having the ability to elect a majority of the board of directors/trustees, or any similar body, of the corporation.
- D** Natural person(s) having the ability to exert a dominant influence over the management or policies of the corporation.
- E** Natural person(s) whose directions, instructions, or wishes in conducting the affairs of the corporation are carried out by majority of the members of the board of directors of such corporation who are accustomed or under an obligation to act in accordance with such person's directions, instructions or wishes.
- F** Natural person(s) acting as stewards of the properties of corporations, where such properties are under the care or administration of said natural person(s).
- G** Natural person(s) who actually own or control the reporting corporation through nominee shareholders or nominee directors acting for or on behalf of such natural persons.
- H** Natural person(s) ultimately owning or controlling or exercising ultimate effective control over the corporation through other means not falling under any of the foregoing categories.
- I** Natural person(s) exercising control through positions held within a corporation (i.e., responsible for strategic decisions that fundamentally affect the business practices or general direction of the corporation such as the members of the board of directors or trustees or similar body within the corporation; or exercising executive control over the daily or regular affairs of the corporation through a senior management position). This category is only applicable in exceptional cases where no natural person is identifiable who ultimately owns or exerts control over the corporation, the reporting corporation having exhausted all reasonable means of identification and provided there are no grounds for suspicion.

COMPLETE NAME (Surname, Given Name, Middle Name, Name Extension (I.e., Jr., Sr., III))	SPECIFIC RESIDENTIAL ADDRESS	NATIONALITY	DATE OF BIRTH	TAX IDENTIFICATION NO.	% OF OWNERSHIP ¹ / % OF VOTING RIGHTS ²	TYPE OF BENEFICIAL OWNER ³ Direct (D) or Indirect (I)	CATEGORY OF BENEFICIAL OWNERSHIP
BOARD OF TRUSTEES					<i>*1 member 1 vote regardless of the amount & number of insurance policies</i>	<i>*1 member 1 vote regardless of the amount & number of insurance policies</i>	
Nina D. Aguas		Filipino			1 vote	D	1/ Chairman
Raoul Antonio E. Littaua		Filipino			1 vote	D	1/ Trustee/President & Chief Executive Officer
Luis C. la Ó		Filipino			1 vote	D	1/ Trustee
Luis Y. Denitez		Filipino			1 vote	D	1/ Trustee
Emmanuel F. Dooc		Filipino			1 vote	D	1/ Trustee
Gil B. Genio		Filipino			1 vote	D	1/ Trustee
Marietta C. Gorrez		Filipino			1 vote	D	1/ Trustee
Francisco Ed. Lim		Filipino			1 vote	D	1/ Trustee
Justo A. Ortiz		Filipino			1 vote	D	1/ Trustee

Note: This page is not for uploading on the SEC iView.

¹ For Stock Corporations.

² For Non-Stock Corporations.

³ For Stock Corporations.