



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

Citizens Insurance Company of the Midwest

NAIC Group Code 0088 0088 NAIC Company Code 10395 Employer's ID Number 35-1958418

Organized under the Laws of Indiana, State of Domicile or Port of Entry IN
Country of Domicile United States of America

Incorporated/Organized 03/24/1995 Commenced Business 03/08/1996

Statutory Home Office 9229 Delegates Row, Suite 100 Indianapolis, IN, US 462403824
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 440 Lincoln Street Worcester, MA, US 01653-0002
(Street and Number) (City or Town, State, Country and Zip Code)
508-853-7200 (Area Code) (Telephone Number)

Mail Address 440 Lincoln Street Worcester, MA, US 01653-0002
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 440 Lincoln Street Worcester, MA, US 01653-0002
(Street and Number) (City or Town, State, Country and Zip Code)
508-853-7200-8557928 (Area Code) (Telephone Number)

Internet Website Address WWW.HANOVER.COM

Statutory Statement Contact Dennis M. Hazelwood 508-853-7200-8557928
(Name) (Area Code) (Telephone Number)
DHAZELWOOD@HANOVER.COM 508-853-6332
(E-mail Address) (FAX Number)

OFFICERS

President John Conner Roche Vice President & Treasurer Nathaniel William Clarkin
Senior Vice President & Secretary Charles Frederick Cronin

OTHER

Jeffrey Mark Farber, Executive Vice President & CFO Dennis Francis Kerrigan Jr., Executive Vice President & Chief Legal Officer Richard William Lavey, Executive Vice President
Willard Ty-Lunn Lee, Executive Vice President David John Lovely #, Executive Vice President Denise Maureen Lowsley, Executive Vice President
Bryan James Salvatore, Executive Vice President

DIRECTORS OR TRUSTEES

Warren Ellison Barnes Daniel Scott Couger Jeffrey Mark Farber
Lindsay France Greenfield Dennis Francis Kerrigan Jr. Willard Ty-Lunn Lee
David John Lovely # Denise Maureen Lowsley John Conner Roche
Bryan James Salvatore

State of Massachusetts SS
County of Worcester

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Handwritten signature of John Conner Roche

John Conner Roche
President

Handwritten signature of Charles Frederick Cronin

Charles Frederick Cronin
Senior Vice President & Secretary

Handwritten signature of Nathaniel William Clarkin

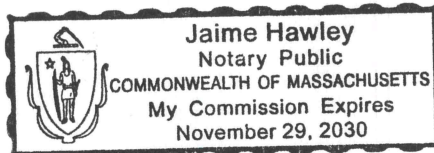
Nathaniel William Clarkin
Vice President & Treasurer

Subscribed and sworn to before me this 2nd day of February, 2024

Handwritten signature of Jaime L. Hawley

Jaime L. Hawley
Notary
November 29, 2030

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....





ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0088

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2023

NAIC Company Code 10395

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 102

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0088

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2023

NAIC Company Code 10395

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 5,269,059

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0088

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2023

NAIC Company Code 10395

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple Peril Crop, Federal Flood, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 5,269,161

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

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SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
NONE					

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
38-0421730	31534	CITIZENS INS CO OF AMERICA	MI		1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	
0399999		Total Authorized - Affiliates - U.S. Non-Pool - Other			1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	
0499999		Total Authorized - Affiliates - U.S. Non-Pool			1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	
0799999		Total Authorized - Affiliates - Other (Non-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999		Total Authorized - Affiliates			1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	
1499999		Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	
1899999		Total Unauthorized - Affiliates - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999		Total Unauthorized - Affiliates - Other (Non-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299999		Total Unauthorized - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2899999		Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3299999		Total Certified - Affiliates - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599999		Total Certified - Affiliates - Other (Non-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3699999		Total Certified - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4299999		Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4699999		Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4999999		Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5099999		Total Reciprocal Jurisdiction - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5699999		Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5799999		Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	
5899999		Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9999999		Totals			1,001,929	0	0	269,135	7,683	526,056	57,279	496,768	0	1,356,921	0	0	0	1,356,921	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
38-0421730	CITIZENS INS CO OF AMERICA	0	0		0	1,356,921	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	0	XXX	0	1,356,921	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	1,356,921	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999	Total Authorized - Affiliates	0	0	XXX	0	1,356,921	0	0	0	0	0	0	0	0	XXX	0	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	1,356,921	0	0	0	0	0	0	0	0	XXX	0	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999	Total Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999	Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	XXX	0	1,356,921	0	0	0	0	0	0	0	0	XXX	0	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals	0	0	XXX	0	1,356,921	0	0	0	0	0	0	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
38-0421730 ..	CITIZENS INS CO OF AMERICA	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0899999. Total Authorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2299999. Total Unauthorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
9999999 Totals		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
38-0421730	CITIZENS INS CO OF AMERICA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999	Total Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
3699999	Total Certified - Affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999	Totals			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			72 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
38-0421730	CITIZENS INS CO OF AMERICA	0	XXX	XXX	0	0	0	XXX	XXX	0
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	XXX	XXX	XXX	0	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	XXX	XXX	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	0	0	0	0	0	0	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0
9999999	Totals	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
NONE				
Total				

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.	0.000	0
2.	0.000	0
3.	0.000	0
4.	0.000	0
5.	0.000	0

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	CITIZENS INS CO OF AMERICA	1,356,921	1,001,929	Yes [X] No []
7.	0	0	Yes [] No []
8.	0	0	Yes [] No []
9.	0	0	Yes [] No []
10.	0	0	Yes [] No []

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	127,877,778	0	127,877,778
2. Premiums and considerations (Line 15)	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	0	0	0
5. Other assets	994,390	0	994,390
6. Net amount recoverable from reinsurers	0	1,356,921,000	1,356,921,000
7. Protected cell assets (Line 27)	0	0	0
8. Totals (Line 28)	128,872,168	1,356,921,000	1,485,793,168
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	0	860,153,000	860,153,000
10. Taxes, expenses, and other obligations (Lines 4 through 8)	110,504	0	110,504
11. Unearned premiums (Line 9)	0	496,768,000	496,768,000
12. Advance premiums (Line 10)	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	0	0	0
15. Funds held by company under reinsurance treaties (Line 13)	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14)	0	0	0
17. Provision for reinsurance (Line 16)	0	0	0
18. Other liabilities	11,967	0	11,967
19. Total liabilities excluding protected cell business (Line 26)	122,471	1,356,921,000	1,357,043,471
20. Protected cell liabilities (Line 27)	0	0	0
21. Surplus as regards policyholders (Line 37)	128,749,697	XXX	128,749,697
22. Totals (Line 38)	128,872,168	1,356,921,000	1,485,793,168

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [X] No []

If yes, give full explanation: The Company Ceded 100% of its insurance business to The Hanover Insurance Company, an affiliated insurer.

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	13,381.....	13,381.....	0.....	7,337.....	7,337.....	72.....	72.....	853.....	853.....	0.....	0.....	1,343.....
3. 2015.....	13,046.....	13,046.....	0.....	8,936.....	8,936.....	125.....	125.....	756.....	756.....	0.....	0.....	1,072.....
4. 2016.....	12,192.....	12,192.....	0.....	6,418.....	6,418.....	240.....	240.....	872.....	872.....	0.....	0.....	1,168.....
5. 2017.....	12,692.....	12,692.....	0.....	6,918.....	6,918.....	110.....	110.....	848.....	848.....	0.....	0.....	1,147.....
6. 2018.....	22,138.....	22,138.....	0.....	12,069.....	12,069.....	170.....	170.....	1,203.....	1,203.....	0.....	0.....	1,690.....
7. 2019.....	61,371.....	61,371.....	0.....	42,808.....	42,808.....	542.....	542.....	4,213.....	4,213.....	0.....	0.....	6,017.....
8. 2020.....	99,355.....	99,355.....	0.....	84,217.....	84,217.....	1,221.....	1,221.....	6,947.....	6,947.....	0.....	0.....	8,779.....
9. 2021.....	135,242.....	135,242.....	0.....	141,180.....	141,180.....	1,702.....	1,702.....	12,846.....	12,846.....	0.....	0.....	15,710.....
10. 2022.....	196,974.....	196,974.....	0.....	140,158.....	140,158.....	1,905.....	1,905.....	14,305.....	14,305.....	0.....	0.....	14,940.....
11. 2023.....	285,496.....	285,496.....	0.....	231,637.....	231,637.....	1,707.....	1,707.....	21,492.....	21,492.....	0.....	0.....	24,834.....
12. Totals.....	XXX.....	XXX.....	XXX.....	681,680.....	681,680.....	7,794.....	7,794.....	64,336.....	64,336.....	0.....	0.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	2.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	4.....	4.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	2.....	2.....	0.....	0.....	6.....	6.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	9.....	9.....	0.....	0.....	9.....	9.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	293.....	293.....	33.....	33.....	8.....	8.....	12.....	12.....	8.....	8.....	0.....	0.....	5.....
8. 2020.....	977.....	977.....	552.....	552.....	67.....	67.....	128.....	128.....	12.....	12.....	0.....	0.....	8.....
9. 2021.....	1,694.....	1,694.....	1,072.....	1,072.....	108.....	108.....	366.....	366.....	51.....	51.....	0.....	0.....	33.....
10. 2022.....	8,520.....	8,520.....	2,367.....	2,367.....	256.....	256.....	799.....	799.....	208.....	208.....	0.....	0.....	136.....
11. 2023.....	37,805.....	37,805.....	66,008.....	66,008.....	227.....	227.....	1,609.....	1,609.....	1,816.....	1,816.....	0.....	0.....	1,186.....
12. Totals.....	49,289.....	49,289.....	70,043.....	70,043.....	665.....	665.....	2,936.....	2,936.....	2,095.....	2,095.....	0.....	0.....	1,368.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	8,262.....	8,262.....	0.....	61.7.....	61.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	9,819.....	9,819.....	0.....	75.3.....	75.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	7,535.....	7,535.....	0.....	61.8.....	61.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	7,885.....	7,885.....	0.....	62.1.....	62.1.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	13,460.....	13,460.....	0.....	60.8.....	60.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	47,917.....	47,917.....	0.....	78.1.....	78.1.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	94,121.....	94,121.....	0.....	94.7.....	94.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	159,018.....	159,018.....	0.....	117.6.....	117.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2022.....	168,518.....	168,518.....	0.....	85.6.....	85.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	362,301.....	362,301.....	0.....	126.9.....	126.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX.....	XXX.....	XXX.....	10,959	10,959	351	351	5			
2. 2014.....	236,524	236,524	0	90,293	90,293	6,091	6,091	7,096	7,096	0	0	13,099
3. 2015.....	244,121	244,121	0	121,151	121,151	9,218	9,218	7,728	7,728	0	0	13,023
4. 2016.....	244,764	244,764	0	129,132	129,132	10,426	10,426	7,727	7,727	0	0	13,143
5. 2017.....	269,078	269,078	0	144,433	144,433	10,729	10,729	9,634	9,634	0	0	12,374
6. 2018.....	300,458	300,458	0	144,798	144,798	11,727	11,727	9,995	9,995	0	0	12,383
7. 2019.....	341,626	341,626	0	170,631	170,631	11,439	11,439	11,138	11,138	0	0	12,707
8. 2020.....	353,113	353,113	0	98,450	98,450	8,021	8,021	9,137	9,137	0	0	7,900
9. 2021.....	322,772	322,772	0	105,042	105,042	8,590	8,590	9,176	9,176	0	0	9,826
10. 2022.....	322,205	322,205	0	67,029	67,029	4,104	4,104	6,464	6,464	0	0	10,446
11. 2023.....	301,625	301,625	0	53,043	53,043	633	633	3,614	3,614	0	0	9,070
12. Totals	XXX	XXX	XXX	1,134,961	1,134,961	81,330	81,330	81,713	81,713	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
	1. Prior.....	23,030	23,030	3,954	3,954	100	100	3,439	3,439	202			
2. 2014.....	1,543	1,543	4,185	4,185	3	3	678	678	23	23	0	0	16
3. 2015.....	4,408	4,408	21,026	21,026	1	1	1,090	1,090	39	39	0	0	27
4. 2016.....	4,767	4,767	28,451	28,451	18	18	1,467	1,467	48	48	0	0	33
5. 2017.....	5,162	5,162	34,486	34,486	44	44	1,571	1,571	57	57	0	0	39
6. 2018.....	6,065	6,065	40,125	40,125	45	45	2,016	2,016	86	86	0	0	59
7. 2019.....	10,387	10,387	49,994	49,994	366	366	2,205	2,205	191	191	0	0	131
8. 2020.....	10,795	10,795	38,486	38,486	649	649	1,674	1,674	237	237	0	0	163
9. 2021.....	31,375	31,375	50,121	50,121	1,631	1,631	4,606	4,606	786	786	0	0	540
10. 2022.....	45,871	45,871	55,654	55,654	3,062	3,062	8,723	8,723	1,667	1,667	0	0	1,146
11. 2023.....	53,276	53,276	89,858	89,858	1,034	1,034	14,880	14,880	3,809	3,809	0	0	2,618
12. Totals	196,680	196,680	416,340	416,340	6,955	6,955	42,349	42,349	7,146	7,146	0	0	4,911

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0		0	XXX.....
2. 2014.....	109,913	109,913	0	46.5	46.5	0.0	0	0	0.0	0	0
3. 2015.....	164,662	164,662	0	67.5	67.5	0.0	0	0	0.0	0	0
4. 2016.....	182,035	182,035	0	74.4	74.4	0.0	0	0	0.0	0	0
5. 2017.....	206,116	206,116	0	76.6	76.6	0.0	0	0	0.0	0	0
6. 2018.....	214,858	214,858	0	71.5	71.5	0.0	0	0	0.0	0	0
7. 2019.....	256,352	256,352	0	75.0	75.0	0.0	0	0	0.0	0	0
8. 2020.....	167,450	167,450	0	47.4	47.4	0.0	0	0	0.0	0	0
9. 2021.....	211,327	211,327	0	65.5	65.5	0.0	0	0	0.0	0	0
10. 2022.....	192,574	192,574	0	59.8	59.8	0.0	0	0	0.0	0	0
11. 2023.....	220,147	220,147	0	73.0	73.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	2	2	2	2	0	0	2
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	1	1	0	0	1
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	0	0	2	2	4	4	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2016.....	5	5	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2019.....	1	1	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2023.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	4	4	3	3	0	0	0	0	XXX
2. 2014.....	919	919	0	638	638	18	18	108	108	0	0	83
3. 2015.....	833	833	0	166	166	18	18	54	54	0	0	53
4. 2016.....	809	809	0	59	59	1	1	27	27	0	0	23
5. 2017.....	875	875	0	143	143	6	6	32	32	0	0	42
6. 2018.....	936	936	0	96	96	3	3	38	38	0	0	54
7. 2019.....	778	778	0	86	86	2	2	54	54	0	0	58
8. 2020.....	559	559	0	103	103	7	7	69	69	0	0	71
9. 2021.....	478	478	0	404	404	37	37	71	71	0	0	73
10. 2022.....	486	486	0	130	130	4	4	56	56	0	0	60
11. 2023.....	421	421	0	39	39	5	5	48	48	0	0	39
12. Totals	XXX	XXX	XXX	1,868	1,868	103	103	558	558	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	106	106	149	149	3	3	21	21	2	2	0	0	3
2. 2014.....	6	6	15	15	0	0	2	2	0	0	0	0	0
3. 2015.....	5	5	13	13	0	0	2	2	0	0	0	0	0
4. 2016.....	4	4	16	16	0	0	2	2	0	0	0	0	0
5. 2017.....	4	4	11	11	0	0	2	2	0	0	0	0	0
6. 2018.....	9	9	10	10	0	0	2	2	0	0	0	0	0
7. 2019.....	2	2	8	8	0	0	3	3	0	0	0	0	0
8. 2020.....	10	10	10	10	0	0	3	3	0	0	0	0	0
9. 2021.....	367	367	12	12	5	5	4	4	2	2	0	0	4
10. 2022.....	35	35	25	25	0	0	5	5	2	2	0	0	4
11. 2023.....	38	38	36	36	11	11	6	6	4	4	0	0	7
12. Totals	586	586	306	306	19	19	51	51	10	10	0	0	18

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2014.....	787	787	0	85.7	85.7	0.0	0	0	0.0	0	0
3. 2015.....	259	259	0	31.0	31.0	0.0	0	0	0.0	0	0
4. 2016.....	108	108	0	13.4	13.4	0.0	0	0	0.0	0	0
5. 2017.....	198	198	0	22.6	22.6	0.0	0	0	0.0	0	0
6. 2018.....	158	158	0	16.9	16.9	0.0	0	0	0.0	0	0
7. 2019.....	155	155	0	19.9	19.9	0.0	0	0	0.0	0	0
8. 2020.....	202	202	0	36.2	36.2	0.0	0	0	0.0	0	0
9. 2021.....	902	902	0	188.7	188.7	0.0	0	0	0.0	0	0
10. 2022.....	257	257	0	53.0	53.0	0.0	0	0	0.0	0	0
11. 2023.....	186	186	0	44.3	44.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2014.....	201	201	0	12	12	0	0	11	11	0	0	10
3. 2015.....	126	126	0	8	8	0	0	3	3	0	0	2
4. 2016.....	79	79	0	5	5	0	0	5	5	0	0	3
5. 2017.....	111	111	0	(100)	(100)	0	0	2	2	0	0	1
6. 2018.....	179	179	0	(19)	(19)	0	0	10	10	0	0	8
7. 2019.....	227	227	0	(94)	(94)	108	108	5	5	0	0	4
8. 2020.....	368	368	0	0	0	0	0	3	3	0	0	1
9. 2021.....	233	233	0	87	87	6	6	13	13	0	0	8
10. 2022.....	216	216	0	131	131	0	0	10	10	0	0	5
11. 2023.....	259	259	0	11	11	0	0	3	3	0	0	1
12. Totals	XXX	XXX	XXX	40	40	115	115	64	64	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	3	3	0	0	3	3	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	2	2	0	0	3	3	0	0	0	0	0
4. 2016.....	0	0	2	2	0	0	2	2	0	0	0	0	0
5. 2017.....	0	0	2	2	0	0	3	3	0	0	0	0	0
6. 2018.....	0	0	3	3	0	0	2	2	0	0	0	0	0
7. 2019.....	50	50	3	3	44	44	5	5	2	2	0	0	1
8. 2020.....	0	0	3	3	0	0	5	5	0	0	0	0	0
9. 2021.....	0	0	7	7	0	0	9	9	0	0	0	0	0
10. 2022.....	0	0	14	14	0	0	11	11	0	0	0	0	0
11. 2023.....	0	0	51	51	0	0	16	16	0	0	0	0	0
12. Totals	50	50	91	91	44	44	59	59	2	2	0	0	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2014.....	23	23	0	11.5	11.5	0.0	0	0	0.0	0	0
3. 2015.....	15	15	0	12.2	12.2	0.0	0	0	0.0	0	0
4. 2016.....	13	13	0	16.7	16.7	0.0	0	0	0.0	0	0
5. 2017.....	(93)	(93)	0	(84.5)	(84.5)	0.0	0	0	0.0	0	0
6. 2018.....	(4)	(4)	0	(2.5)	(2.5)	0.0	0	0	0.0	0	0
7. 2019.....	123	123	0	54.1	54.1	0.0	0	0	0.0	0	0
8. 2020.....	12	12	0	3.2	3.2	0.0	0	0	0.0	0	0
9. 2021.....	122	122	0	52.3	52.3	0.0	0	0	0.0	0	0
10. 2022.....	167	167	0	77.3	77.3	0.0	0	0	0.0	0	0
11. 2023.....	81	81	0	31.3	31.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2014.....	55	55	0	0	0	0	0	2	2	0	0	1
3. 2015.....	59	59	0	0	0	0	0	2	2	0	0	1
4. 2016.....	59	59	0	14	14	6	6	11	11	0	0	2
5. 2017.....	67	67	0	4	4	0	0	12	12	0	0	2
6. 2018.....	397	397	0	0	0	22	22	2	2	0	0	1
7. 2019.....	2,351	2,351	0	1,210	1,210	0	0	2	2	0	0	4
8. 2020.....	5,343	5,343	0	400	400	7	7	7	7	0	0	7
9. 2021.....	8,979	8,979	0	2,322	2,322	14	14	14	14	0	0	21
10. 2022.....	12,612	12,612	0	2,049	2,049	0	0	9	9	0	0	16
11. 2023.....	15,999	15,999	0	1	1	0	0	10	10	0	0	13
12. Totals	XXX	XXX	XXX	6,001	6,001	50	50	73	73	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	13	13	0	0	1	1	0	0	0	0	0
5. 2017.....	0	0	23	23	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	90	90	0	0	5	5	0	0	0	0	0
7. 2019.....	0	0	114	114	0	0	17	17	0	0	0	0	0
8. 2020.....	1,265	1,265	269	269	0	0	27	27	3	3	0	0	2
9. 2021.....	3,050	3,050	1,511	1,511	0	0	83	83	8	8	0	0	5
10. 2022.....	3,311	3,311	2,885	2,885	0	0	124	124	11	11	0	0	7
11. 2023.....	3,420	3,420	7,703	7,703	0	0	156	156	15	15	0	0	10
12. Totals	11,046	11,046	12,608	12,608	0	0	413	413	36	36	0	0	24

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2014.....	2	2	0	4.4	4.4	0.0	0	0	0.0	0	0
3. 2015.....	2	2	0	4.0	4.0	0.0	0	0	0.0	0	0
4. 2016.....	44	44	0	75.1	75.1	0.0	0	0	0.0	0	0
5. 2017.....	40	40	0	59.2	59.2	0.0	0	0	0.0	0	0
6. 2018.....	120	120	0	30.2	30.2	0.0	0	0	0.0	0	0
7. 2019.....	1,343	1,343	0	57.1	57.1	0.0	0	0	0.0	0	0
8. 2020.....	1,979	1,979	0	37.0	37.0	0.0	0	0	0.0	0	0
9. 2021.....	7,001	7,001	0	78.0	78.0	0.0	0	0	0.0	0	0
10. 2022.....	8,389	8,389	0	66.5	66.5	0.0	0	0	0.0	0	0
11. 2023.....	11,306	11,306	0	70.7	70.7	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2014.....												
3. 2015.....												
4. 2016.....												
5. 2017.....												
6. 2018.....												
7. 2019.....												
8. 2020.....												
9. 2021.....												
10. 2022.....												
11. 2023.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....													
10. 2022.....													
11. 2023.....													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2014.....											
3. 2015.....											
4. 2016.....											
5. 2017.....											
6. 2018.....											
7. 2019.....											
8. 2020.....											
9. 2021.....											
10. 2022.....											
11. 2023.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	254	254	21	21	3	3	0	0	XXX
2. 2022	12,850	12,850	0	4,911	4,911	47	47	404	404	0	0	XXX
3. 2023	16,771	16,771	0	6,052	6,052	30	30	543	543	0	0	XXX
4. Totals	XXX	XXX	XXX	11,217	11,217	99	99	950	950	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	0	0	22	22	0	0	6	6	0	0	0	0	0
2. 2022	167	167	11	11	0	0	21	21	3	3	0	0	2
3. 2023	715	715	624	624	0	0	42	42	48	48	0	0	30
4. Totals	882	882	658	658	0	0	70	70	51	51	0	0	32

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2022	5,567	5,567	0	43.3	43.3	0.0	0	0	0.0	0	0
3. 2023	8,054	8,054	0	48.0	48.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	326.....	326.....	7.....	7.....	27.....	27.....	0.....	0.....	XXX.....
2. 2022.....	296,996.....	296,996.....	0.....	232,464.....	232,464.....	48.....	48.....	11,755.....	11,755.....	0.....	0.....	104,506.....
3. 2023.....	326,507.....	326,507.....	0.....	214,191.....	214,191.....	36.....	36.....	12,398.....	12,398.....	0.....	0.....	92,173.....
4. Totals.....	XXX.....	XXX.....	XXX.....	446,982.....	446,982.....	90.....	90.....	24,179.....	24,179.....	0.....	0.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	27.....	27.....	106.....	106.....	0.....	0.....	5.....	5.....	5.....	5.....	0.....	0.....	14.....
2. 2022.....	62.....	62.....	176.....	176.....	0.....	0.....	19.....	19.....	10.....	10.....	0.....	0.....	27.....
3. 2023.....	10,513.....	10,513.....	25,729.....	25,729.....	0.....	0.....	49.....	49.....	1,973.....	1,973.....	0.....	0.....	5,553.....
4. Totals.....	10,601.....	10,601.....	26,011.....	26,011.....	0.....	0.....	73.....	73.....	1,988.....	1,988.....	0.....	0.....	5,594.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		0.....	XXX.....
2. 2022.....	244,532.....	244,532.....	0.....	82.3.....	82.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2023.....	264,889.....	264,889.....	0.....	81.1.....	81.1.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

Schedule P - Part 1K - Fidelity/Surety

N O N E

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2014.....	9	9	0	0	0	0	0	0	0	0	0	0
3. 2015.....	2	2	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2023.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 1T - Warranty

N O N E

Schedule P - Part 2A - Homeowners/Farmowners

N O N E

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 2E - Commercial Multiple Peril

N O N E

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 2I - Special Property

N O N E

Schedule P - Part 2J - Auto Physical Damage

NONE

Schedule P - Part 2K - Fidelity/Surety

NONE

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 2M - International

NONE

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 2T - Warranty

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023			
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	17.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1,021.....	322.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	759.....	313.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	890.....	278.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	858.....	289.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1,213.....	477.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	4,416.....	1,596.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	6,448.....	2,323.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	11,709.....	3,968.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	10,831.....	3,973.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	17,978.....	5,670.....

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2,286.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	8,859.....	4,224.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	8,502.....	4,494.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	8,999.....	4,111.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	9,675.....	2,660.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	9,636.....	2,688.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	9,786.....	2,790.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	5,912.....	1,825.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	6,782.....	2,504.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	6,209.....	3,091.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	3,778.....	2,674.....

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	16.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	36.....	47.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	23.....	30.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	20.....	3.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	34.....	8.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	45.....	9.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	44.....	14.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	54.....	17.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	51.....	18.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	42.....	14.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	19.....	13.....

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	7.....	3.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	0.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	0.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	5.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	2.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	5.....	3.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	4.....	1.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	1.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023			
1. Prior.....	000												
2. 2014.....													
3. 2015.....	XXX												
4. 2016.....	XXX	XXX											
5. 2017.....	XXX	XXX	XXX										
6. 2018.....	XXX	XXX	XXX	XXX									
7. 2019.....	XXX	XXX	XXX	XXX	XXX								
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

NONE

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	000												
2. 2014.....													
3. 2015.....	XXX												
4. 2016.....	XXX	XXX											
5. 2017.....	XXX	XXX	XXX										
6. 2018.....	XXX	XXX	XXX	XXX									
7. 2019.....	XXX	XXX	XXX	XXX	XXX								
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

NONE

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	000											XXX	XXX
2. 2014.....												XXX	XXX
3. 2015.....	XXX											XXX	XXX
4. 2016.....	XXX	XXX										XXX	XXX
5. 2017.....	XXX	XXX	XXX									XXX	XXX
6. 2018.....	XXX	XXX	XXX	XXX								XXX	XXX
7. 2019.....	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	000	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	1
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0	0	1
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0	2	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	1	1
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0	1
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	4	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	1	4
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	12	4
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	5	4
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	1	2

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	000												
2. 2014.....													
3. 2015.....	XXX												
4. 2016.....	XXX	XXX											
5. 2017.....	XXX	XXX	XXX										
6. 2018.....	XXX	XXX	XXX	XXX									
7. 2019.....	XXX	XXX	XXX	XXX	XXX								
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023			
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	0	0	0	0
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	96,022	8,457
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	80,225	6,395

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000										XXX	XXX
2. 2014.....											XXX	XXX
3. 2015.....	XXX										XXX	XXX
4. 2016.....	XXX	XXX									XXX	XXX
5. 2017.....	XXX	XXX	XXX								XXX	XXX
6. 2018.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

Schedule P - Part 4A - Homeowners/Farmowners

N O N E

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 4E - Commercial Multiple Peril

N O N E

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 4G - Special Liability

NONE

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

NONE

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 4T - Warranty

N O N E

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	134	8	6	1	0	2	0	0	0	0
2. 2014.....	945	1,015	1,020	1,021	1,021	1,021	1,021	1,021	1,021	1,021
3. 2015.....	XXX	648	748	754	756	759	759	759	759	759
4. 2016.....	XXX	XXX	787	885	890	890	890	890	890	890
5. 2017.....	XXX	XXX	XXX	761	849	855	857	858	858	858
6. 2018.....	XXX	XXX	XXX	XXX	975	1,187	1,203	1,208	1,212	1,213
7. 2019.....	XXX	XXX	XXX	XXX	XXX	3,563	4,360	4,403	4,410	4,416
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5,252	6,340	6,425	6,448
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,040	11,557	11,709
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,491	10,831
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,978

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	9	4	2	0	0	0	0	0	0	0
2. 2014.....	25	6	1	0	0	0	0	0	0	0
3. 2015.....	XXX	63	9	4	3	0	0	0	0	0
4. 2016.....	XXX	XXX	44	4	1	0	0	1	1	0
5. 2017.....	XXX	XXX	XXX	18	8	3	2	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	106	19	7	5	2	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	286	47	13	9	5
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	425	85	24	8
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	728	113	33
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	867	136
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,186

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	111	7	5	0	0	2	0	0	0	0
2. 2014.....	1,267	1,341	1,341	1,343	1,343	1,343	1,343	1,343	1,343	1,343
3. 2015.....	XXX	951	1,064	1,069	1,070	1,071	1,071	1,072	1,072	1,072
4. 2016.....	XXX	XXX	1,076	1,162	1,167	1,167	1,167	1,168	1,168	1,168
5. 2017.....	XXX	XXX	XXX	1,018	1,136	1,146	1,147	1,147	1,147	1,147
6. 2018.....	XXX	XXX	XXX	XXX	1,467	1,677	1,684	1,689	1,690	1,690
7. 2019.....	XXX	XXX	XXX	XXX	XXX	5,198	5,979	6,005	6,015	6,017
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	7,660	8,725	8,765	8,779
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,032	15,607	15,710
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,734	14,940
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,834

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	3,725	1,193	529	214	116	80	55	45	33	21
2. 2014.....	5,861	7,837	8,389	8,702	8,795	8,825	8,839	8,848	8,855	8,859
3. 2015.....	XXX	5,295	7,381	7,998	8,306	8,430	8,468	8,482	8,493	8,502
4. 2016.....	XXX	XXX	5,186	7,778	8,475	8,804	8,917	8,970	8,990	8,999
5. 2017.....	XXX	XXX	XXX	5,681	8,311	9,050	9,435	9,586	9,644	9,675
6. 2018.....	XXX	XXX	XXX	XXX	5,530	8,249	8,963	9,376	9,561	9,636
7. 2019.....	XXX	XXX	XXX	XXX	XXX	5,492	8,233	9,095	9,592	9,786
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	3,414	5,040	5,574	5,912
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,568	6,068	6,782
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,663	6,209
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,778

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	2,096	999	503	338	244	197	171	159	150	139
2. 2014.....	2,394	989	464	160	60	34	24	20	19	16
3. 2015.....	XXX	2,740	1,104	459	187	75	48	36	29	27
4. 2016.....	XXX	XXX	2,899	1,167	508	202	100	54	39	33
5. 2017.....	XXX	XXX	XXX	2,762	1,192	567	246	109	65	39
6. 2018.....	XXX	XXX	XXX	XXX	2,998	1,298	647	277	112	59
7. 2019.....	XXX	XXX	XXX	XXX	XXX	3,223	1,502	725	311	131
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	2,004	939	448	163
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,641	1,152	540
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,641	1,146
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,618

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	2,377	340	132	70	26	35	31	33	24	10
2. 2014.....	11,164	12,770	12,977	13,056	13,074	13,082	13,087	13,092	13,098	13,099
3. 2015.....	XXX	11,009	12,677	12,853	12,949	12,984	13,002	13,009	13,014	13,023
4. 2016.....	XXX	XXX	10,868	12,746	12,969	13,081	13,120	13,132	13,137	13,143
5. 2017.....	XXX	XXX	XXX	9,837	11,838	12,159	12,294	12,341	12,362	12,374
6. 2018.....	XXX	XXX	XXX	XXX	9,922	11,913	12,175	12,311	12,356	12,383
7. 2019.....	XXX	XXX	XXX	XXX	XXX	10,104	12,153	12,489	12,654	12,707
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	6,406	7,601	7,792	7,900
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,471	9,519	9,826
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,212	10,446
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,070

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	1	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	1	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	1	2	2
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	1	1	1
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	29	6	2	0	0	4	0	1	2	1
2. 2014.....	19	31	35	35	36	36	36	36	36	36
3. 2015.....	XXX	11	17	21	23	23	23	23	23	23
4. 2016.....	XXX	XXX	13	20	20	20	20	20	20	20
5. 2017.....	XXX	XXX	XXX	27	34	34	34	34	34	34
6. 2018.....	XXX	XXX	XXX	XXX	24	45	45	45	45	45
7. 2019.....	XXX	XXX	XXX	XXX	XXX	30	43	43	43	44
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	37	52	54	54
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	51	51
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	42
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	11	3	1	3	5	4	4	3	4	3
2. 2014.....	19	7	1	1	0	0	0	0	0	0
3. 2015.....	XXX	5	4	2	0	0	0	0	0	0
4. 2016.....	XXX	XXX	3	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	5	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	18	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	8	0	0	1	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	16	2	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	4	4
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	4
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	14	(2)	2	3	2	3	0	2	3	0
2. 2014.....	71	83	83	83	83	83	83	83	83	83
3. 2015.....	XXX	44	51	53	53	53	53	53	53	53
4. 2016.....	XXX	XXX	18	23	23	23	23	23	23	23
5. 2017.....	XXX	XXX	XXX	39	42	42	42	42	42	42
6. 2018.....	XXX	XXX	XXX	XXX	48	54	54	54	54	54
7. 2019.....	XXX	XXX	XXX	XXX	XXX	50	57	57	58	58
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	61	70	71	71
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	60	73	73
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	60
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	1	0	2	0	0	0	0	0	0	0
2. 2014.....	5	7	7	7	7	7	7	7	7	7
3. 2015.....	XXX	2	2	2	2	2	2	2	2	2
4. 2016.....	XXX	XXX	2	3	3	3	3	3	3	3
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	3	3	3	3	3	3
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	1	1	1	1
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	5	5
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	4
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	2	2	0	0	0	0	0	0	0	0
2. 2014.....	2	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	1	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	3	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	2	1	1	1	1
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	3	0	1	0	0	0	0	0	0	0
2. 2014.....	10	10	10	10	10	10	10	10	10	10
3. 2015.....	XXX	2	2	2	2	2	2	2	2	2
4. 2016.....	XXX	XXX	3	3	3	3	3	3	3	3
5. 2017.....	XXX	XXX	XXX	1	1	1	1	1	1	1
6. 2018.....	XXX	XXX	XXX	XXX	8	8	8	8	8	8
7. 2019.....	XXX	XXX	XXX	XXX	XXX	2	4	4	4	4
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	8	8
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	5
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	1	2	2	2	2	2	2	2
5. 2017.....	XXX	XXX	XXX	0	0	1	1	1	1	1
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	1	1	1	4
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	1
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	4	12
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	5
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	1	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	1	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	1	1	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	1	1	1	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	1	1	0	2
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	11	5
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	7
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	1	1	1	1	1	1	1	1	1	1
3. 2015.....	XXX	1	1	1	1	1	1	1	1	1
4. 2016.....	XXX	XXX	2	2	2	2	2	2	2	2
5. 2017.....	XXX	XXX	XXX	1	1	2	2	2	2	2
6. 2018.....	XXX	XXX	XXX	XXX	0	0	1	1	1	1
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	2	2	2	4
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	1	4	4	7
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	16	21
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	16
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	XXX								
6. 2018.....	XXX	XXX	XXX	XXX							
7. 2019.....	XXX	XXX	XXX	XXX	XXX						
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	XXX								
6. 2018.....	XXX	XXX	XXX	XXX							
7. 2019.....	XXX	XXX	XXX	XXX	XXX						
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	243	5	0	0	0	0	0	0	0	0	0
2. 2014.....	676	901	901	900	900	900	900	900	900	900	0
3. 2015.....	XXX	603	757	752	752	752	752	752	752	752	0
4. 2016.....	XXX	XXX	655	745	747	747	747	747	747	747	0
5. 2017.....	XXX	XXX	XXX	791	861	864	864	864	864	864	0
6. 2018.....	XXX	XXX	XXX	XXX	864	888	889	889	888	888	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	751	757	756	753	753	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	551	547	568	568	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	484	543	543	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409	446	38
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	383	383
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	421
13. Earned Premiums (Sch P-Pt. 1)	919	833	809	875	936	778	559	478	486	421	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	243	5	0	0	0	0	0	0	0	0	0
2. 2014.....	676	901	901	900	900	900	900	900	900	900	0
3. 2015.....	XXX	603	757	752	752	752	752	752	752	752	0
4. 2016.....	XXX	XXX	655	745	747	747	747	747	747	747	0
5. 2017.....	XXX	XXX	XXX	791	861	864	864	864	864	864	0
6. 2018.....	XXX	XXX	XXX	XXX	864	888	889	889	888	888	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	751	757	756	753	753	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	551	547	568	568	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	484	543	543	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	409	446	38
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	383	383
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	421
13. Earned Premiums (Sch P-Pt. 1)	919	833	809	875	936	778	559	478	486	421	XXX

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	201	201	201	201	201	201	201	201	201	201	0
3. 2015.....	XXX	126	127	128	128	128	128	128	128	128	0
4. 2016.....	XXX	XXX	78	82	82	82	82	82	82	82	0
5. 2017.....	XXX	XXX	XXX	106	106	106	106	106	106	106	0
6. 2018.....	XXX	XXX	XXX	XXX	179	179	179	179	179	179	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	227	228	228	228	228	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	367	349	349	349	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	252	236	236	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	231	243	11
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	247	247
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	259
13. Earned Premiums (Sch P-Pt. 1)	201	126	79	111	179	227	368	233	216	259	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	201	201	201	201	201	201	201	201	201	201	0
3. 2015.....	XXX	126	127	128	128	128	128	128	128	128	0
4. 2016.....	XXX	XXX	78	82	82	82	82	82	82	82	0
5. 2017.....	XXX	XXX	XXX	106	106	106	106	106	106	106	0
6. 2018.....	XXX	XXX	XXX	XXX	179	179	179	179	179	179	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	227	228	228	228	228	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	367	349	349	349	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	252	236	236	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	231	243	11
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	247	247
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	259
13. Earned Premiums (Sch P-Pt. 1)	201	126	79	111	179	227	368	233	216	259	XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	55	55	55	55	55	55	55	55	55	55	0
3. 2015.....	XXX	59	60	60	60	60	60	60	60	60	0
4. 2016.....	XXX	XXX	59	59	59	59	59	59	59	59	0
5. 2017.....	XXX	XXX	XXX	67	67	67	67	67	67	67	0
6. 2018.....	XXX	XXX	XXX	XXX	397	397	397	397	397	397	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	2,351	2,351	2,351	2,351	2,351	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5,343	5,343	5,343	5,343	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,979	8,979	8,979	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,612	12,612	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,999	15,999
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,999
13. Earned Premiums (Sch P-Pt. 1)	55	59	59	67	397	2,351	5,343	8,979	12,612	15,999	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	55	55	55	55	55	55	55	55	55	55	0
3. 2015.....	XXX	59	60	60	60	60	60	60	60	60	0
4. 2016.....	XXX	XXX	59	59	59	59	59	59	59	59	0
5. 2017.....	XXX	XXX	XXX	67	67	67	67	67	67	67	0
6. 2018.....	XXX	XXX	XXX	XXX	397	397	397	397	397	397	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	2,351	2,351	2,351	2,351	2,351	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5,343	5,343	5,343	5,343	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,979	8,979	8,979	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,612	12,612	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,999	15,999
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,999
13. Earned Premiums (Sch P-Pt. 1)	55	59	59	67	397	2,351	5,343	8,979	12,612	15,999	XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

N O N E

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	9	9	9	9	9	9	9	9	9	9	0
3. 2015.....	XXX	2	2	2	2	2	2	2	2	2	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	9	2	0	0	0	0	0	0	0	0	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	9	9	9	9	9	9	9	9	9	9	0
3. 2015.....	XXX	2	2	2	2	2	2	2	2	2	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	9	2	0	0	0	0	0	0	0	0	XXX

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?\$0
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior	0	0
1.602 2014	0	0
1.603 2015	0	0
1.604 2016	0	0
1.605 2017	0	0
1.606 2018	0	0
1.607 2019	0	0
1.608 2020	0	0
1.609 2021	0	0
1.610 2022	0	0
1.611 2023	0	0
1.612 Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars) 5.1 Fidelity0
 5.2 Surety0

6. Claim count information is reported per claim or per claimant (Indicate which)per claimant.....
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []
- 7.2 (An extended statement may be attached.)
 Larger than expected catastrophes were experienced during accident years 2021, 2022 and 2023.

**SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Other Alien	OT					
59. Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
0088	The Hanover Insurance Group	12833	80-0266582				440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	12833	84-3300049				AIXHI LLC	MA	NIA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	12833	20-5233538				AIX Specialty Insurance Company	DE	IA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10212	20-3051651				AIX, Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	41840	04-3272695				Allmerica Financial Alliance Insurance Co.	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	41840	23-2643430				Allmerica Financial Benefit Insurance Co.	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	12260	04-3194493				Allmerica Plus Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	31534	54-1632456				Allmerica Securities Trust	MA	NIA	The Hanover Insurance Group, Inc.	Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	31534	52-1827116				Campania Holding Company, Inc.	VA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10714	38-0421730				Campmed Casualty & Indemnity Co. Inc.	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10714	36-4123481				Citizens Insurance Company of America	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10176	38-3167100				Citizens Insurance Company of Illinois	IL	IA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10395	38-3167100				Citizens Insurance Company of Ohio	OH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	22306	35-1958418				Citizens Insurance Company of the Midwest	IN	RE	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	22306	27-1652700				CitySquare II Development Co., L.L.C	MA	NIA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	22306	27-2400275				Educators Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	42552	52-1172293				Hanover Specialty Insurance Brokers, Inc.	VA	NIA	Verlan Holdings, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	42552	04-2217600				Massachusetts Bay Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	42552	84-3309673				NAG Merger LLC	MA	NIA	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	36064	16-1140177				NOVA Casualty Company	NY	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	36064	04-2854021				Opus Investment Management, Inc.	MA	UIP	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	41602	38-3324634				Professionals Direct, Inc.	MI	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	22292	04-3063898				The Hanover American Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	22292	98-1303999				The Hanover Atlantic Insurance Company Ltd.	BMU	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	YES	
0088	The Hanover Insurance Group	13147	75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	13147	13-5129825				The Hanover Insurance Company	NH	UDP	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10815	04-3263626				The Hanover Insurance Group, Inc.	DE	UIP	The Hanover Insurance Group, Inc.	Ownership, Board, Management	0.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10815	74-3242673				The Hanover National Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10815	04-2448927				VeraVest Investments, Inc.	MA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10815	52-0903682				Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	10815	52-2044133				Verlan Holdings, Inc.	MD	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	

NONE

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
12833	20-5233538	AIX Specialty Insurance Co.	0	0	0	0	0	0		0	0	425,147,018
10212	04-3272695	Allmerica Financial Alliance Ins Co.	0	5,000,000	0	0	0	0		0	5,000,000	258,181,555
41840	23-2643430	Allmerica Financial Benefit Ins Co.	0	14,998,909	0	0	0	(56,932,891)		0	(41,933,982)	1,062,155,403
12260	52-1827116	Campmed Casualty & Indemnity Company, Inc.	(350,000)	0	0	0	0	0		0	(350,000)	4,670,758
31534	38-0421730	Citizens Insurance Co. of America	(10,000,000)	0	(9,883,036)	0	164,577,949	(118,012,219)		0	26,682,694	(385,345,954)
10714	36-4123481	Citizens Insurance Co. of Illinois	0	2,000,000	0	0	0	0		0	2,000,000	62,176,786
10176	38-3167100	Citizens Insurance Co. of Ohio	(1,000,000)	0	0	0	0	0		0	(1,000,000)	8,553,921
10395	35-1958418	Citizens Insurance Co. of the Midwest	0	16,000,000	0	0	0	0		0	16,000,000	1,356,711,618
36064	04-3063898	The Hanover American Insurance Co.	0	0	0	0	0	(70,501,795)		0	(70,501,795)	530,576,585
	98-1300399	The Hanover Atlantic Insurance Company	0	0	0	0	0	0		0	0	132,647,091
22292	13-5129825	The Hanover Insurance Company	(87,150,000)	(35,998,909)	(88,738,500)	0	(112,479,809)	414,427,742		(125,000,000)	(34,939,476)	(5,303,660,199)
41602	75-1827351	The Hanover Casualty Company	(800,000)	0	0	0	0	0		0	(800,000)	99,680,531
22306	04-2217600	Massachusetts Bay Insurance Company	0	0	0	0	0	(109,917,674)		0	(109,917,674)	1,044,382,452
42552	16-1140177	NOVA Casualty Co.	0	0	0	0	0	0		0	0	590,645,246
	04-3263626	The Hanover Insurance Group, Inc.	100,000,000	0	98,621,536	0	(52,098,140)	0		125,000,000	271,523,396	0
13147	74-3242673	The Hanover National Insurance Company	(200,000)	0	0	0	0	0		0	(200,000)	0
10815	52-0903682	Verlan Fire Insurance Co.	(500,000)	0	0	0	0	(59,063,163)		0	(59,563,163)	113,477,189
	04-2854021	Opus Investment Management, Inc.	0	(2,000,000)	0	0	0	0		0	(2,000,000)	0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control/ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control/ Affiliation of Column 5 Over Column 6 (Yes/No)
AIX Specialty Insurance Insurance Company	NOVA Casualty Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Allmerica Financial Allicance Insurance Co.	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Allmerican Financial Benefit Insurance Co.	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Campmed Casualty & Indemnity Co. Inc.	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Citizens Insurance Company of America	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Citizens Insurance Company of Illinois	Opus Investment Management, Inc.	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Citizens Insurance Company of Ohio	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Citizens Insurance Company of the Midwest	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Massachusetts Bay Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
NOVA Casualty Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover American Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover Atlantic Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover Casualty Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover Insurance Company	Opus Investment Management, Inc.	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover National Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Verlan Fire Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	Responses
MARCH FILING	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
APRIL FILING	
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING	
8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
JUNE FILING	
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	YES
29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES
APRIL FILING	
30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING	
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

- 11.
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Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]



12. Financial Guaranty Insurance Exhibit [Document Identifier 240]



13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



14. Supplement A to Schedule T [Document Identifier 455]



15. Trusteed Surplus Statement [Document Identifier 490]



16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



18. Medicare Part D Coverage Supplement [Document Identifier 365]



20. Reinsurance Attestation Supplement [Document Identifier 399]



21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]



22. Bail Bond Supplement [Document Identifier 500]



23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]



24. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]



25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]



26. Relief from the Requirements for Audit Committees [Document Identifier 226]



27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]



30. Credit Insurance Experience Exhibit [Document Identifier 230]



31. Long-Term Care Experience Reporting Forms [Document Identifier 306]



32. Accident and Health Policy Experience Exhibit [Document Identifier 210]



33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]



35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]



36. Private Flood Insurance Supplement [Document Identifier 560]



37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



NONE



SUPPLEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES

(To Be Filed by March 1)

NAIC Group Code 0088

NAIC Company Code 10395

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations	0	0	0	0
2. Errors & omissions (E&O)	0	0	0	0
3. Directors & officers (D&O)	0	0	0	0
4. Environmental liability	0	0	0	0
5. Excess workers' compensation	0	0	0	0
6. Commercial excess & umbrella	0	0	0	0
7. Personal umbrella	14,349,913	16,728,603	4,802,331	11,026,308
8. Employment liability	0	0	0	0
9. Aggregate write-ins for facilities & premises (CGL)	135,092	152,857	57,151	19,846
10. Internet & cyber liability	0	0	0	0
11. Aggregate write-ins for other	68,927	77,490	0	0
12. Total ASL 17 - other liability (sum of Lines 1 through 11)	14,553,932	16,958,950	4,859,482	11,046,154
DETAILS OF WRITE-INS				
0901. Aggregate of facilities & premises (CGL) lines of business less than 10% category	135,092	152,857	57,151	19,846
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	135,092	152,857	57,151	19,846
1101. Aggregate of facilities & premises (CGL) lines of business less than 10% category	68,927	77,490	0	0
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	68,927	77,490	0	0



**SUPPLEMENT FOR THE YEAR 2023 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST
 MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF:

NAIC Group Code 0088

NAIC Company Code 10395

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income
2. Health
3. Homeowners
4. Individual Annuity
5. Individual Life
6. Lender-Placed Home and Auto
7. Long-Term Care
8. Other Health
9. Private Flood
10. Private Passenger Auto
11. Short-Term Limited Duration Health Plans
12. Travel	