

ANNUAL STATEMENT

OF THE

Forward Mutual Insurance Company

TO THE

Insurance Department

OF THE

STATE OF

Wisconsin

FOR THE YEAR ENDED
DECEMBER 31, 2022

PROPERTY AND CASUALTY

2022



ACCOUNTANTS' COMPILATION REPORT

Board of Directors
Forward Mutual Insurance Company
Ixonia, Wisconsin

Management is responsible for the accompanying financial statements of Forward Mutual Insurance Company, which comprise the statements of assets, liabilities, surplus, and other funds as of December 31, 2022 and 2021, and the related statements of income and cash flow for the years then ended, included in the accompanying prescribed form. We have performed compilation engagements in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the financial statements included in the accompanying prescribed form, nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the financial statements included in the accompanying prescribed form.

The financial statements included in the accompanying prescribed form are intended to comply with the accounting practices and procedures of the National Association of Insurance Commissioners, as prescribed or permitted by the Wisconsin Office of the Commissioner of Insurance, and are not intended to be a presentation in accordance with accounting principles generally accepted in the United States of America.

This report is intended solely for the information and use of the management of Forward Mutual Insurance Company, the National Association of Insurance Commissioners and the Wisconsin Office of the Commissioner of Insurance and is not intended to be and should not be used by anyone other than these specified parties.

The supplementary information contained in the accompanying prescribed form is presented for purposes of additional analysis. Such information is the responsibility of management. The supplementary information was subject to our compilation engagement. We have not audited or reviewed the supplementary information and do not express an opinion, a conclusion, nor provide any form of assurance on such supplementary information.

CliftonLarsonAllen LLP

Middleton, Wisconsin
February 28, 2023



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022
OF THE CONDITION AND AFFAIRS OF THE

Forward Mutual Insurance Company

NAIC Group Code 0000 (Current) (Prior) NAIC Company Code 11387 Employer's ID Number 39-0959933

Organized under the Laws of Wisconsin, State of Domicile or Port of Entry WI
Country of Domicile United States of America

Incorporated/Organized 11/06/1875 Commenced Business 01/04/1876

Statutory Home Office W 1202 Glenview Avenue, Ixonia, WI, US 53036
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office W 1202 Glenview Avenue
(Street and Number)
Ixonia, WI, US 53036 (City or Town, State, Country and Zip Code)
920-261-6616 (Area Code) (Telephone Number)

Mail Address P.O. Box 326, Ixonia, WI, US 53036
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records W 1202 Glenview Avenue
(Street and Number)
Ixonia, WI, US 53036 (City or Town, State, Country and Zip Code)
920-261-6616 (Area Code) (Telephone Number)

Internet Website Address forwardmutual.com

Statutory Statement Contact Sarah Mueller, 920-261-6616
(Name) (Area Code) (Telephone Number)
sarah@forwardmutual.com, 920-261-8618
(E-mail Address) (FAX Number)

OFFICERS

Chairman of the Board Stephen M Zillmer Secretary David W Blank
Vice-Chairman of the Board Roger L Degner Treasurer David W Blank

OTHER

DIRECTORS OR TRUSTEES

Stephen M Zillmer Roger L Degner Dale H Zastrow
David W Blank David P Flood Mark D Mallow
Randall L Wegner

State of Wisconsin SS
County of Jefferson

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.

Stephen M Zillmer
Chairman of the Board

Roger L Degner
Vice-Chairman of the Board

David W Blank
Secretary

Subscribed and sworn to before me this _____ day of _____

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 2022 OF THE Forward Mutual Insurance Company

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	4,910,539		4,910,539	4,946,160
2. Stocks (Schedule D):				
2.1 Preferred stocks	15,000		15,000	15,000
2.2 Common stocks	2,538,953		2,538,953	3,501,246
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances)	244,532		244,532	257,083
4.2 Properties held for the production of income (less \$0 encumbrances)			0	0
4.3 Properties held for sale (less \$0 encumbrances)			0	0
5. Cash (\$ 290,610 , Schedule E - Part 1), cash equivalents (\$ 179,409 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	470,019		470,019	148,290
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivable for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	8,179,043	0	8,179,043	8,867,779
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	36,951		36,951	39,355
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	14,165		14,165	18,299
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	157,537		157,537	138,190
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	37,500		37,500	37,500
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software	3,024		3,024	5,812
21. Furniture and equipment, including health care delivery assets (\$)	3,071	3,071	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets	553	0	553	556
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	8,431,844	3,071	8,428,773	9,107,491
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	8,431,844	3,071	8,428,773	9,107,491
DETAILS OF WRITE-INS				
1101.				
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)	0	0	0	0
2501. Fire dues recoverable	553		553	556
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	553	0	553	556

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	60,033	57,467
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	3,307	2,125
4. Commissions payable, contingent commissions and other similar charges	27,779	34,551
5. Other expenses (excluding taxes, licenses and fees)	23,075	20,526
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	829	3,200
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2 Net deferred tax liability	8,000	142,000
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 104,000 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)	694,591	675,110
10. Advance premium	42,117	32,549
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	27,066	26,397
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	0	0
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$0 certified) (Schedule F, Part 3, Column 78)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives	0	0
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	886,797	993,925
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	886,797	993,925
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes	0	
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	7,541,976	8,113,566
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	7,541,976	8,113,566
38. TOTALS (Page 2, Line 28, Col. 3)	8,428,773	9,107,491
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	1,097,319	1,105,716
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	647,754	707,162
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	81,985	74,282
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	617,273	554,615
5. Aggregate write-ins for underwriting deductions	0	0
6. Total underwriting deductions (Lines 2 through 5)	1,347,012	1,336,059
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(249,693)	(230,343)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	130,130	190,053
10. Net realized capital gains (losses) less capital gains tax of \$ (Exhibit of Capital Gains (Losses))	132,071	127,896
11. Net investment gain (loss) (Lines 9 + 10)	262,201	317,949
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)	0	0
13. Finance and service charges not included in premiums	29,846	24,663
14. Aggregate write-ins for miscellaneous income	0	0
15. Total other income (Lines 12 through 14)	29,846	24,663
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	42,354	112,269
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	42,354	112,269
19. Federal and foreign income taxes incurred		(37,500)
20. Net income (Line 18 minus Line 19)(to Line 22)	42,354	149,769
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	8,113,566	7,902,194
22. Net income (from Line 20)	42,354	149,769
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (117,002)	(632,807)	61,920
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	17,000	(1,000)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	1,863	683
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	0	0
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (Stock Dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in	0	0
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	0	0
37. Aggregate write-ins for gains and losses in surplus	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	(571,590)	211,372
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	7,541,976	8,113,566
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above)	0	0
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	1,111,824	1,100,360
2. Net investment income	157,714	216,587
3. Miscellaneous income	29,846	24,663
4. Total (Lines 1 through 3)	1,299,384	1,341,610
5. Benefit and loss related payments	645,188	801,113
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	704,670	639,307
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	(32,800)
10. Total (Lines 5 through 9)	1,349,858	1,407,620
11. Net cash from operations (Line 4 minus Line 10)	(50,474)	(66,010)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	115,000	490,000
12.2 Stocks	853,813	496,492
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	968,813	986,492
13. Cost of investments acquired (long-term only):		
13.1 Bonds	92,008	924,056
13.2 Stocks	509,258	141,999
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	601,266	1,066,055
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	367,547	(79,563)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	4,656	6,726
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	4,656	6,726
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	321,729	(138,847)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	148,290	287,137
19.2 End of period (Line 18 plus Line 19.1)	470,019	148,290

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

--	--	--

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	0		0	0
2.1 Allied lines	0		0	0
2.2 Multiple peril crop	0		0	0
2.3 Federal flood	0		0	0
2.4 Private crop	0		0	0
2.5 Private flood	0		0	0
3. Farmowners multiple peril	620,235	355,108	388,971	586,372
4. Homeowners multiple peril	498,884	320,002	305,620	513,266
5.1 Commercial multiple peril (non-liability portion)	0		0	0
5.2 Commercial multiple peril (liability portion)	0		0	0
6. Mortgage guaranty	0		0	0
8. Ocean marine	0		0	0
9. Inland marine	0		0	0
10. Financial guaranty	0		0	0
11.1 Medical professional liability - occurrence	0		0	0
11.2 Medical professional liability - claims-made	0		0	0
12. Earthquake	0		0	0
13.1 Comprehensive (hospital and medical) individual	0		0	0
13.2 Comprehensive (hospital and medical) group	0		0	0
14. Credit accident and health (group and individual)	0		0	0
15.1 Vision only	0		0	0
15.2 Dental only	0		0	0
15.3 Disability income	0		0	0
15.4 Medicare supplement	0		0	0
15.5 Medicaid Title XIX	0		0	0
15.6 Medicare Title XVIII	0		0	0
15.7 Long-term care	0		0	0
15.8 Federal employees health benefits plan	0		0	0
15.9 Other health	0		0	0
16. Workers' compensation	0		0	0
17.1 Other liability - occurrence	0		0	0
17.2 Other liability - claims-made	0		0	0
17.3 Excess workers' compensation	0		0	0
18.1 Products liability - occurrence	0		0	0
18.2 Products liability - claims-made	0		0	0
19.1 Private passenger auto no-fault (personal injury protection)	0		0	0
19.2 Other private passenger auto liability.....	0		0	0
19.3 Commercial auto no-fault (personal injury protection)	0		0	0
19.4 Other commercial auto liability.....	0		0	0
21.1 Private passenger auto physical damage	0		0	0
21.2 Commercial auto physical damage	0		0	0
22. Aircraft (all perils)	0		0	0
23. Fidelity	0		0	0
24. Surety	0		0	0
26. Burglary and theft	0		0	0
27. Boiler and machinery	(2,319)	0	0	(2,319)
28. Credit	0		0	0
29. International	0		0	0
30. Warranty	0		0	0
31. Reinsurance - nonproportional assumed property	0		0	0
32. Reinsurance - nonproportional assumed liability	0		0	0
33. Reinsurance - nonproportional assumed financial lines	0		0	0
34. Aggregate write-ins for other lines of business	0	0	0	0
35. TOTALS	1,116,800	675,110	694,591	1,097,319
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire					0
2.1 Allied lines					0
2.2 Multiple peril crop					0
2.3 Federal flood					0
2.4 Private crop					0
2.5 Private flood					0
3. Farmowners multiple peril	388,971				388,971
4. Homeowners multiple peril	305,620				305,620
5.1 Commercial multiple peril (non-liability portion)					0
5.2 Commercial multiple peril (liability portion)					0
6. Mortgage guaranty					0
8. Ocean marine					0
9. Inland marine					0
10. Financial guaranty					0
11.1 Medical professional liability - occurrence					0
11.2 Medical professional liability - claims-made					0
12. Earthquake					0
13.1 Comprehensive (hospital and medical) individual					0
13.2 Comprehensive (hospital and medical) group					0
14. Credit accident and health (group and individual)					0
15.1 Vision only					0
15.2 Dental only					0
15.3 Disability income					0
15.4 Medicare supplement					0
15.5 Medicaid Title XIX					0
15.6 Medicare Title XVIII					0
15.7 Long-term care					0
15.8 Federal employees health benefits plan					0
15.9 Other health					0
16. Workers' compensation					0
17.1 Other liability - occurrence					0
17.2 Other liability - claims-made					0
17.3 Excess workers' compensation					0
18.1 Products liability - occurrence					0
18.2 Products liability - claims-made					0
19.1 Private passenger auto no-fault (personal injury protection)					0
19.2 Other private passenger auto liability.....					0
19.3 Commercial auto no-fault (personal injury protection)					0
19.4 Other commercial auto liability.....					0
21.1 Private passenger auto physical damage					0
21.2 Commercial auto physical damage					0
22. Aircraft (all perils)					0
23. Fidelity					0
24. Surety					0
26. Burglary and theft					0
27. Boiler and machinery					0
28. Credit					0
29. International					0
30. Warranty					0
31. Reinsurance - nonproportional assumed property					0
32. Reinsurance - nonproportional assumed liability					0
33. Reinsurance - nonproportional assumed financial lines					0
34. Aggregate write-ins for other lines of business	0	0	0	0	0
35. TOTALS	694,591	0	0	0	694,591
36. Accrued retrospective premiums based on experience					0
37. Earned but unbilled premiums					0
38. Balance (Sum of Line 35 through 37)					694,591
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
	Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	0					0
2.1 Allied lines	0					0
2.2 Multiple peril crop	0					0
2.3 Federal flood	0					0
2.4 Private crop	0					0
2.5 Private flood	0					0
3. Farmowners multiple peril	856,542				236,307	620,235
4. Homeowners multiple peril	684,554				185,670	498,884
5.1 Commercial multiple peril (non-liability portion)	0					0
5.2 Commercial multiple peril (liability portion)	0					0
6. Mortgage guaranty	0					0
8. Ocean marine	0					0
9. Inland marine	0					0
10. Financial guaranty	0					0
11.1 Medical professional liability - occurrence	0					0
11.2 Medical professional liability - claims-made	0					0
12. Earthquake	0					0
13.1 Comprehensive (hospital and medical) individual	0					0
13.2 Comprehensive (hospital and medical) group	0					0
14. Credit accident and health (group and individual)	0					0
15.1 Vision only	0					0
15.2 Dental only	0					0
15.3 Disability income	0					0
15.4 Medicare supplement	0					0
15.5 Medicaid Title XIX	0					0
15.6 Medicare Title XVIII	0					0
15.7 Long-term care	0					0
15.8 Federal employees health benefits plan	0					0
15.9 Other health	0					0
16. Workers' compensation	0					0
17.1 Other liability - occurrence	0					0
17.2 Other liability - claims-made	0					0
17.3 Excess workers' compensation	0					0
18.1 Products liability - occurrence	0					0
18.2 Products liability - claims-made	0					0
19.1 Private passenger auto no-fault (personal injury protection)	0					0
19.2 Other private passenger auto liability	0					0
19.3 Commercial auto no-fault (personal injury protection)	0					0
19.4 Other commercial auto liability	0					0
21.1 Private passenger auto physical damage	0					0
21.2 Commercial auto physical damage	0					0
22. Aircraft (all perils)	0					0
23. Fidelity	0					0
24. Surety	0					0
26. Burglary and theft	0					0
27. Boiler and machinery	40,694				43,013	(2,319)
28. Credit	0					0
29. International	0					0
30. Warranty	0					0
31. Reinsurance - nonproportional assumed property	XXX					0
32. Reinsurance - nonproportional assumed liability	XXX					0
33. Reinsurance - nonproportional assumed financial lines	XXX					0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0
35. TOTALS	1,581,790	0	0	0	464,990	1,116,800
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]

If yes: 1. The amount of such installment premiums \$

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A , Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	0			0	0	0	0.0	
2.1 Allied lines	0			0	0	0	0.0	
2.2 Multiple peril crop	0			0	0	0	0.0	
2.3 Federal flood	0			0	0	0	0.0	
2.4 Private crop	0			0	0	0	0.0	
2.5 Private flood	0			0	0	0	0.0	
3. Farmowners multiple peril	168,755		7,450	161,305	16,100	16,067	27.5	
4. Homeowners multiple peril	500,332		16,449	483,883	43,933	41,400	94.8	
5.1 Commercial multiple peril (non-liability portion)	0			0	0	0	0.0	
5.2 Commercial multiple peril (liability portion)	0			0	0	0	0.0	
6. Mortgage guaranty	0			0	0	0	0.0	
8. Ocean marine	0			0	0	0	0.0	
9. Inland marine	0			0	0	0	0.0	
10. Financial guaranty	0			0	0	0	0.0	
11.1 Medical professional liability - occurrence	0			0	0	0	0.0	
11.2 Medical professional liability - claims-made	0			0	0	0	0.0	
12. Earthquake	0			0	0	0	0.0	
13.1 Comprehensive (hospital and medical) individual	0			0	0	0	0.0	
13.2 Comprehensive (hospital and medical) group	0			0	0	0	0.0	
14. Credit accident and health (group and individual)	0			0	0	0	0.0	
15.1 Vision only	0			0	0	0	0.0	
15.2 Dental only	0			0	0	0	0.0	
15.3 Disability income	0			0	0	0	0.0	
15.4 Medicare supplement	0			0	0	0	0.0	
15.5 Medicaid Title XIX	0			0	0	0	0.0	
15.6 Medicare Title XVIII	0			0	0	0	0.0	
15.7 Long-term care	0			0	0	0	0.0	
15.8 Federal employees health benefits plan	0			0	0	0	0.0	
15.9 Other health	0			0	0	0	0.0	
16. Workers' compensation	0			0	0	0	0.0	
17.1 Other liability - occurrence	0			0	0	0	0.0	
17.2 Other liability - claims-made	0			0	0	0	0.0	
17.3 Excess workers' compensation	0			0	0	0	0.0	
18.1 Products liability - occurrence	0			0	0	0	0.0	
18.2 Products liability - claims-made	0			0	0	0	0.0	
19.1 Private passenger auto no-fault (personal injury protection)	0			0	0	0	0.0	
19.2 Other private passenger auto liability	0			0	0	0	0.0	
19.3 Commercial auto no-fault (personal injury protection)	0			0	0	0	0.0	
19.4 Other commercial auto liability	0			0	0	0	0.0	
21.1 Private passenger auto physical damage	0			0	0	0	0.0	
21.2 Commercial auto physical damage	0			0	0	0	0.0	
22. Aircraft (all perils)	0			0	0	0	0.0	
23. Fidelity	0			0	0	0	0.0	
24. Surety	0			0	0	0	0.0	
26. Burglary and theft	0			0	0	0	0.0	
27. Boiler and machinery	6,142		6,142	0	0	0	0.0	
28. Credit	0			0	0	0	0.0	
29. International	0			0	0	0	0.0	
30. Warranty	0			0	0	0	0.0	
31. Reinsurance - nonproportional assumed property	XXX			0	0	0	0.0	
32. Reinsurance - nonproportional assumed liability	XXX			0	0	0	0.0	
33. Reinsurance - nonproportional assumed financial lines	XXX			0	0	0	0.0	
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0.0	
35. TOTALS	675,229	0	30,041	645,188	60,033	57,467	59.0	
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0.0	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0.0	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire				0				0	
2.1 Allied lines				0				0	
2.2 Multiple peril crop				0				0	
2.3 Federal flood				0				0	
2.4 Private crop				0				0	
2.5 Private flood				0				0	
3. Farmowners multiple peril	19,650		13,550	6,100	10,000			16,100	1,653
4. Homeowners multiple peril	620,944		587,011	33,933	10,000			43,933	1,654
5.1 Commercial multiple peril (non-liability portion)				0				0	
5.2 Commercial multiple peril (liability portion)				0				0	
6. Mortgage guaranty				0				0	
8. Ocean marine				0				0	
9. Inland marine				0				0	
10. Financial guaranty				0				0	
11.1 Medical professional liability - occurrence				0				0	
11.2 Medical professional liability - claims-made				0				0	
12. Earthquake				0				0	
13.1 Comprehensive (hospital and medical) individual				0				(a) 0	
13.2 Comprehensive (hospital and medical) group				0				(a) 0	
14. Credit accident and health (group and individual)				0				0	
15.1 Vision only				0				(a) 0	
15.2 Dental only				0				(a) 0	
15.3 Disability income				0				(a) 0	
15.4 Medicare supplement				0				(a) 0	
15.5 Medicaid Title XIX				0				(a) 0	
15.6 Medicare Title XVIII				0				(a) 0	
15.7 Long-term care				0				(a) 0	
15.8 Federal employees health benefits plan				0				(a) 0	
15.9 Other health				0				(a) 0	
16. Workers' compensation				0				0	
17.1 Other liability - occurrence				0				0	
17.2 Other liability - claims-made				0				0	
17.3 Excess workers' compensation				0				0	
18.1 Products liability - occurrence				0				0	
18.2 Products liability - claims-made				0				0	
19.1 Private passenger auto no-fault (personal injury protection)				0				0	
19.2 Other private passenger auto liability				0				0	
19.3 Commercial auto no-fault (personal injury protection)				0				0	
19.4 Other commercial auto liability				0				0	
21.1 Private passenger auto physical damage				0				0	
21.2 Commercial auto physical damage				0				0	
22. Aircraft (all perils)				0				0	
23. Fidelity				0				0	
24. Surety				0				0	
26. Burglary and theft				0				0	
27. Boiler and machinery				0				0	
28. Credit				0				0	
29. International				0				0	
30. Warranty				0				0	
31. Reinsurance - nonproportional assumed property	XXX			0	XXX			0	
32. Reinsurance - nonproportional assumed liability	XXX			0	XXX			0	
33. Reinsurance - nonproportional assumed financial lines	XXX			0	XXX			0	
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0
35. TOTALS	640,594	0	600,561	40,033	20,000	0	0	60,033	3,307
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0

(a) Including \$ for present value of life indemnity claims reported in Lines 13 and 15.

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	25,871			25,871
1.2 Reinsurance assumed				0
1.3 Reinsurance ceded				0
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	25,871	0	0	25,871
2. Commission and brokerage:				
2.1 Direct excluding contingent		236,309		236,309
2.2 Reinsurance assumed, excluding contingent				0
2.3 Reinsurance ceded, excluding contingent		104,753		104,753
2.4 Contingent - direct		4,378		4,378
2.5 Contingent - reinsurance assumed				0
2.6 Contingent - reinsurance ceded				0
2.7 Policy and membership fees				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) ..	0	135,934	0	135,934
3. Allowances to managers and agents				0
4. Advertising	634	5,074	634	6,342
5. Boards, bureaus and associations		17,330		17,330
6. Surveys and underwriting reports		5,641		5,641
7. Audit of assureds' records	338	2,704	338	3,380
8. Salary and related items:				
8.1 Salaries	27,035	216,284	27,035	270,354
8.2 Payroll taxes	2,050	16,400	2,050	20,500
9. Employee relations and welfare	2,594	20,750	2,594	25,938
10. Insurance	2,201	17,607	2,201	22,009
11. Directors' fees	2,275	18,203	2,275	22,753
12. Travel and travel items	2,104	16,831	2,104	21,039
13. Rent and rent items	1,257	10,056	1,257	12,570
14. Equipment	5,345	42,761	5,345	53,451
15. Cost or depreciation of EDP equipment and software	465	3,722	465	4,652
16. Printing and stationery	367	2,934	367	3,668
17. Postage, telephone and telegraph, exchange and express	1,015	8,123	1,015	10,153
18. Legal and auditing	4,224	33,791	4,224	42,239
19. Totals (Lines 3 to 18)	51,904	438,211	51,904	542,019
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$	360	2,880	360	3,600
20.2 Insurance department licenses and fees		9,447		9,447
20.3 Gross guaranty association assessments				0
20.4 All other (excluding federal and foreign income and real estate)				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	360	12,327	360	13,047
21. Real estate expenses	1,585	12,678	1,585	15,848
22. Real estate taxes	781	6,250	781	7,812
23. Reimbursements by uninsured plans				0
24. Aggregate write-ins for miscellaneous expenses	1,484	11,873	13,124	26,481
25. Total expenses incurred	81,985	617,273	67,754 (a)	767,012
26. Less unpaid expenses - current year	3,307	50,854		54,161
27. Add unpaid expenses - prior year	2,125	55,077		57,202
28. Amounts receivable relating to uninsured plans, prior year				0
29. Amounts receivable relating to uninsured plans, current year				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	80,803	621,496	67,754	770,053
DETAILS OF WRITE-INS				
2401. Investment Fees			11,640	11,640
2402. Miscellaneous	1,484	11,873	1,484	14,841
2403.				0
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	1,484	11,873	13,124	26,481

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a)	
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a) 140,508	125,475
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)	69,420	69,420
2.21 Common stocks of affiliates		
3. Mortgage loans	(c)	
4. Real estate	(d) 12,000	12,000
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(e) 3,540	3,540
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	225,468	210,435
11. Investment expenses		(g) 67,394
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 360
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i) 12,551
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		80,305
17. Net investment income (Line 10 minus Line 16)		130,130
DETAILS OF WRITE-INS		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ 1,109 accrual of discount less \$ 13,738 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ 12,000 for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ 1,109 accrual of discount less \$ 13,738 amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ 12,551 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	0	0	0	0	0
1.1 Bonds exempt from U.S. tax			0		
1.2 Other bonds (unaffiliated)	0	0	0	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	132,071	0	132,071	(749,809)	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	132,071	0	132,071	(749,809)	0
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			0
2. Stocks (Schedule D):			
2.1 Preferred stocks			0
2.2 Common stocks			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale			0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			0
6. Contract loans			0
7. Derivatives (Schedule DB)			0
8. Other invested assets (Schedule BA)			0
9. Receivables for securities			0
10. Securities lending reinvested collateral assets (Schedule DL)			0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)			0
14. Investment income due and accrued			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..			0
15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			0
16.2 Funds held by or deposited with reinsured companies			0
16.3 Other amounts receivable under reinsurance contracts			0
17. Amounts receivable relating to uninsured plans			0
18.1 Current federal and foreign income tax recoverable and interest thereon			0
18.2 Net deferred tax asset			0
19. Guaranty funds receivable or on deposit			0
20. Electronic data processing equipment and software			0
21. Furniture and equipment, including health care delivery assets	3,071	4,934	1,863
22. Net adjustment in assets and liabilities due to foreign exchange rates			0
23. Receivables from parent, subsidiaries and affiliates			0
24. Health care and other amounts receivable			0
25. Aggregate write-ins for other than invested assets	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	3,071	4,934	1,863
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. Total (Lines 26 and 27)	3,071	4,934	1,863
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0	0

NOTES TO FINANCIAL STATEMENTS**1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

- A. The accompanying financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Insurance Department of the State of Wisconsin.

The Insurance Department of the State of Wisconsin recognizes only statutory accounting practices prescribed or permitted by the State of Wisconsin for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Wisconsin Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Wisconsin.

Mutual Insurance Companies that hold Wisconsin Reinsurance Corporation (WRC) common and/or preferred stock shall value this investment based on the most recent WRC audited financial statements. Accordingly, the valuation included in the company's December 31, 2022 and 2021, financial statements are based upon WRC's financial statements as of December 31, 2021 and 2020, respectively.

Reconciliation of Prescribed and Permitted Accounting Practices

	State of Domicile	2022	2021
NET INCOME			
(1) Forward Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	WI	\$ 42,354	\$ 149,769
(2) State Prescribed Practices that increase/decrease NAIC SAP			
(3) State Permitted Practices that increase/decrease NAIC SAP			
(4) NAIC SAP (1 - 2 - 3 = 4)	WI	\$ 42,354	\$ 149,769
SURPLUS			
(5) Forward Mutual Insurance Company state basis (Page 3, line 37, Columns 1 & 2)	WI	\$ 7,541,976	\$ 8,113,566
(6) State Prescribed Practices that increase/decrease NAIC SAP			
(7) State Permitted Practices that increase/decrease NAIC SAP			
(8) NAIC SAP (5 - 6 - 7 = 8)	WI	\$ 7,541,976	\$ 8,113,566

- B. The preparation of financial statements in conformity with statutory accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.
- C. Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by daily pro rata methods for direct businesses and are based on reports received from ceding companies for reinsurance.

In addition, the Company uses the following accounting policies:

- Bonds are stated at amortized cost, with amortization being applied on a straight-line basis.
- Stocks and mutual funds are valued at their current market value.
- Real estate is valued at original cost less depreciation, with depreciation being applied on a straight-line basis.
- Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred, but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.

2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS

During the current period, the Company had no accounting changes and no correction of an error.

3. BUSINESS COMBINATIONS AND GOODWILL

The Company did not have any business combinations during the year ending December 31, 2022.

4. DISCONTINUED OPERATIONS

The Company did not have any discontinued operations during the current period.

NOTES TO FINANCIAL STATEMENTS

5. INVESTMENTS

- A. Currently the Company is not carrying any mortgage loans.
 B. The Company did not restructure any debt during the current period.
 C. The Company does not carry any reverse mortgages.
 D. The Company does not carry any loan-backed securities.
 E. The Company does not have Repurchase Agreements and/or Securities Lending Transactions
 F. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable
 G. Repurchase Agreements Transactions Accounted for as a Sale – Not applicable
 H. Reverse Repurchase Agreements Transactions Accounted for as a Sale – Not applicable
 I. Real Estate – Not applicable
 J. Investments in Low Income Housing Tax Credits – Not applicable
 K. Restricted Assets – Not applicable
 L. Working Capital Finance Investments – Not applicable
 M. Offsetting and Netting of Assets and Liabilities – Not applicable
 N. Structured Notes – Not applicable
 O. 5*Securities – Not applicable
 P. Short Sales – Not applicable
 Q. Prepayment Penalty and Acceleration Fees – Not applicable

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

The Company is not involved in any joint ventures, partnerships, or limited liability companies.

7. INVESTMENT INCOME

There is no due and accrued income being excluded from the financial statements.

8. DERIVATIVE INSTRUMENTS

The Company has no derivative instruments at December 31, 2022.

9. INCOME TAXES

- A. The components of the net deferred tax asset / (liability) at December 31 are as follows:

	12/31/22			12/31/21		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total	(4) Ordinary	(5) Capital	(6) (Col.4+5) Total
1. (a) Gross deferred tax assets	\$ 45,000	\$ -	\$ 45,000	\$ 28,000	\$ -	\$ 28,000
(b) Statutory valuation allowance adjustments	-	-	-	-	-	-
(c) Adjusted gross deferred tax assets (1a-1b)	45,000	-	45,000	28,000	-	28,000
(d) Deferred tax assets nonadmitted	-	-	-	-	-	-
(e) Subtotal net admitted deferred tax assets (1c-1d)	45,000	-	45,000	28,000	-	28,000
(f) Deferred tax liabilities	-	53,000	53,000	-	170,000	170,000
(g) Net admitted deferred tax asset/ (net deferred tax liability) (1e-1f)	<u>\$ 45,000</u>	<u>\$ (53,000)</u>	<u>\$ (8,000)</u>	<u>\$ 28,000</u>	<u>\$ (170,000)</u>	<u>\$ (142,000)</u>
	Change					
	(7) (Col. 1-4) Ordinary	(8) (Col. 2-5) Capital	(9) (Col. 7+8) Total			
(a) Gross deferred tax assets	\$ 17,000	\$ -	\$ 17,000			
(b) Statutory valuation allowance adjustments	-	-	-			
(c) Adjusted gross deferred tax assets (1a-1b)	17,000	-	17,000			
(d) Deferred tax assets nonadmitted	-	-	-			
(e) Subtotal net admitted deferred Tax assets (1c-1d)	17,000	-	17,000			
(f) Deferred tax liabilities	-	117,000	117,000			
(g) Net admitted deferred tax asset/ (net deferred tax liability) (1e-1f)	<u>\$ 17,000</u>	<u>\$ 117,000</u>	<u>\$ 134,000</u>			

NOTES TO FINANCIAL STATEMENTS

	12/31/22			12/31/21		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total	(4) Ordinary	(5) Capital	(6) (Col.4+5) Total
Admission Calculation Components						
SSAP No. 101						
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	-	-	-	-	-	-
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	-	-	-	-	-	-
2. Adjusted gross deferred tax assets allowed per limitation threshold	-	-	-	-	-	-
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	-	-	-	-	-	-
(d) Deferred tax assets admitted as the result of application of SSAP No. 101	-	-	-	-	-	-
Total 2(a) + 2(b) +2(c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Change		
(7) (Col. 1-4) Ordinary	(8) (Col. 2-5) Capital	(9) (Col. 7+8) Total

Admission Calculation Components			
SSAP No. 101			
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ -	\$ -	\$ -
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (the lesser of 2(b)1 and 2(b)2 below)	-	-	-
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	-	-	-
2. Adjusted gross deferred tax assets allowed per limitation threshold	-	-	-
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	-	-	-
(d) Deferred tax assets admitted as the result of application of SSAP No. 101.	-	-	-
Total 2(a) + 2(b) +2(c)	\$ -	\$ -	\$ -

	2022	2021
(a) Ratio percentage used to determine recovery period and threshold limitation amount	N/A%	N/A%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ -	\$ -

4. Impact of tax-planning strategies is not applicable.

**B. Unrecognized DTLS
Not Applicable**

NOTES TO FINANCIAL STATEMENTS

C. Current taxes incurred consist of the following major components:

	(1)	(2)	(3)
	12/31/2022	12/31/2021	(Col. 1-2) Change
1. Current income tax:			
(a) Federal	\$ -	\$ -	\$ -
(b) Foreign	-	-	-
(c) Subtotal	-	-	-
(d) Federal income tax on net capital gains	-	-	-
(e) Utilization of capital loss carry-forwards	-	-	-
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	-	-	-
2. Deferred tax assets:			
(a) Ordinary			
(1) Discounting of unpaid losses	-	-	-
(2) Unearned premium reserve	29,000	28,000	1,000
(3) Policyholder reserve	-	-	-
(4) Investments	-	-	-
(5) Deferred acquisition costs	-	-	-
(6) Policyholder dividends accrual	-	-	-
(7) Fixed assets	-	-	-
(8) Compensation and benefits accrual	-	-	-
(9) Pension accrual	-	-	-
(10) Receivables – nonadmitted	-	-	-
(11) Net operating loss carry-forward	16,000	-	16,000
(12) Tax credit carry-forward	-	-	-
(13) Other (including items <5% of total ordinary tax assets)	-	-	-
(99) Subtotal	<u>45,000</u>	<u>28,000</u>	<u>17,000</u>
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	-	-	-
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	<u>45,000</u>	<u>28,000</u>	<u>17,000</u>
(e) Capital:			
(1) Investments	-	-	-
(2) Net capital loss carry-forward	-	-	-
(3) Real estate	-	-	-
(4) Other (including items <5% of total capital tax assets)	-	-	-
(99) Subtotal	<u>-</u>	<u>-</u>	<u>-</u>
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	-	-	-
(h) Admitted capital deferred tax assets (2e99-2f-2g)	<u>-</u>	<u>-</u>	<u>-</u>
(i) Admitted deferred tax assets (2d+2h):	<u>45,000</u>	<u>28,000</u>	<u>17,000</u>
3. Deferred tax liabilities:			
(a) Ordinary			
(1) Investments	\$ -	\$ -	\$ -
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserve	-	-	-
(5) Other (including items <5% of total ordinary tax liabilities)	-	-	-
(99) Subtotal	<u>-</u>	<u>-</u>	<u>-</u>
(b) Capital			
(1) Investments	53,000	170,000	(117,000)
(2) Real estate	-	-	-
(3) Other (including items <5% of total capital tax liabilities)	-	-	-
(99) Subtotal	<u>53,000</u>	<u>170,000</u>	<u>(117,000)</u>
(c) Deferred tax liabilities (3a99+3b99)	<u>53,000</u>	<u>170,000</u>	<u>(117,000)</u>
4. Net deferred tax assets/liabilities (2i-3c)	<u>\$ (8,000)</u>	<u>\$ (142,000)</u>	<u>\$ (134,000)</u>

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The significant items causing a difference between the statutory federal income tax rate and the Company's effective income tax rate are as follows:

	2022	Effective Tax Rate
Provision computed at statutory rate	\$ 9,000	21%
Tax exempt income deduction	(30,000)	(72)
Other	4,000	10
Total effective income tax	<u>\$ (17,000)</u>	<u>-41%</u>
Current federal income tax incurred	\$ -0-	-0-%
Change in net deferred income tax	(17,000)	(41)
Total effective income tax expense	<u>\$ (17,000)</u>	<u>(41%)</u>

E. Operating Loss and Tax Credit Carry Forwards

- At December 31, 2022, the Company had 77,000 of operating loss carryforwards available to offset future taxable income.
- At December 31, 2022, the Company had long-term capital loss carryforwards of approximately \$-0-.

E. The Company does not file a consolidated return.

NOTES TO FINANCIAL STATEMENTS

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

- A. Not applicable.
- B. Not applicable.
- C. Not applicable.
- D. Not applicable.
- E. Not applicable.
- F. Not applicable.
- G. Not applicable.
- H. Not applicable.
- I. Not applicable.
- J. Not applicable.
- K. Not applicable.
- L. Not applicable.
- M. No significant change.
- N. Not applicable.

11. DEBT – Not applicable.

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

- A. The Company has no defined benefit plan.
- B. The Company contributes to employee self-directed simple IRA's for all employees that meet eligibility requirements. The Company will match 100% of eligible employee contributions up to 3% of the employee's wages. Amounts expensed related to the plan amounted to \$7,925 and \$6,944 in 2022 and 2021, respectively.
- C. The Company has no multiemployer plans.
- D. The Company has no consolidated/holding company plans.

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

The Company is a mutual company.

14. CONTINGENCIES

The Company has no contingencies at December 31, 2022. The Company has no legal proceedings which are beyond the ordinary course of business which could have a material effect.

15. LEASES

The Company does not have any material leasing obligations at December 31, 2022.

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

The Company has no financial instruments with off-balance-sheet risk at December 31, 2022.

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

The Company had no sale, transfer, servicing of financial assets, or extinguishments of liabilities during the current period.

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

The Company had no uninsured accident and health plans during the period ended December 31, 2022.

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

The Company did not write any business with any managing general agents or third party administrators during the period ended December 31, 2022.

NOTES TO FINANCIAL STATEMENTS

20. FAIR VALUE MEASUREMENTS

Statements of Statutory Accounting Principles establish a hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizing the use of unobservable inputs by requiring that the most observable inputs be used when available. The Statements of Statutory Accounting Principles define levels within the hierarchy based on the reliability of inputs as follows:

Level 1 - Unadjusted quoted prices for identical assets and liabilities in active markets;

Level 2 - Quoted prices for similar assets and liabilities in active markets (other than those included in Level 1) which are observable for the asset or liability, either directly or indirectly; and

Level 3 - Valuations derived from valuation techniques in which one or more significant inputs or significant value drivers are unobservable.

The following table sets forth admitted assets measured and reported at fair value in the statement of admitted assets, liabilities, and policyholders' surplus and the respective levels to which the fair value measurements are classified within the fair value hierarchy as of December 31, 2022 and 2021:

	<u>12/31/22</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>	<u>Total</u>
Admitted assets:					
Common stocks	\$ 2,538,953	\$ 1,786,314	\$ -	\$ 752,639	\$ 2,538,953
Preferred stocks	15,000	-	-	15,000	15,000
	<u>12/31/21</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>	<u>Total</u>
Admitted assets:					
Common stocks	\$ 3,501,246	\$ 2,555,858	\$ -	\$ 945,388	\$ 3,501,246
Preferred stocks	15,000	-	-	15,000	15,000

Stock securities listed on a national market or exchange are valued at the last sales price, or if there is no sale and the market is still considered active, at the last transaction price before year-end. Such securities are classified within Level 1 of the valuation hierarchy.

Stocks and mutual funds in Level 3 consist of the Company's investment in WRC. The fair value is determined based on the most recent audited financial statements of WRC as described in Note 1.

There were no realized gains or losses recognized in the statement of operations - statutory basis on the WRC stock for the years ended December 31, 2022 and 2021. Unrealized losses totaling \$192,749 and \$44,760 for the years ended December 31, 2022 and 2021, respectively, are included as an element of the adjustment to surplus. There were no acquisitions or redemptions of the WRC stock during the year ended December 31, 2022 and 2021. There were also no transfers in and/or out of Level 3 for the years ended December 31, 2022 and 2021. The only change to the value of the WRC stock relates to the unrealized losses above.

21. OTHER ITEMS

The Company has elected to use rounding in reporting amounts in the statement.

22. EVENTS SUBSEQUENT

Management evaluated subsequent events through February 28, 2023, the date the financial statements were available to be issued. Events or transactions occurring after December 31, 2022, but prior to February 28, 2023, that provided additional evidence about conditions that existed at December 31, 2022, have been recognized in the financial statements for the year ended December 31, 2022. Events or transactions that provided evidence about conditions that did not exist at December 31, 2022, but arose before the financial statements were available to be issued have not been recognized in the financial statements for the year ended December 31, 2022.

23. REINSURANCE

A. The Company has unsecured reinsurance recoverable from Grinnell Reinsurance Company in the amount of \$600,561 and \$224,700 deducted from unpaid losses and loss adjusting expenses at December 31, 2022 and 2021, respectively, and \$0- relating to paid loss and loss adjusting expenses at December 31, 2022 and 2021.

B. The Company does not have any reinsurance recoverable (paid or unpaid) in dispute at December 31, 2022.

	<u>Assumed</u>		<u>Ceded</u>		<u>Net</u>	
	<u>(1)</u>	<u>(2)</u>	<u>(3)</u>	<u>(4)</u>	<u>(5)</u>	<u>(6)</u>
	<u>Premium</u>	<u>Commission</u>	<u>Premium</u>	<u>Commission</u>	<u>Premium</u>	<u>Commission</u>
	<u>Reserve</u>	<u>Equity</u>	<u>Reserve</u>	<u>Equity</u>	<u>Reserve</u>	<u>Equity</u>
a. Affiliates	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. All other	-	-	103,509	-	(103,509)	-
c. Total	\$ -	\$ -	\$ 103,509	\$ -	\$ (103,509)	\$ -

d. Direct Unearned Premium reserve \$798,100.

D. The Company has not written off any reinsurance recoverable in the current year.

E. The Company has not had any commutation of ceded reinsurance during 2022.

F. The Company has no Retroactive Reinsurance Contracts at December 31, 2022.

G. The Company had no reinsurance accounted for as a deposit.

H. The Company had no transfer of property and casualty run-off agreements.

I. The Company's reinsurer's rating was not downgraded, not was their status subject to revocation.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

The Company had no retrospectively rated contracts.

NOTES TO FINANCIAL STATEMENTS

25. CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSE

<u>Losses and LAE (000's omitted)</u>	<u>2022</u>	<u>2021</u>
Unpaid Losses and LAE at beginning of year	\$ 60	\$ 154
Losses and LAE incurred in current year:		
For current year losses and LAE	750	791
For prior year losses and LAE	<u>(20)</u>	<u>(10)</u>
Total incurred	<u>730</u>	<u>781</u>
Losses and LAE paid in current year		
For current year losses and LAE	693	734
For prior year losses and LAE	<u>33</u>	<u>141</u>
Total paid	<u>726</u>	<u>875</u>
Unpaid Losses and LAE at end of year	<u>\$ 63</u>	<u>\$ 60</u>

26. INTERCOMPANY POOLING ARRANGEMENTS

The Company is not part of a group of affiliated insurers and does not utilize pooling arrangements.

27. STRUCTURED SETTLEMENTS

The Company has not purchased any annuities under which the Company is the owner and payee.

28. HEALTH CARE RECEIVABLES

The Company has no health care receivables.

29. PARTICIPATING POLICIES

The Company has no participating policies.

30. PREMIUM DEFICIENCY RESERVES

The Company has no premium deficiency reserves.

31. HIGH DEDUCTIBLES

The Company does not issue policies with high deductibles.

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

None of the liabilities for unpaid losses or unpaid loss adjusting expenses have been discounted in the 2022 financial statements.

33. ASBESTOS/ENVIRONMENTAL RESERVES

None.

34. SUBSCRIBER SAVINGS ACCOUNTS

Mutual insurance company - not applicable.

35. MULTIPLE PERIL CROP INSURANCE

The Company does not write multiple peril crop insurance.

36. FINANCIAL GUARANTY INSURANCE

The Company is not a financial guarantee insurer.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No [X]
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [] No [] N/A [X]
- 1.3 State Regulating? Wisconsin
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2020
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2020
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 09/09/2021
- 3.4 By what department or departments?
The Wisconsin Office of the Commissioner of Insurance
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information:
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
7.21 State the percentage of foreign control; %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

GENERAL INTERROGATORIES

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

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

- 8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [] No [X]
- 8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
CliftonLarsonAllen, LLP; 8215 Greenway Blvd, Suite 600, Middleton, WI 53562
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [X] No []
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
Preparation of the tax return, compilation of the annual and quarterly statements and financial statement disclosures
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain
.....
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Sarah Mueller is the President and CEO of the company.
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 12.11 Name of real estate holding company ...
- 12.12 Number of parcels involved
- 12.13 Total book/adjusted carrying value \$
- 12.2 If, yes provide explanation:
.....
- 13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [X] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No [X]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A [X]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
.....
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
.....

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers.....\$
 - 20.12 To stockholders not officers.....\$
 - 20.13 Trustees, supreme or grand (Fraternal Only) \$
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers.....\$
 - 20.22 To stockholders not officers.....\$
 - 20.23 Trustees, supreme or grand (Fraternal Only) \$
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others.....\$
 - 21.22 Borrowed from others.....\$
 - 21.23 Leased from others\$
 - 21.24 Other\$
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$
 - 22.22 Amount paid as expenses\$
 - 22.23 Other amounts paid\$
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... Yes [X] No []

GENERAL INTERROGATORIES

- 25.02 If no, give full and complete information relating thereto
.....
- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
.....
- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]
- 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$0
- 25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$0
- 25.093 Total payable for securities lending reported on the liability page. \$0

- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [] No [X]
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements \$
- 26.22 Subject to reverse repurchase agreements \$
- 26.23 Subject to dollar repurchase agreements \$
- 26.24 Subject to reverse dollar repurchase agreements \$
- 26.25 Placed under option agreements \$
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
- 26.27 FHLB Capital Stock \$
- 26.28 On deposit with states \$
- 26.29 On deposit with other regulatory bodies \$
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
- 26.32 Other \$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? . Yes [] No [X]
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 Yes [] No []
- 27.42 Permitted accounting practice Yes [] No []
- 27.43 Other accounting guidance Yes [] No []
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []
- The reporting entity has obtained explicit approval from the domiciliary state.
 - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]
- 28.2 If yes, state the amount thereof at December 31 of the current year. \$
29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [X] No []
- 29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Comerica Bank	Detroit, MI

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
GENERAL INTERROGATORIES

29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

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

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

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

1 Name of Firm or Individual	2 Affiliation
Hensen Webb Group / RBC Wealth Management	U.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [X] No []

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
31194	Hensen Webb Group / RBC Wealth Management	549300LC02FLSSVFR64	SEC	0S.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total		0

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

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

GENERAL INTERROGATORIES

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	4,910,539	4,611,362	(299,177)
31.2 Preferred stocks	15,000	15,000	0
31.3 Totals	4,925,539	4,626,362	(299,177)

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

Broker Statement

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

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

33.2 If no, list exceptions:

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

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

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

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
 a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
 b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
 c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
 d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
 Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]

38.2 If the response to 38.1 is yes, on what schedule are they reported?

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
 39.21 Held directly Yes [] No []
 39.22 Immediately converted to U.S. dollars Yes [] No []

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 17,330

40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
NAMIC	6,103
Demotech	7,000

41.1 Amount of payments for legal expenses, if any? \$

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid

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

42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]

1.2 If yes, indicate premium earned on U. S. business only. \$ _____

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ _____
 1.31 Reason for excluding

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$ _____

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. \$ _____ 0

1.6 Individual policies:

	Most current three years:	
1.61 Total premium earned	\$	0
1.62 Total incurred claims	\$	0
1.63 Number of covered lives		0
	All years prior to most current three years	
1.64 Total premium earned	\$	0
1.65 Total incurred claims	\$	0
1.66 Number of covered lives		0

1.7 Group policies:

	Most current three years:	
1.71 Total premium earned	\$	0
1.72 Total incurred claims	\$	0
1.73 Number of covered lives		0
	All years prior to most current three years	
1.74 Total premium earned	\$	0
1.75 Total incurred claims	\$	0
1.76 Number of covered lives		0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator		
2.2 Premium Denominator	1,097,319	1,105,716
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator		0
2.5 Reserve Denominator	757,931	734,702
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

3.1 Did the reporting entity issue participating policies during the calendar year? Yes [] No [X]

3.2 If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year:

3.21 Participating policies	\$	
3.22 Non-participating policies	\$	

4. For mutual reporting Entities and Reciprocal Exchanges Only:

4.1 Does the reporting entity issue assessable policies? Yes [] No [X]

4.2 Does the reporting entity issue non-assessable policies? Yes [X] No []

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? % _____

4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$ _____

5. For Reciprocal Exchanges Only:

5.1 Does the Exchange appoint local agents? Yes [] No []

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation.....	Yes [] No [] N/A []	
5.22 As a direct expense of the exchange.....	Yes [] No [] N/A []	

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No []

5.5 If yes, give full information

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
The company does not write workers' compensation policies.
- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.
The company carries open ended reinsurance coverage for aggregate losses, thus a measurement system is not necessary.
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
Open end reinsurance provides coverage for all losses of this type.
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [] No [X]
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.
Open end reinsurance provides coverage for all losses of this type.
- 7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes [] No [X]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions:
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No []
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]
- 8.2 If yes, give full information
.....
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [] No [X]
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or, Yes [] No [X]
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [] No [X]
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [] No [X]
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]
- 11.2 If yes, give full information
.....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- 12.11 Unpaid losses \$
- 12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$
- 12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral and other funds \$
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A [X]
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- 12.41 From %
- 12.42 To..... %
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]
- 12.6 If yes, state the amount thereof at December 31 of the current year:
- 12.61 Letters of credit \$
- 12.62 Collateral and other funds..... \$
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 200,000
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [X] No []
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 1
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
.....
- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No []
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []
- 14.5 If the answer to 14.4 is no, please explain:
.....
- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]
- 15.2 If yes, give full information
.....
- 16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home
16.12 Products
16.13 Automobile
16.14 Other*

* Disclose type of coverage:
.....

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No []

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance	\$
17.12 Unfunded portion of Interrogatory 17.11	\$
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11.....	\$
17.14 Case reserves portion of Interrogatory 17.11	\$
17.15 Incurred but not reported portion of Interrogatory 17.11	\$
17.16 Unearned premium portion of Interrogatory 17.11	\$
17.17 Contingent commission portion of Interrogatory 17.11	\$

18.1 Do you act as a custodian for health savings accounts? Yes [] No []

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

18.3 Do you act as an administrator for health savings accounts? Yes [] No []

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

19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No []

19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

FIVE-YEAR HISTORICAL DATA

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

	1 2022	2 2021	3 2020	4 2019	5 2018
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0		
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0		
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,581,790	1,559,135	1,595,998		
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0		
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0		
6. Total (Line 35)	1,581,790	1,559,135	1,595,998	0	0
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0		
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0		
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,116,800	1,094,098	1,130,908		
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0		
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0		
12. Total (Line 35)	1,116,800	1,094,098	1,130,908	0	0
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	(249,693)	(230,343)	(311,878)		
14. Net investment gain (loss) (Line 11)	262,201	317,949	220,591		
15. Total other income (Line 15)	29,846	24,663	62,383		
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)		(37,500)	3,844		
18. Net income (Line 20)	42,354	149,769	(32,748)	0	0
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	8,428,773	9,107,491	8,988,021		
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	14,165	18,299	21,160		
20.2 Deferred and not yet due (Line 15.2)	157,537	138,190	146,514		
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0		
21. Total liabilities excluding protected cell business (Page 3, Line 26)	886,797	993,925	1,085,827		
22. Losses (Page 3, Line 1)	60,033	57,467	151,418		
23. Loss adjustment expenses (Page 3, Line 3)	3,307	2,125	2,196		
24. Unearned premiums (Page 3, Line 9)	694,591	675,110	686,728		
25. Capital paid up (Page 3, Lines 30 & 31)	0	0	0		
26. Surplus as regards policyholders (Page 3, Line 37)	7,541,976	8,113,566	7,902,194		
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(50,474)	(66,010)	11,279		
Risk-Based Capital Analysis					
28. Total adjusted capital	7,541,705	8,113,566			
29. Authorized control level risk-based capital					
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	60.0	55.8	51.8		
31. Stocks (Lines 2.1 & 2.2)	31.2	39.7	41.8		
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0		
33. Real estate (Lines 4.1, 4.2 & 4.3)	3.0	2.9	3.1		
34. Cash, cash equivalents and short-term investments (Line 5)	5.7	1.7	3.3		
35. Contract loans (Line 6)	0.0	0.0	0.0		
36. Derivatives (Line 7)	0.0	0.0	0.0		
37. Other invested assets (Line 8)	0.0	0.0	0.0		
38. Receivables for securities (Line 9)	0.0	0.0	0.0		
39. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0		
40. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0		
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)	0				
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)	0	0	0		
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	0	0	0		
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)		0	0		
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47	0	0	0	0	0
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0	0.0	0.0		

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2022	2 2021	3 2020	4 2019	5 2018
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	(632,807)	61,920	114,386		
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	(571,590)	211,372	24,568		
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0		
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0		
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	675,229	995,763	1,038,135		
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0		
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0		
59. Total (Line 35)	675,229	995,763	1,038,135	0	0
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0		
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0		
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	645,188	801,113	726,911		
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0		
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0		
65. Total (Line 35)	645,188	801,113	726,911	0	0
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	59.0	64.0	72.8		
68. Loss expenses incurred (Line 3)	7.5	6.7	6.2		
69. Other underwriting expenses incurred (Line 4)	56.3	50.2	48.2		
70. Net underwriting gain (loss) (Line 8)	(22.8)	(20.8)	(27.2)		
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	52.6	48.4	43.4		
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	66.5	70.7	79.0		
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	14.8	13.5	14.3		
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	(19)	(21)	0		
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0).....	(0.2)	(0.3)	0.0		
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(21)	0	0		
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(0.3)	0.0	0.0		

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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2022

NAIC Company Code 11387

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., and a 'DETAILS OF WRITE-INS' section at the bottom.

19.WI

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0000

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2022

NAIC Company Code 11387

Table with 12 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 and a DETAILS OF WRITE-INS section.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 GT

Schedule F - Part 1 - Assumed Reinsurance

N O N E

Schedule F - Part 2 - Premium Portfolio Reinsurance Effected or (Canceled)

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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			
0499999		Total Authorized - Affiliates - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	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
0899999		Total Authorized - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42-0245990	14117	Grinnell Mutual Reinsurance Company	IA		422			601				83		684		27		657		
05-0316605	21482	Factory Mutual Insurance Company	RI		43							21		21				21		
0999999		Total Authorized - Other U.S. Unaffiliated Insurers			465	0	0	601	0	0	0	104	0	705	0	27	0	678	0	
1499999		Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			465	0	0	601	0	0	0	104	0	705	0	27	0	678	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)			465	0	0	601	0	0	0	104	0	705	0	27	0	678	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			465	0	0	601	0	0	0	104	0	705	0	27	0	678	0	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	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	0	0	0	0	0	0	0	0	0	XXX	0	0
42-0245990 .. Grinnell Mutual Reinsurance Company						27	657	0	684	821	27	794	0	794	1	0	13
05-0316605 .. Factory Mutual Insurance Company						0	21	0	21	25	0	25	0	25	1	0	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	27	678	0	705	846	27	819	0	819	XXX	0	13
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	XXX	0	27	678	0	705	846	27	819	0	819	XXX	0	13
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	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	0	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	0	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	27	678	0	705	846	27	819	0	819	XXX	0	13
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals		0	0	XXX	0	27	678	0	705	846	27	819	0	819	XXX	0	13

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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	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		42 Total Overdue Cols. 38+39 +40+41										
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	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	XXX	0	
0899999. Total Authorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
42-0245990 ... Grinnell Mutual Reinsurance Company																	YES	0
05-0316605 ... Factory Mutual Insurance Company																	YES	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		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	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	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	XXX	0	
2299999. Total Unauthorized - Affiliates		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	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	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	XXX	0	
3699999. Total Certified - Affiliates		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	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	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	XXX	0	
5099999. Total Reciprocal Jurisdiction - Affiliates		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	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	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	XXX	0	
9999999 Totals		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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		
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX	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	XXX	XXX	
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245890 .. Grinnell Mutual Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605 .. Factory Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	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	XXX	XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	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	XXX	XXX	
2299999. Total Unauthorized - Affiliates		XXX	XXX	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	XXX	XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	
3699999. Total Certified - Affiliates		XXX	0	0	0	0	XXX	XXX	0	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	0	XXX	XXX	0	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	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	XXX	XXX	
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	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	XXX	XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	
9999999 Totals		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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)	74 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 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)
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
42-0245990	Grinnell Mutual Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
05-0316605	Factory Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	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 2022 OF THE Forward Mutual Insurance Company

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 2022 OF THE Forward Mutual Insurance Company

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.	Grinnell Mutual Reinsurance Company	21.000	167
2.	Factory Mutual Insurance Company	35.000	43
3.	.....	
4.	.....	
5.	.....	

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.	Grinnell Mutual Reinsurance Company	684	420	Yes [] No [X]
7.	Factory Mutual Insurance Company	21	43	Yes [] No [X]
8.	.....			Yes [] No []
9.	.....			Yes [] No []
10.	.....			Yes [] No []

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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)	8,179,043		8,179,043
2. Premiums and considerations (Line 15)	171,702		171,702
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	0		0
4. Funds held by or deposited with reinsured companies (Line 16.2)	0		0
5. Other assets	78,028		78,028
6. Net amount recoverable from reinsurers			0
7. Protected cell assets (Line 27)	0	704,070	704,070
8. Totals (Line 28)	8,428,773	704,070	9,132,843
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	63,340	600,561	663,901
10. Taxes, expenses, and other obligations (Lines 4 through 8)	59,683		59,683
11. Unearned premiums (Line 9)	694,591	103,509	798,100
12. Advance premiums (Line 10)	42,117		42,117
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	27,066		27,066
15. Funds held by company under reinsurance treaties (Line 13)	0		0
16. Amounts withheld or retained by company for account of others (Line 14)			0
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	0		0
19. Total liabilities excluding protected cell business (Line 26)	886,797	704,070	1,590,867
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	7,541,976	XXX	7,541,976
22. Totals (Line 38)	8,428,773	704,070	9,132,843

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

If yes, give full explanation:

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

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						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. 2013.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2019.....	0	0	0	20	20	0	0	0	0	0	0	XXX
9. 2020.....	1,611	465	1,146	1,159	302	0	0	72	0	3	929	XXX
10. 2021.....	1,570	465	1,105	911	207	0	0	74	0	71	778	XXX
11. 2022	1,563	465	1,098	618	6	0	0	82	0	0	694	XXX
12. Totals	XXX	XXX	XXX	2,708	535	0	0	228	0	74	2,401	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		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	0	0	0	0	0	0	0	0	0	0	XXX
2. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2021.....	314	309	0	0	0	0	0	0	0	0	0	5	XXX
11. 2022	327	292	20	0	0	0	0	0	3	0	0	58	XXX
12. Totals	641	601	20	0	0	0	0	0	3	0	0	63	XXX

	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. 2013.....	0	0	0	0.0	0.0	0.0	0	0		0	0
3. 2014.....	0	0	0	0.0	0.0	0.0	0	0		0	0
4. 2015.....	0	0	0	0.0	0.0	0.0	0	0		0	0
5. 2016.....	0	0	0	0.0	0.0	0.0	0	0		0	0
6. 2017.....	0	0	0	0.0	0.0	0.0	0	0		0	0
7. 2018.....	0	0	0	0.0	0.0	0.0	0	0		0	0
8. 2019.....	20	20	0	0.0	0.0	0.0	0	0		0	0
9. 2020.....	1,231	302	929	76.4	64.9	81.1	0	0		0	0
10. 2021.....	1,299	516	783	82.7	111.0	70.9	0	0		5	0
11. 2022	1,050	298	752	67.2	64.1	68.5	0	0		55	3
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	60	3

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013.....									0	0	0	0
3. 2014.....	XXX								0	0	0	0
4. 2015.....	XXX	XXX							0	0	0	0
5. 2016.....	XXX	XXX	XXX						0	0	0	0
6. 2017.....	XXX	XXX	XXX	XXX					0	0	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX				0	0	0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0	0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	878	857	857	0	(21)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	728	709	(19)	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	667	XXX	XXX
12. Totals											(19)	(21)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	Claims Closed With Loss Payment	Claims Closed Without Loss Payment
1. Prior.....	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2013.....									0	0	XXX	XXX
3. 2014.....	XXX								0	0	XXX	XXX
4. 2015.....	XXX	XXX							0	0	XXX	XXX
5. 2016.....	XXX	XXX	XXX						0	0	XXX	XXX
6. 2017.....	XXX	XXX	XXX	XXX					0	0	XXX	XXX
7. 2018.....	XXX	XXX	XXX	XXX	XXX				0	0	XXX	XXX
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX			0	0	XXX	XXX
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	727	857	857	XXX	XXX
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	671	704	XXX	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	612	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2013.....									0	0
3. 2014.....	XXX								0	0
4. 2015.....	XXX	XXX							0	0
5. 2016.....	XXX	XXX	XXX						0	0
6. 2017.....	XXX	XXX	XXX	XXX					0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX				0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX			0	0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	0	0
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	0
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
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. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2019.....	0	0	0	20	20	0	0	0	0	0	0	1
9. 2020.....	1,571	425	1,146	1,147	290	0	0	72	0	3	929	47
10. 2021.....	1,527	419	1,108	911	207	0	0	74	0	71	778	41
11. 2022.....	1,522	422	1,100	612	0	0	0	82	0	0	694	70
12. Totals	XXX	XXX	XXX	2,690	517	0	0	228	0	74	2,401	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. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2021.....	314	309	0	0	0	0	0	0	0	0	0	5	3
11. 2022.....	327	292	20	0	0	0	0	0	3	0	0	58	7
12. Totals	641	601	20	0	0	0	0	0	3	0	0	63	10

	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. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2019.....	20	20	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2020.....	1,219	290	929	77.6	68.2	81.1	0	0	0.0	0	0
10. 2021.....	1,299	516	783	85.1	123.2	70.7	0	0	0.0	5	0
11. 2022.....	1,044	292	752	68.6	69.2	68.4	0	0	0.0	55	3
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	60	3

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)
(\$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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	Direct and Assumed	Ceded	Net (1 - 2)	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. 2013	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2015	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2016	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2017	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2018	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2019	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2020	40	40	0	12	12	0	0	0	0	0	0	XXX
10. 2021	43	46	(3)	0	0	0	0	0	0	0	0	XXX
11. 2022	41	43	(2)	6	6	0	0	0	0	0	0	XXX
12. Totals	XXX	XXX	XXX	18	18	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						
	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. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2022	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	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. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2020	12	12	0	30.0	30.0	0.0	0	0	0.0	0	0
10. 2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2022	6	6	0	14.6	14.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

NONE

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)

NONE

Schedule P - Part 1J - Auto Physical Damage

NONE

Schedule P - Part 1K - Fidelity/Surety

NONE

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

NONE

Schedule P - Part 1M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 1T - Warranty

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	878	857	857	0	(21)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	728	709	(19)	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	667	XXX	XXX
12. Totals											(19)	(21)

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013.....										0	0	0
3. 2014.....	XXX									0	0	0
4. 2015.....	XXX	XXX								0	0	0
5. 2016.....	XXX	XXX	XXX							0	0	0
6. 2017.....	XXX	XXX	XXX	XXX						0	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX					0	0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX				0	0	0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XXX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

Schedule P - Part 2I - Special Property

NONE

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 2022 OF THE Forward Mutual Insurance Company

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			
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022			
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2013.....										0.....	0.....	0.....	0.....
3. 2014.....	XXX.....									0.....	0.....	0.....	0.....
4. 2015.....	XXX.....	XXX.....								0.....	0.....	0.....	0.....
5. 2016.....	XXX.....	XXX.....	XXX.....							0.....	0.....	0.....	0.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....						0.....	0.....	0.....	0.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					0.....	0.....	0.....	0.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			0.....	0.....	0.....	1.....	0.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	727.....	857.....	857.....	38.....	9.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	671.....	704.....	38.....	0.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	612.....	62.....	1.....

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

1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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			
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022			
1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2022.....	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. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2022.....	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.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
2. 2013.....												0.....	XXX.....
3. 2014.....	XXX.....											0.....	XXX.....
4. 2015.....	XXX.....	XXX.....										0.....	XXX.....
5. 2016.....	XXX.....	XXX.....	XXX.....									0.....	XXX.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....								0.....	XXX.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							0.....	XXX.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						0.....	XXX.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					0.....	XXX.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				0.....	XXX.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			0.....	XXX.....

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

1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....												
2. 2013.....													
3. 2014.....	XXX.....												
4. 2015.....	XXX.....	XXX.....											
5. 2016.....	XXX.....	XXX.....	XXX.....										
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

Schedule P - Part 3I - Special Property

NONE

Schedule P - Part 3J - Auto Physical Damage

NONE

Schedule P - Part 3K - Fidelity/Surety

NONE

Schedule P - Part 3L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 3M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 3T - Warranty

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2013.....										
3. 2014.....	.XXX									
4. 2015.....	.XXX	.XXX								
5. 2016.....	.XXX	.XXX	.XXX							
6. 2017.....	.XXX	.XXX	.XXX	.XXX						
7. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	20		
10. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	20	
11. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	20

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....										
2. 2013.....										
3. 2014.....	.XXX									
4. 2015.....	.XXX	.XXX								
5. 2016.....	.XXX	.XXX	.XXX							
6. 2017.....	.XXX	.XXX	.XXX	.XXX						
7. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....										
2. 2013.....										
3. 2014.....	.XXX									
4. 2015.....	.XXX	.XXX								
5. 2016.....	.XXX	.XXX	.XXX							
6. 2017.....	.XXX	.XXX	.XXX	.XXX						
7. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....										
2. 2013.....										
3. 2014.....	.XXX									
4. 2015.....	.XXX	.XXX								
5. 2016.....	.XXX	.XXX	.XXX							
6. 2017.....	.XXX	.XXX	.XXX	.XXX						
7. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....										
2. 2013.....										
3. 2014.....	.XXX									
4. 2015.....	.XXX	.XXX								
5. 2016.....	.XXX	.XXX	.XXX							
6. 2017.....	.XXX	.XXX	.XXX	.XXX						
7. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2019.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2020.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....										
2. 2013.....										
3. 2014.....	XXX									
4. 2015.....	XXX	XXX								
5. 2016.....	XXX	XXX	XX							
6. 2017.....	XXX	XXX	XX	XX						
7. 2018.....	XXX	XXX	XX	XXX	XX					
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX									
4. 2015.....	XXX	XXX								
5. 2016.....	XXX	XXX	XXX							
6. 2017.....	XXX	XXX	XX	XX						
7. 2018.....	XXX	XXX	XX	XX	XX					
8. 2019.....	XXX	XXX	XX	XX	XX	XX				
9. 2020.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2013.....										0
3. 2014.....	XXX									0
4. 2015.....	XXX	XXX								0
5. 2016.....	XXX	XXX	XXX							0
6. 2017.....	XXX	XXX	XXX	XXX						0
7. 2018.....	XXX	XXX	XXX	XXX	XXX					0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX				0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX									
4. 2015.....	XXX	XXX								
5. 2016.....	XXX	XXX	XXX							
6. 2017.....	XXX	XXX	XX	XX						
7. 2018.....	XXX	XXX	XX	XX	XX					
8. 2019.....	XXX	XXX	XX	XX	XX	XX				
9. 2020.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX									
4. 2015.....	XXX	XXX								
5. 2016.....	XXX	XXX	XXX							
6. 2017.....	XXX	XXX	XX	XX						
7. 2018.....	XXX	XXX	XX	XX	XX					
8. 2019.....	XXX	XXX	XX	XX	XX	XX				
9. 2020.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

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
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2013.....									0	0
3. 2014.....	XXX								0	0
4. 2015.....	XXX	XXX							0	0
5. 2016.....	XXX	XXX	XXX						0	0
6. 2017.....	XXX	XXX	XXX	XXX					0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX				0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX		1	1	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30	38	38
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	38
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62

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
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2013.....										
3. 2014.....	XXX									
4. 2015.....	XXX	XXX								
5. 2016.....	XXX	XXX	XXX							
6. 2017.....	XXX	XXX	XXX	XXX						
7. 2018.....	XXX	XXX	XXX	XXX	XXX					
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX		1		
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5		
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	3
11. 2022.....	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
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2013.....									0	0
3. 2014.....	XXX								0	0
4. 2015.....	XXX	XXX							0	0
5. 2016.....	XXX	XXX	XXX						0	0
6. 2017.....	XXX	XXX	XXX	XXX					0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX				0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX		2	1	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	47	47
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	41
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

N O N E

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

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

N O N E

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

N O N E

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

N O N E

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

N O N E

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

NONE

Schedule P - Part 6M - International - Section 1

NONE

Schedule P - Part 6M - International - Section 2

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B

NONE

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 2022 OF THE Forward Mutual Insurance Company

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)? \$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 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 [X]
- 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		
1.602 2013		
1.603 2014		
1.604 2015		
1.605 2016		
1.606 2017		
1.607 2018		
1.608 2019		
1.609 2020		
1.610 2021		
1.611 2022		
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 Fidelity
- 5.2 Surety
6. Claim count information is reported per claim or per claimant (Indicate which) per claim.....
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 [] No [X]
- 7.2 (An extended statement may be attached.)
.....

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	L	1,581,790	1,566,347	0	675,229	1,053,656	660,594	
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0
59. Totals	XXX		1,581,790	1,566,347	0	675,229	1,053,656	660,594	0
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX		0	0	0	0	0	0	0

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile..... 0
- 6. N - None of the above - Not allowed to write business in the state..... 56

(b) Explanation of basis of allocation of premiums by states, etc.
100% of premiums are allocated to the state of Wisconsin.

Schedule T - Part 2 - Interstate Compact

N O N E

Schedule Y - Part 1

NONE

Schedule Y - Part 1A - Detail of Insurance Holding Company System

NONE

Schedule Y - Part 1A - Explanations

NONE

Schedule Y - Part 2

NONE

Schedule Y - Part 3

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
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.

	<u>Responses</u>
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?	WAIVED
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	WAIVED
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?	WAIVED
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? ...	YES
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?	YES
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
APRIL FILING	
28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
29. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
33. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
34. 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
35. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
36. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING	
37. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO






















Explanations:

- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 18.
- 21.
- 22.
- 23.
- 24.
- 25.
- 26.
- 27.
- 28.
- 29.
- 30.
- 31.
- 32.
- 33.
- 34.
- 35.
- 36.
- 37.

Bar Codes:

3. Risk-based Capital Report [Document Identifier 390]	
4. Risk-based Capital Report [Document Identifier 390]	
8. Combined Statement [Document Identifier 201]	
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]	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 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] 
- 18. Medicare Part D Coverage Supplement [Document Identifier 365] 
- 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] 
- 28. Credit Insurance Experience Exhibit [Document Identifier 230] 
- 29. Long-Term Care Experience Reporting Forms [Document Identifier 306] 
- 30. Accident and Health Policy Experience Exhibit [Document Identifier 210] 
- 31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] 
- 32. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217] 
- 33. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550] 
- 34. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290] 
- 35. Private Flood Insurance Supplement [Document Identifier 560] 
- 36. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565] 
- 37. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223] 

OVERFLOW PAGE FOR WRITE-INS

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments	0	0.000			0	0.000
1.02 All other governments	0	0.000			0	0.000
1.03 U.S. states, territories and possessions, etc. guaranteed	2,935,846	35.895	2,935,846		2,935,846	35.895
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed	0	0.000			0	0.000
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed	1,974,693	24.143	1,974,693		1,974,693	24.143
1.06 Industrial and miscellaneous	0	0.000			0	0.000
1.07 Hybrid securities	0	0.000			0	0.000
1.08 Parent, subsidiaries and affiliates	0	0.000			0	0.000
1.09 SVO identified funds	0	0.000			0	0.000
1.10 Unaffiliated bank loans	0	0.000			0	0.000
1.11 Unaffiliated certificates of deposit	0	0.000			0	0.000
1.12 Total long-term bonds	4,910,539	60.038	4,910,539	0	4,910,539	60.038
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)	15,000	0.183	15,000		15,000	0.183
2.02 Parent, subsidiaries and affiliates	0	0.000			0	0.000
2.03 Total preferred stocks	15,000	0.183	15,000	0	15,000	0.183
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)	786,663	9.618	786,663		786,663	9.618
3.02 Industrial and miscellaneous Other (Unaffiliated)	775,503	9.482	775,503		775,503	9.482
3.03 Parent, subsidiaries and affiliates Publicly traded	0	0.000			0	0.000
3.04 Parent, subsidiaries and affiliates Other	0	0.000			0	0.000
3.05 Mutual funds	976,787	11.943	976,787		976,787	11.943
3.06 Unit investment trusts	0	0.000			0	0.000
3.07 Closed-end funds	0	0.000			0	0.000
3.08 Exchange traded funds	0	0.000			0	0.000
3.09 Total common stocks	2,538,953	31.042	2,538,953	0	2,538,953	31.042
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages	0	0.000			0	0.000
4.02 Residential mortgages	0	0.000			0	0.000
4.03 Commercial mortgages	0	0.000			0	0.000
4.04 Mezzanine real estate loans	0	0.000			0	0.000
4.05 Total valuation allowance	0	0.000			0	0.000
4.06 Total mortgage loans	0	0.000	0	0	0	0.000
5. Real estate (Schedule A):						
5.01 Properties occupied by company	244,532	2.990	244,532		244,532	2.990
5.02 Properties held for production of income	0	0.000	0		0	0.000
5.03 Properties held for sale	0	0.000	0		0	0.000
5.04 Total real estate	244,532	2.990	244,532	0	244,532	2.990
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	290,610	3.553	290,610		290,610	3.553
6.02 Cash equivalents (Schedule E, Part 2)	179,409	2.194	179,409		179,409	2.194
6.03 Short-term investments (Schedule DA)	0	0.000	0		0	0.000
6.04 Total cash, cash equivalents and short-term investments	470,019	5.747	470,019	0	470,019	5.747
7. Contract loans	0	0.000	0		0	0.000
8. Derivatives (Schedule DB)	0	0.000	0		0	0.000
9. Other invested assets (Schedule BA)	0	0.000	0		0	0.000
10. Receivables for securities	0	0.000	0		0	0.000
11. Securities Lending (Schedule DL, Part 1).....	0	0.000	0	XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)	0	0.000	0		0	0.000
13. Total invested assets	8,179,043	100.000	8,179,043	0	8,179,043	100.000

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year	257,083
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 6)	
	2.2 Additional investment made after acquisition (Part 2, Column 9)	0
3.	Current year change in encumbrances:	
	3.1 Totals, Part 1, Column 13	0
	3.2 Totals, Part 3, Column 11	0
4.	Total gain (loss) on disposals, Part 3, Column 18	
5.	Deduct amounts received on disposals, Part 3, Column 15	
6.	Total foreign exchange change in book/adjusted carrying value:	
	6.1 Totals, Part 1, Column 15	0
	6.2 Totals, Part 3, Column 13	0
7.	Deduct current year's other than temporary impairment recognized:	
	7.1 Totals, Part 1, Column 12	0
	7.2 Totals, Part 3, Column 10	0
8.	Deduct current year's depreciation:	
	8.1 Totals, Part 1, Column 11	12,551
	8.2 Totals, Part 3, Column 9	12,551
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	244,532
10.	Deduct total nonadmitted amounts	0
11.	Statement value at end of current period (Line 9 minus Line 10)	244,532

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 7)	
	2.2 Additional investment made after acquisition (Part 2, Column 8)	
3.	Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 12	
	3.2 Totals, Part 3, Column 11	
4.	Accrual of discount	
5.	Unrealized valuation increase (decrease):	
	5.1 Totals, Part 1, Column 9	
	5.2 Totals, Part 3, Column 8	
6.	Total gain (loss) on disposals, Part 3, Column 18	
7.	Deduct amounts received on disposals, Part 3, Column 15	
8.	Deduct amortization of premium and mortgage interest points and commitment fees	
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest:	
	9.1 Totals, Part 1, Column 13	
	9.2 Totals, Part 3, Column 13	
10.	Deduct current year's other than temporary impairment recognized:	
	10.1 Totals, Part 1, Column 11	
	10.2 Totals, Part 3, Column 10	
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Total valuation allowance	
13.	Subtotal (Line 11 plus 12)	
14.	Deduct total nonadmitted amounts	
15.	Statement value of mortgages owned at end of current period (Line 13 minus Line 14)	

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
2.1	Actual cost at time of acquisition (Part 2, Column 8)	
2.2	Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
3.1	Totals, Part 1, Column 16	
3.2	Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase (decrease):	
5.1	Totals, Part 1, Column 13	
5.2	Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 16	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
9.1	Totals, Part 1, Column 17	
9.2	Totals, Part 3, Column 14	
10.	Deduct current year's other than temporary impairment recognized:	
10.1	Totals, Part 1, Column 15	
10.2	Totals, Part 3, Column 11	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	8,462,406
2.	Cost of bonds and stocks acquired, Part 3, Column 7	601,266
3.	Accrual of discount	1,109
4.	Unrealized valuation increase (decrease):	
4.1.	Part 1, Column 12	0
4.2.	Part 2, Section 1, Column 15	0
4.3.	Part 2, Section 2, Column 13	(513,773)
4.4.	Part 4, Column 11	(236,036) (749,809)
5.	Total gain (loss) on disposals, Part 4, Column 19	132,071
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	968,813
7.	Deduct amortization of premium	13,738
8.	Total foreign exchange change in book/adjusted carrying value:	
8.1.	Part 1, Column 15	0
8.2.	Part 2, Section 1, Column 19	0
8.3.	Part 2, Section 2, Column 16	0
8.4.	Part 4, Column 15	0 0
9.	Deduct current year's other than temporary impairment recognized:	
9.1.	Part 1, Column 14	0
9.2.	Part 2, Section 1, Column 17	0
9.3.	Part 2, Section 2, Column 14	0
9.4.	Part 4, Column 13	0 0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	7,464,492
12.	Deduct total nonadmitted amounts	0
13.	Statement value at end of current period (Line 11 minus Line 12)	7,464,492

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States	0	0	0	0
	2. Canada				
	3. Other Countries				
	4. Totals	0	0	0	0
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals	2,935,846	2,776,003	2,951,348	2,905,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals	0	0	0	0
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	1,974,693	1,835,367	2,007,679	1,935,000
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans, Unaffiliated Certificates of Deposit and Hybrid Securities (unaffiliated)	8. United States				
	9. Canada				
	10. Other Countries				
	11. Totals	0	0	0	0
Parent, Subsidiaries and Affiliates	12. Totals	0	0	0	0
	13. Total Bonds	4,910,539	4,611,370	4,959,027	4,840,000
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States	15,000	15,000	15,000	
	15. Canada				
	16. Other Countries				
	17. Totals	15,000	15,000	15,000	
Parent, Subsidiaries and Affiliates	18. Totals	0	0	0	
	19. Total Preferred Stocks	15,000	15,000	15,000	
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	20. United States	2,538,953	2,538,953	1,709,805	
	21. Canada				
	22. Other Countries				
	23. Totals	2,538,953	2,538,953	1,709,805	
Parent, Subsidiaries and Affiliates	24. Totals	0	0	0	
	25. Total Common Stocks	2,538,953	2,538,953	1,709,805	
	26. Total Stocks	2,553,953	2,553,953	1,724,805	
	27. Total Bonds and Stocks	7,464,492	7,165,323	6,683,832	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1						XXX	0	0.0	0	0.0		0
1.2 NAIC 2						XXX	0	0.0	0	0.0		0
1.3 NAIC 3						XXX	0	0.0	0	0.0		0
1.4 NAIC 4						XXX	0	0.0	0	0.0		0
1.5 NAIC 5						XXX	0	0.0	0	0.0		0
1.6 NAIC 6						XXX	0	0.0	0	0.0		0
1.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2. All Other Governments												
2.1 NAIC 1						XXX	0	0.0	0	0.0		0
2.2 NAIC 2						XXX	0	0.0	0	0.0		0
2.3 NAIC 3						XXX	0	0.0	0	0.0		0
2.4 NAIC 4						XXX	0	0.0	0	0.0		0
2.5 NAIC 5						XXX	0	0.0	0	0.0		0
2.6 NAIC 6						XXX	0	0.0	0	0.0		0
2.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1		200,209	1,647,157	1,088,480		XXX	2,935,846	59.8	2,899,541	58.6	2,935,846	0
3.2 NAIC 2						XXX	0	0.0	0	0.0		0
3.3 NAIC 3						XXX	0	0.0	0	0.0		0
3.4 NAIC 4						XXX	0	0.0	0	0.0		0
3.5 NAIC 5						XXX	0	0.0	0	0.0		0
3.6 NAIC 6						XXX	0	0.0	0	0.0		0
3.7 Totals	0	200,209	1,647,157	1,088,480	0	XXX	2,935,846	59.8	2,899,541	58.6	2,935,846	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1						XXX	0	0.0	0	0.0		0
4.2 NAIC 2						XXX	0	0.0	0	0.0		0
4.3 NAIC 3						XXX	0	0.0	0	0.0		0
4.4 NAIC 4						XXX	0	0.0	0	0.0		0
4.5 NAIC 5						XXX	0	0.0	0	0.0		0
4.6 NAIC 6						XXX	0	0.0	0	0.0		0
4.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1	100,403	415,520	876,340	582,430		XXX	1,974,693	40.2	2,046,619	41.4	1,974,693	0
5.2 NAIC 2						XXX	0	0.0	0	0.0		0
5.3 NAIC 3						XXX	0	0.0	0	0.0		0
5.4 NAIC 4						XXX	0	0.0	0	0.0		0
5.5 NAIC 5						XXX	0	0.0	0	0.0		0
5.6 NAIC 6						XXX	0	0.0	0	0.0		0
5.7 Totals	100,403	415,520	876,340	582,430	0	XXX	1,974,693	40.2	2,046,619	41.4	1,974,693	0

S105

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1						XXX	0	0.0	0	0.0		0
6.2 NAIC 2						XXX	0	0.0	0	0.0		0
6.3 NAIC 3						XXX	0	0.0	0	0.0		0
6.4 NAIC 4						XXX	0	0.0	0	0.0		0
6.5 NAIC 5						XXX	0	0.0	0	0.0		0
6.6 NAIC 6						XXX	0	0.0	0	0.0		0
6.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7. Hybrid Securities												
7.1 NAIC 1						XXX	0	0.0	0	0.0		0
7.2 NAIC 2						XXX	0	0.0	0	0.0		0
7.3 NAIC 3						XXX	0	0.0	0	0.0		0
7.4 NAIC 4						XXX	0	0.0	0	0.0		0
7.5 NAIC 5						XXX	0	0.0	0	0.0		0
7.6 NAIC 6						XXX	0	0.0	0	0.0		0
7.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1						XXX	0	0.0	0	0.0		0
8.2 NAIC 2						XXX	0	0.0	0	0.0		0
8.3 NAIC 3						XXX	0	0.0	0	0.0		0
8.4 NAIC 4						XXX	0	0.0	0	0.0		0
8.5 NAIC 5						XXX	0	0.0	0	0.0		0
8.6 NAIC 6						XXX	0	0.0	0	0.0		0
8.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
10. Unaffiliated Bank Loans												
10.1 NAIC 1						XXX	0	0.0	0	0.0		0
10.2 NAIC 2						XXX	0	0.0	0	0.0		0
10.3 NAIC 3						XXX	0	0.0	0	0.0		0
10.4 NAIC 4						XXX	0	0.0	0	0.0		0
10.5 NAIC 5						XXX	0	0.0	0	0.0		0
10.6 NAIC 6						XXX	0	0.0	0	0.0		0
10.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11. Unaffiliated Certificates of Deposit												
11.1 NAIC 1						XXX	0	0.0	XXX	XXX		0
11.2 NAIC 2						XXX	0	0.0	XXX	XXX		0
11.3 NAIC 3						XXX	0	0.0	XXX	XXX		0
11.4 NAIC 4						XXX	0	0.0	XXX	XXX		0
11.5 NAIC 5						XXX	0	0.0	XXX	XXX		0
11.6 NAIC 6						XXX	0	0.0	XXX	XXX		0
11.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

9015

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												
12.1 NAIC 1	100,403	615,729	2,523,497	1,670,910	0	0	4,910,539	100.0	XXX	XXX	4,910,539	0
12.2 NAIC 2	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
12.3 NAIC 3	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
12.4 NAIC 4	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
12.5 NAIC 5	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
12.6 NAIC 6	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
12.7 Totals	100,403	615,729	2,523,497	1,670,910	0	0	(b) 4,910,539	100.0	XXX	XXX	4,910,539	0
12.8 Line 12.7 as a % of Col. 7	2.0	12.5	51.4	34.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
13. Total Bonds Prior Year												
13.1 NAIC 1	65,408	468,180	2,277,164	2,135,408	0	0	XXX	XXX	4,946,160	100.0	4,946,160	0
13.2 NAIC 2	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
13.3 NAIC 3	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
13.4 NAIC 4	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
13.5 NAIC 5	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
13.6 NAIC 6	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
13.7 Totals	65,408	468,180	2,277,164	2,135,408	0	0	XXX	XXX	(b) 4,946,160	100.0	4,946,160	0
13.8 Line 13.7 as a % of Col. 9	1.3	9.5	46.0	43.2	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
14. Total Publicly Traded Bonds												
14.1 NAIC 1	100,403	615,729	2,523,497	1,670,910	0	0	4,910,539	100.0	4,946,160	100.0	4,910,539	XXX
14.2 NAIC 2	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
14.3 NAIC 3	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
14.4 NAIC 4	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
14.5 NAIC 5	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
14.6 NAIC 6	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
14.7 Totals	100,403	615,729	2,523,497	1,670,910	0	0	4,910,539	100.0	4,946,160	100.0	4,910,539	XXX
14.8 Line 14.7 as a % of Col. 7	2.0	12.5	51.4	34.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14.9 Line 14.7 as a % of Line 12.7, Col. 7, Section 12	2.0	12.5	51.4	34.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.1 NAIC 1	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.2 NAIC 2	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.3 NAIC 3	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.4 NAIC 4	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.5 NAIC 5	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.6 NAIC 6	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.7 Totals	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.8 Line 15.7 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
15.9 Line 15.7 as a % of Line 12.7, Col. 7, Section 12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(a) Includes \$ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
 (b) Includes \$ current year of bonds with Z designations and \$ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.
 (c) Includes \$ current year, \$ prior year of bonds with 5GI designations and \$ current year, \$ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
 (d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$; NAIC 2 \$; NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

S107

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations						XXX	0	0.0	0	0.0		0
1.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
1.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
1.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
1.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2. All Other Governments												
2.01 Issuer Obligations						XXX	0	0.0	0	0.0		0
2.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
2.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
2.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
2.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations		200,209	1,647,157	1,088,480		XXX	2,935,846	59.8	2,899,541	58.6	2,935,846	0
3.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
3.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
3.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
3.05 Totals	0	200,209	1,647,157	1,088,480	0	XXX	2,935,846	59.8	2,899,541	58.6	2,935,846	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations						XXX	0	0.0	0	0.0		0
4.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
4.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
4.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
4.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations	100,403	415,520	876,340	582,430		XXX	1,974,693	40.2	2,046,619	41.4	1,974,693	0
5.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
5.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
5.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
5.05 Totals	100,403	415,520	876,340	582,430	0	XXX	1,974,693	40.2	2,046,619	41.4	1,974,693	0
6. Industrial and Miscellaneous												
6.01 Issuer Obligations						XXX	0	0.0	0	0.0		0
6.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
6.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
6.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
6.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7. Hybrid Securities												
7.01 Issuer Obligations						XXX	0	0.0	0	0.0		0
7.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
7.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
7.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
7.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX	0	0.0	0	0.0		0
8.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
8.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0		0
8.04 Other Loan-Backed and Structured Securities ...						XXX	0	0.0	0	0.0		0
8.05 Affiliated Bank Loans - Issued						XXX	0	0.0	0	0.0		0
8.06 Affiliated Bank Loans - Acquired						XXX	0	0.0	0	0.0		0
8.07 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX	0	0.0	0	0.0		0
10.02 Unaffiliated Bank Loans - Acquired						XXX	0	0.0	0	0.0		0
10.03 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11. Unaffiliated Certificates of Deposit												
11.01 Totals						XXX	0	0.0	XXX	XXX		0
12. Total Bonds Current Year												
12.01 Issuer Obligations	100,403	615,729	2,523,497	1,670,910	0	XXX	4,910,539	100.0	XXX	XXX	4,910,539	0
12.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
12.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.08 Unaffiliated Certificates of Deposit	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.09 Totals	100,403	615,729	2,523,497	1,670,910	0	0	4,910,539	100.0	XXX	XXX	4,910,539	0
12.10 Line 12.09 as a % of Col. 7	2.0	12.5	51.4	34.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
13. Total Bonds Prior Year												
13.01 Issuer Obligations	65,408	468,180	2,277,164	2,135,408	0	XXX	XXX	XXX	4,946,160	100.0	4,946,160	0
13.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0	0.0	0	0
13.06 Affiliated Bank Loans	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.08 Unaffiliated Certificates of Deposit	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13.09 Totals	65,408	468,180	2,277,164	2,135,408	0	0	XXX	XXX	4,946,160	100.0	4,946,160	0
13.10 Line 13.09 as a % of Col. 9	1.3	9.5	46.0	43.2	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations	100,403	615,729	2,523,497	1,670,910	0	XXX	4,910,539	100.0	4,946,160	100.0	4,910,539	XXX
14.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	XXX
14.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.08 Unaffiliated Certificates of Deposit	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	XXX
14.09 Totals	100,403	615,729	2,523,497	1,670,910	0	0	4,910,539	100.0	4,946,160	100.0	4,910,539	XXX
14.10 Line 14.09 as a % of Col. 7	2.0	12.5	51.4	34.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14.11 Line 14.09 as a % of Line 12.09, Col. 7, Section 12	2.0	12.5	51.4	34.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	XXX	0
15.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.08 Unaffiliated Certificates of Deposit	0	0	0	0	0	XXX	0	0.0	XXX	XXX	XXX	0
15.09 Totals	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.10 Line 15.09 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
15.11 Line 15.09 as a % of Line 12.09, Col. 7, Section 12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

6015

Schedule DA - Verification - Short-Term Investments

N O N E

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

(Cash Equivalents)

	1 Total	2 Bonds	3 Money Market Mutual funds	4 Other (a)
1. Book/adjusted carrying value, December 31 of prior year	0	0	0	0
2. Cost of cash equivalents acquired	179,409		179,409	
3. Accrual of discount	0			
4. Unrealized valuation increase (decrease)	0			
5. Total gain (loss) on disposals	0			
6. Deduct consideration received on disposals	0			
7. Deduct amortization of premium	0			
8. Total foreign exchange change in book/adjusted carrying value	0			
9. Deduct current year's other than temporary impairment recognized	0			
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5- 7+8-9)	179,409	0	179,409	0
11. Deduct total nonadmitted amounts	0			
12. Statement value at end of current period (Line 10 minus Line 11)	179,409	0	179,409	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE A - PART 1

Showing All Real Estate OWNED December 31 of Current Year

1	2	Location		5	6	7	8	9	10	Change in Book/Adjusted Carrying Value Less Encumbrances					16	17
		3	4							11	12	13	14	15		
Description of Property	Code	City	State	Date Acquired	Date of Last Appraisal	Actual Cost	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Fair Value Less Encumbrances	Current Year's Depreciation	Current Year's Other-Than-Temporary Impairment Recognized	Current Year's Change in Encumbrances	Total Change in Book/Adjusted Carrying Value (13-11-12)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs and Expenses Incurred
Home Office		Ixonia	WI	01/01/1995	01/01/1995	457,379		244,532		12,551			(12,551)		12,000	
0299999. Property occupied by the reporting entity - Administrative						457,379	0	244,532	0	12,551	0	0	(12,551)	0	12,000	0
0399999. Total Property occupied by the reporting entity						457,379	0	244,532	0	12,551	0	0	(12,551)	0	12,000	0
0699999 - Totals						457,379	0	244,532	0	12,551	0	0	(12,551)	0	12,000	0

E01

Schedule A - Part 2 - Real Estate Acquired and Additions Made

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates		
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22	
CUSIP Identification	Description	Code	Fore	Bond Char	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date	
0109999999. Total - U.S. Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0	XXX	XXX
0309999999. Total - All Other Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	0	XXX	XXX
150528-XC-6	IA CEDAR RAPIDS GO BDS				1.A	75,000	97.7100	73,282	75,000	75,000					3.000	3.000	JD	188	2,250	06/05/2017	06/01/2032	
188864-YL-0	IA CLIVE GO REF BDS				1.A	48,448	99.1400	49,570	50,000	49,837		128			2.380	2.680	JJ	99	1,188	04/02/2012	06/01/2024	
263893-CO-0	IA DUBUQUE CNTY SCH DIST				1.A	101,014	86.0300	86,032	100,000	100,837		(73)			2.250	2.170	JD	1,125	2,250	06/15/2020	07/01/2034	
263868-CP-4	IA DUBUQUE GO BDS				1.A	76,722	99.9300	74,949	75,000	75,845		(156)			3.000	2.760	JD	188	2,250	04/06/2017	06/01/2028	
952530-2W-2	IA WEST DES MOINES GO URBAN				1.A	62,259	99.8900	59,932	60,000	61,156		(180)			3.000	2.650	JJ	150	1,800	10/18/2016	06/01/2029	
713176-5K-7	IL PEORIA GO REF BDS				1.A	50,188	98.6900	49,347	50,000	50,000					3.000	2.960	AO	750	1,500	04/09/2015	01/01/2027	
478710-TZ-9	KS JOHNSON CNTY UNIFIED SCH				1.A	49,999	99.8200	49,910	50,000	50,000					3.000	3.000	MN	375	1,500	05/01/2013	10/01/2026	
018195-NP-8	MI ALLENDALE PUB SCH DIST				1.A	75,488	98.0600	73,548	75,000	75,000					3.000	2.940	FA	375	2,250	06/15/2017	11/01/2031	
280659-UE-1	MIN EDINA & MORNINGSID				1.A	85,103	104.3100	78,234	75,000	79,798		(943)			4.000	2.560	FA	1,250	3,000	04/06/2017	02/01/2028	
467160-NH-6	MN JACKSON CNTY GO CAP IMPT				1.A	99,605	88.0500	88,048	100,000	100,000					2.380	2.410	FA	990	2,375	11/14/2019	02/01/2033	
662152-FW-2	MN N ST PAUL MAPLEWOOD GO				1.A	92,008	91.1500	91,149	100,000	92,053		45			3.000	3.780	FA	1,250	(1,042)	12/02/2022	02/01/2036	
791757-6P-6	MN ST LOUIS PARK INDPT SCH				1.A	131,402	98.3600	118,026	120,000	128,973		(988)			3.000	2.080	FA	1,500	3,600	06/15/2020	02/01/2032	
927889-FX-8	MN VIRGINIA INDPT SCH DIST				1.A	103,181	98.4200	98,417	100,000	102,427		(219)			3.000	2.730	JJ	1,250	3,000	07/08/2019	02/01/2034	
605818-BY-8	MT MISSOULA CNTY SCH DIST				1.A	116,455	92.8000	92,802	100,000	114,226		(1,138)			3.000	1.710	MN	1,500	4,575	01/13/2021	07/01/2035	
681669-CX-3	NE OMAHA-DOUGLAS PUB BLDG				1.A	50,527	99.3900	49,693	50,000	50,000					2.750	2.750	JD	238	1,425	12/16/2015	11/01/2028	
625506-PF-1	OR MULTNOMAH CNTY GO				1.A	75,722	99.3000	74,472	75,000	75,000					3.000	2.920	JD	188	2,250	12/04/2017	06/01/2033	
766014-DJ-0	WA RIDGEFIELD LTD TAX GO				1.A	100,500	98.6300	98,626	100,000	100,000					3.000	2.950	JD	250	3,000	06/04/2018	12/01/2029	
82519P-CW-4	WA SHORELINE LTD TAX GO BDS				1.A	105,948	94.1200	94,118	100,000	104,730		(397)			3.000	2.520	JD	250	3,000	11/14/2019	12/01/2034	
899052-NM-2	WA TUKWILA GO LTD TAX BDS				1.A	105,816	95.3400	95,338	100,000	104,623		(388)			3.000	2.530	AO	250	3,000	11/21/2019	12/01/2034	
075147-DZ-8	WI BEAVER DAM SCH DIST				1.A	73,113	98.3000	73,726	75,000	73,827		127			3.000	3.210	MS	563	2,250	05/08/2017	04/01/2032	
080637-UN-9	WI BELOIT GO CORP PURP BDS				1.A	101,386	81.3600	81,363	100,000	100,000					2.000	1.890	AO	667	2,794	03/22/2021	03/01/2035	
233087-PM-1	WI DC EVEREST AREA SCH DIST				1.A	99,497	98.1500	98,153	100,000	100,000					3.000	3.050	MS	750	3,000	02/01/2018	04/01/2031	
344461-JC-3	WI FOND DU LAC GO PROM NTS				1.A	50,535	100.3000	50,148	50,000	50,000					3.000	3.030	FA	521	1,563	02/25/2015	03/01/2028	
374118-AB-0	WI GERMANTOWN GO CNTY DEV				1.A	99,999	98.3600	98,355	100,000	100,000					3.000	3.000	AO	1,250	3,000	02/07/2019	02/01/2032	
392641-ZS-8	WI GREEN BAY GO CORP PURP BDS				1.A	74,998	99.4800	74,609	75,000	75,000					3.000	3.000	AO	563	2,250	07/06/2017	04/01/2030	
392641-M3-7	WI GREEN BAY GO REF BDS				1.A	51,256	100.0600	50,028	50,000	50,372		(114)			3.000	2.730	AO	375	1,500	03/04/2015	04/01/2026	
66440A-PH-3	WI NORTHEAST TECH COLLEGE				1.A	74,168	99.9300	74,948	75,000	75,000					3.000	3.100	MS	563	2,250	07/11/2017	04/01/2031	
739545-QE-4	WI PRAIRIE DU SAC GO CORP				1.A	93,805	68.8800	68,883	100,000	94,584		445			1.250	1.750	AO	417	1,868	03/23/2021	03/01/2035	
750046-NC-4	WI RACINE UNI SCH DIST GO				1.A	99,259	97.7300	97,729	100,000	100,000					3.130	3.190	AO	781	3,125	04/02/2018	04/01/2033	
758381-FS-1	WI REEDSBURG SCH DIST GO				1.A	98,175	98.6500	98,652	100,000	100,000					3.000	3.170	JD	750	3,000	06/04/2018	04/01/2031	
942214-WU-7	WI WATERTOWN GO REF BDS				1.A	52,674	100.0700	50,034	50,000	51,199		(218)			3.000	2.490	AO	125	1,500	02/12/2016	06/01/2028	
943080-QY-0	WI WAUKESHA GO PROM NTS				1.A	74,998	97.6600	73,245	75,000	75,000					3.130	3.130	AO	586	2,344	05/08/2017	10/01/2032	
943186-NS-1	WI WAUNAKEE CNTY SCH DIST				1.A	49,290	99.3400	49,670	50,000	50,000					3.000	3.150	MN	375	1,500	12/06/2016	04/01/2028	
943504-7P-9	WI WAUWATOSA GO CORP PURP				1.A	99,998	101.3500	101,354	100,000	100,000					3.500	3.500	AO	583	3,500	11/26/2018	11/01/2032	
951173-QP-1	WI WEST ALLIS GO CORP				1.A	99,748	89.5000	89,496	100,000	100,000					2.000	2.030	AO	500	2,000	01/03/2020	04/01/2031	
969419-EK-2	WI WILLIAMS BAY SCH DIST GO				1.A	53,064	100.2300	50,117	50,000	51,359		(259)			3.000	2.400		375	1,500	06/01/2016	04/01/2028	
0419999999. Subtotal - Bonds - U.S. States, Territories and Possessions - Issuer Obligations						2,951,348	XXX	2,776,003	2,905,000	2,935,846	0	(4,328)	0	0	XXX	XXX	XXX	21,910	82,115	XXX	XXX	
0509999999. Total - U.S. States, Territories and Possessions Bonds						2,951,348	XXX	2,776,003	2,905,000	2,935,846	0	(4,328)	0	0	XXX	XXX	XXX	21,910	82,115	XXX	XXX	
0709999999. Total - U.S. Political Subdivisions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX	
857536-L5-3	IA BD OF REGENTS UTILITY SYS				1.A	99,997	100.9900	100,990	100,000	100,000					3.000	3.000	MN	500	3,000	02/22/2018	11/01/2030	
857536-NX-0	IA STATE UNIV REV UTIL SYS				1.A	50,404	100.3200	50,158	50,000	50,000					3.000	2.920	MN	250	1,500	07/01/2015	11/01/2027	

E10

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	C o d e	F o r e i g n	B o n d C h a r	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
451295-XM-6	ID HEALTH FACs AUTH REV				1.A	52,853	100.8900	50,443	50,000	51,317		(222)			3.250	2.720	JD	135	1,625	01/27/2016	12/01/2028
349242-FQ-5	IN FORT WAYNE IND CMNTY SCH BLDG				1.A	121,206	103.8200	114,206	110,000	114,235		(1,195)			4.000	3.570	JJ	2,029	4,400	03/03/2017	07/15/2026
349298-RL-5	IN FORT WAYNE IND SEW WKS				1.A	100,000		91,630	100,000	100,000					2.000	2.000	FA	833	2,000	07/08/2016	08/01/2027
455285-8H-2	IN INDIANAPOLIS LOC PUB				1.A	54,099	100.1400	50,071	50,000	50,024		(348)			5.000	4.120	FA	1,042	2,500	04/08/2011	02/01/2023
84774B-CG-6	IN SPEEDWAY IND REDEV AUTH				1.A	69,370	103.8800	62,327	60,000	64,607		(757)			4.000	2.520	FA	1,000	2,400	08/31/2016	02/01/2029
98972L-MN-8	IN ZIONSVILLE CMNTY SCHs BLDG				1.A	49,499	100.0600	50,028	50,000	50,000					3.000	3.090	JJ	692	1,500	09/04/2014	01/15/2028
98267A-DN-6	KS WYANDOTTE CNTY KANSAS CITY GO				1.A	130,651	82.5900	103,243	125,000	129,830		(417)			2.000	1.630	FA	1,042	2,500	01/13/2021	08/01/2034
161670-FR-0	MIN CHASKA ELEC REV ELECTRIC				1.A	77,306	98.6000	73,951	75,000	76,431		(164)			3.000	2.740	AO	563	2,250	08/25/2017	10/01/2031
792897-JY-7	MIN ST PAUL INDPRT SCH DIST				1.A	99,973	97.9800	97,975	100,000	100,000					3.000	3.000	FA	1,250	3,000	12/04/2017	02/01/2033
65888U-KM-4	ND ST BRD HIGHER ED REF BDS				1.A	50,000	99.9300	49,966	50,000	50,000					3.000	3.000	AO	375	1,500	08/19/2015	04/01/2027
952718-ZC-1	ND WEST FARGO REF IMPT BDS				1.A	60,000	100.1100	60,064	60,000	60,000					3.000	3.000	MN	300	1,800	02/02/2017	05/01/2029
534247-MW-8	NE LINCOLN ARPT AUTH REV				1.A	56,694	103.1900	51,593	50,000	53,243		(499)			4.000	2.800	JJ	1,000	2,000	02/03/2016	07/01/2029
591840-AL-7	NE METROPOLITAN CMNTY COLLEGE				1.A	53,313	99.9700	49,985	50,000	51,285		(308)			3.000	2.300	MS	500	1,500	06/01/2016	03/01/2027
151850-AK-3	PA CENTER-WEST JT SWR AUTH				1.A	145,813	87.9900	123,192	140,000	144,835		(671)			2.000	1.490	MS	824	2,800	06/25/2012	03/15/2030
829594-JN-1	SD SIOUX FALLS SALES TAX REV				1.A	54,992	100.0800	50,040	50,000	50,379		(429)			4.000	2.980	MN	250	2,000	04/02/2012	11/15/2023
037047-BU-0	WI ANTIGO WTRIKS SYS & SEWER				1.A	127,115	88.2300	105,871	120,000	125,907		(805)			2.000	1.290	MN	400	2,400	06/25/2021	05/01/2030
976596-AT-3	WI CTR DIST (MLW ARENA PROJECT)				1.A	113,557	103.6500	103,653	100,000	111,690		(1,067)			4.000	2.730	JD	178	4,000	04/06/2021	12/15/2033
558605-FJ-5	WI MADISON SWR SYS REV				1.A	50,445	100.0200	50,008	50,000	50,000					3.000	2.910	JD	125	1,500	10/29/2014	12/01/2026
558605-FZ-9	WI MADISON SWR SYS REV				1.A	50,437	100.6800	50,340	50,000	50,000					3.130	3.070	JD	130	1,563	12/15/2016	12/01/2028
68825R-KP-4	WI OSHKOSH STORM WTR UTIL REV				1.A	145,000	81.1200	117,624	145,000	145,000					2.130	2.130	MN	514	3,080	06/15/2020	05/01/2035
68825R-ES-5	WI OSHKOSH STORM WTR UTIL REV				1.A	49,999	99.9000	49,951	50,000	50,000					3.000	3.000	MN	250	1,500	08/17/2015	05/01/2028
97712D-LZ-7	WI ST HEALTH & EDL FACs AUTH				1.A	49,683	100.1700	50,087	50,000	50,000					3.250	3.310	FA	614	1,625	04/28/2015	08/15/2028
866859-FW-6	WI SUN PRAIRIE WTR & LT UTL				1.A	95,273	77.9700	77,971	100,000	95,910		364			1.500	1.910	AO	375	1,500	03/22/2021	04/01/2034
0819999999	Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations					2,007,679	XXX	1,835,367	1,935,000	1,974,693	0	(6,518)	0	0	XXX	XXX	XXX	15,171	55,443	XXX	XXX
0909999999	Total - U.S. Special Revenues Bonds					2,007,679	XXX	1,835,367	1,935,000	1,974,693	0	(6,518)	0	0	XXX	XXX	XXX	15,171	55,443	XXX	XXX
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1309999999	Total - Hybrid Securities					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1909999999	Subtotal - Bonds - Unaffiliated Bank Loans					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2419999999	Total - Issuer Obligations					4,959,027	XXX	4,611,370	4,840,000	4,910,539	0	(10,846)	0	0	XXX	XXX	XXX	37,081	137,558	XXX	XXX
2429999999	Total - Residential Mortgage-Backed Securities					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2439999999	Total - Commercial Mortgage-Backed Securities					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2449999999	Total - Other Loan-Backed and Structured Securities					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2459999999	Total - SVO Identified Funds					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2469999999	Total - Affiliated Bank Loans					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2479999999	Total - Unaffiliated Bank Loans					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2489999999	Total - Unaffiliated Certificates of Deposit					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2509999999	Total Bonds					4,959,027	XXX	4,611,370	4,840,000	4,910,539	0	(10,846)	0	0	XXX	XXX	XXX	37,081	137,558	XXX	XXX

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:
 Number
 1A 1A ..\$4,910,539 1B ..\$0 1C ..\$0 1D ..\$0 1E ..\$0 1F ..\$0 1G ..\$0
 1B 2A ..\$0 2B ..\$0 2C ..\$0
 1C 3A ..\$0 3B ..\$0 3C ..\$0

E10.1

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

1A	1A ..\$	4,910,539	1B ..\$	0	1C ..\$	0	1D ..\$	0	1E ..\$	0	1F ..\$	0	1G ..\$	0
1B	2A ..\$	0	2B ..\$	0	2C ..\$	0								
1C	3A ..\$	0	3B ..\$	0	3C ..\$	0								
1D	4A ..\$	0	4B ..\$	0	4C ..\$	0								
1E	5A ..\$	0	5B ..\$	0	5C ..\$	0								
1F	6 ..\$	0												

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 2 - SECTION 2

Showing All COMMON STOCKS Owned December 31 of Current Year

1 CUSIP Identi- fication	2 Description	Codes		5 Number of Shares	6 Book/ Adjusted Carrying Value	Fair Value		9 Actual Cost	Dividends			Change in Book/Adjusted Carrying Value				17 Date Acquired	18 NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol	
		3 Code	4 For- eign			7 Rate Per Share Used to Obtain Fair Value	8 Fair Value		10 Declared but Unpaid	11 Amount Received During Year	12 Nonadmitted Declared But Unpaid	13 Unrealized Valuation Increase/ (Decrease)	14 Current Year's Other-Than- Temporary Impairment Recognized	15 Total Change in Book/Adjusted Carrying Value (13 - 14)	16 Total Foreign Exchange Change in Book/Adjusted Carrying Value			
00206R-10-2 ...	AT&T INC			1,000.000	18,410	18,410	18,410	19,550		555			(1,140)		(1,140)		05/03/2022	
031162-10-0 ...	AMGEN INC			100.000	26,264	262,640	26,264	17,023		776			3,767		3,767		02/13/2017	
00287Y-10-9 ...	ABBVIE INC			75.000	12,121	161,610	12,121	11,415		106			706		706		07/22/2022	
037833-10-0 ...	APPLE INC			200.000	25,986	129,930	25,986	5,202		399			(22,233)		(22,233)		12/09/2015	
09247X-10-1 ...	BLACKROCK INC			50.000	35,432	708,630	35,432	17,292		976			(10,346)		(10,346)		03/18/2020	
166764-10-0 ...	CHEVRON CORPORATION			100.000	17,949	179,490	17,949	11,745		568			6,214		6,214		08/20/2012	
17275R-10-2 ...	CISCO SYS INC			500.000	23,820	47,640	23,820	16,268		755			(7,865)		(7,865)		02/13/2017	
191216-10-0 ...	COCA COLA CO			250.000	15,903	63,610	15,903	9,694		440			1,100		1,100		09/03/2013	
253868-10-3 ...	DIGITAL REALTY TRUST INC			220.000	22,059	100,270	22,059	21,327	268	956			(13,278)		(13,278)		07/01/2015	
26441C-20-4 ...	DUKE ENERGY CORP			150.000	15,449	102,990	15,449	10,665		597			(286)		(286)		09/01/2015	
278865-10-0 ...	ECOLAB INC			125.000	18,195	145,560	18,195	21,905	66	64			(3,710)		(3,710)		09/09/2022	
302316-10-2 ...	EXXON MOBIL CORPORATION			300.000	33,090	110,300	33,090	25,023		1,065			14,733		14,733		03/22/2013	
369550-10-8 ...	GENERAL DYNAMICS CORP			31,014	31,014	248,110	31,014	23,317		621			4,955		4,955		12/09/2019	
375558-10-3 ...	GILLEAD SCIENCES INC			180.000	15,453	85,850	15,453	11,227		263			4,226		4,226		07/22/2022	
437076-10-2 ...	HOME DEPOT INC			100.000	31,586	315,860	31,586	20,913		1,045			(13,473)		(13,473)		06/14/2019	
438516-10-6 ...	HONEYWELL INTERNATIONAL INC			150.000	32,145	214,300	32,145	29,626		522			2,519		2,519		01/21/2022	
459200-10-1 ...	IBM CORP			100.000	14,089	140,890	14,089	11,695		659			723		723		12/17/2012	
46625H-10-0 ...	JPMORGAN CHASE & CO			200.000	26,820	134,100	26,820	21,787		800			(4,850)		(4,850)		09/20/2012	
539830-10-9 ...	LOCKHEED MARTIN CORP			25.000	12,162	486,490	12,162	10,177		145			1,985		1,985		07/22/2022	
580135-10-1 ...	MCDONALDS CORP			125.000	32,941	263,530	32,941	28,663		604			2,350		2,350		03/25/2021	
65960L-10-3 ...	MEDTRONIC PLC			115.000	8,938	77,720	8,938	8,666	78	301			(2,959)		(2,959)		07/01/2015	
59156R-10-8 ...	METLIFE INC			450.000	32,567	72,370	32,567	17,647		891			4,446		4,446		08/20/2020	
594918-10-4 ...	MICROSOFT CORP			125.000	29,978	239,820	29,978	8,201		508			(20,228)		(20,228)		02/13/2017	
65339F-10-1 ...	NEXTERA ENERGY INC			480.000	40,128	83,600	40,128	9,731		816			(4,685)		(4,685)		09/03/2013	
713448-10-8 ...	PEPSICO INC			125.000	22,583	180,660	22,583	15,222	144	869			556		869		03/18/2020	
76131D-10-3 ...	RESTAURANT BRANDS INTL INC			200.000	12,934	64,670	12,934	13,131	108	366			798		798		03/03/2021	
855244-10-9 ...	STARBUCKS CORP			350.000	34,720	99,200	34,720	31,556		627			(1,619)		(1,619)		12/17/2012	
882508-10-4 ...	TEXAS INSTRS INC			200.000	33,044	165,220	33,044	16,586		938			(4,650)		(4,650)		08/25/2017	
89832Q-10-9 ...	TRUIST FINANCIAL CORP COM			500.000	21,515	43,030	21,515	27,686		856			(7,410)		(7,410)		12/10/2019	
91324P-10-2 ...	UNITEDHEALTH GROUP INC			60.000	31,811	530,180	31,811	3,450		652			(13,065)		(13,065)		02/20/2013	
92343V-10-4 ...	VERIZON COMMNS INC			225.000	8,865	39,400	8,865	10,186		147			(1,321)		(1,321)		07/22/2022	
92826C-83-9 ...	VISA INC CL A			150.000	31,164	207,760	31,164	24,684		218			(144)		(144)		03/18/2020	
98389B-10-0 ...	XCEL ENERGY INC			250.000	17,528	70,110	17,528	17,793	122	480			603		603		08/20/2020	
501999999. Subtotal - Common Stock - Industrial and Miscellaneous (Unaffiliated) Publicly Traded					786,663	XXX	786,663	549,053	786	19,272	0	(83,268)	0	(83,268)	0	XXX	XXX	
97689F-10-0 ...	WRC Corporation			7,744.000	752,639	97,190	752,639	177,546					(192,749)		(192,749)		01/01/2010	
62989F-10-5 ...	NAMICO			60.000	22,864	381,060	22,864	3,000					1,988		1,988		04/07/1987	
502999999. Subtotal - Common Stock - Industrial and Miscellaneous (Unaffiliated) Other					775,503	XXX	775,503	180,546	0	0	0	(190,751)	0	(190,751)	0	XXX	XXX	
510999999. Total - Common Stock - Industrial and Miscellaneous (Unaffiliated)					1,562,166	XXX	1,562,166	729,599	786	19,272	0	(274,019)	0	(274,019)	0	XXX	XXX	
464287-59-8 ...	ISHARES TR RUSSELL 1000 VALUE E ETF			650.000	98,573	151,650	98,573	96,941		1,240			1,632		1,632		07/26/2022	
464287-61-4 ...	ISHARES TR RUSSELL 1000 GROWTH			215.000	46,062	214,240	46,062	49,143		248			(3,081)		(3,081)		07/26/2022	
239080-84-9 ...	DAVIS GLOBAL FUND - Y			4,624.010	99,971	21,620	99,971	111,456		129			(19,652)		(19,652)		03/25/2013	
29875E-10-0 ...	EUROPACIFIC GROWTH FD AMERICAN			1,286.560	62,913	48,900	62,913	66,888		1,026			(13,844)		(13,844)		04/18/2018	
4812C0-53-0 ...	JP MORGAN LARGE CAP GROWTH FUND-I			4,151.200	185,683	44,730	185,683	168,462		6,351			(71,401)		(71,401)		10/16/2014	
641233-20-0 ...	NEUBERGER BERMAN EQUITY SER GENESIS INSTL FD			2,076.010	113,060	54,460	113,060	130,000		12,560			(16,940)		(16,940)		07/27/2022	

E12

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 2 - SECTION 2

Showing All COMMON STOCKS Owned December 31 of Current Year

1 CUSIP Identi- fication	2 Description	Codes		5 Number of Shares	6 Book/ Adjusted Carrying Value	Fair Value		9 Actual Cost	Dividends			Change in Book/Adjusted Carrying Value				17 Date Acquired	18 NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
		3 Code	4 For- eign			7 Rate Per Share Used to Obtain Fair Value	8 Fair Value		10 Declared but Unpaid	11 Amount Received During Year	12 Nonadmitted Declared But Unpaid	13 Unrealized Valuation Increase/ (Decrease)	14 Current Year's Other-Than- Temporary Impairment Recognized	15 Total Change in Book/Adjusted Carrying Value (13 - 14)	16 Total Foreign Exchange Change in Book/Adjusted Carrying Value		
742530-74-7	PRINCIPAL FDS INC SC BLD FD MIDCAP BLEND			6,285.220	196,099	31.200	196,099	206,498		6,236		(66,937)		(66,937)	03/09/2012		
939330-82-5	AMERICAN WASH CL F-2 SHS			3,359.620	174,426	51.920	174,426	150,818		15,209		(49,531)		(49,531)	06/28/2017		
5319999999. Subtotal - Common Stocks - Mutual Funds - Designations Assigned by the SVO					976,787	XXX	976,787	980,206	0	42,999	0	(239,754)	0	(239,754)	0	XXX XXX	
5409999999. Total - Common Stocks - Mutual Funds					976,787	XXX	976,787	980,206	0	42,999	0	(239,754)	0	(239,754)	0	XXX XXX	
5609999999. Total - Common Stocks - Unit Investment Trusts					0	XXX	0	0	0	0	0	0	0	0	0	XXX XXX	
5809999999. Total - Common Stocks - Closed-End Funds					0	XXX	0	0	0	0	0	0	0	0	0	XXX XXX	
5979999999. Total - Common Stocks - Parent, Subsidiaries and Affiliates					0	XXX	0	0	0	0	0	0	0	0	0	XXX XXX	
5989999999 - Total Common Stocks					2,538,953	XXX	2,538,953	1,709,805	786	62,271	0	(513,773)	0	(513,773)	0	XXX XXX	
5999999999 - Total Preferred and Common Stocks					2,553,953	XXX	2,553,953	1,724,805	786	62,271	0	(513,773)	0	(513,773)	0	XXX XXX	

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

Line Number	1A	1A ..\$	0	1B ..\$	0	1C ..\$	0	1D ..\$	0	1E ..\$	0	1F ..\$	0	1G ..\$	0
	1B	2A ..\$	0	2B ..\$	0	2C ..\$	0								
	1C	3A ..\$	0	3B ..\$	0	3C ..\$	0								
	1D	4A ..\$	0	4B ..\$	0	4C ..\$	0								
	1E	5A ..\$	0	5B ..\$	0	5C ..\$	0								
	1F	6 ..\$	0												

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends
662152-FW-2	MN N St Paul Maplewood GO		12/06/2022	RBC Wealth Management		92,008	100,000	
0909999999	Subtotal - Bonds - U.S. Special Revenues							
						92,008	100,000	0
2509999997	Total - Bonds - Part 3							
2509999998	Total - Bonds - Part 5							
2509999999	Total - Bonds							
4509999997	Total - Preferred Stocks - Part 3							
4509999998	Total - Preferred Stocks - Part 5							
4509999999	Total - Preferred Stocks							
438516-10-6	Honeywell Intl Inc		01/25/2022	RBC Wealth Management	75.000	15,638		
253868-10-3	Digital Realty Trust Inc		03/10/2022	RBC Wealth Management	90.000	12,344		
438516-10-6	Honeywell Intl Inc		03/10/2022	RBC Wealth Management	75.000	13,988		
580135-10-1	McDonalds Corp		03/10/2022	RBC Wealth Management	75.000	17,187		
88579Y-10-1	3M Company		03/10/2022	RBC Wealth Management	100.000	14,762		
855244-10-9	Starbucks Corp		03/10/2022	RBC Wealth Management	150.000	12,945		
898320-10-9	Truist Financial Corporation		03/10/2022	RBC Wealth Management	300.000	17,215		
92826C-83-9	Visa Inc		03/10/2022	RBC Wealth Management	50.000	9,638		
00206R-10-2	AT&T Inc		05/03/2022	RBC Wealth Management	1,000.000	19,550		
00287Y-10-9	Abbvie Inc		07/26/2022	RBC Wealth Management	75.000	11,415		
375558-10-3	Gilead Sciences Inc		07/26/2022	RBC Wealth Management	180.000	11,227		
539830-10-9	Lockhead Martin Corp		07/26/2022	RBC Wealth Management	25.000	10,177		
92343V-10-4	Verizon Communications		07/26/2022	RBC Wealth Management	225.000	10,186		
278865-10-0	Ecolab Inc		09/13/2022	RBC Wealth Management	125.000	21,905		
5019999999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded							
						198,177	XXX	0
29875E-10-0	Europacific Growth Fund American		07/28/2022	RBC Wealth Management	706.790	35,000		
464287-59-8	Ishares TR Russell 1000 Value E		07/28/2022	RBC Wealth Management	650.000	96,941		
464287-61-4	Ishares TR Russell 1000 Growth		07/28/2022	RBC Wealth Management	215.000	49,140		
641233-20-0	Neuberger Berman Equity Ser Genesis		08/02/2022	RBC Wealth Management	2,076.010	130,000		
5319999999	Subtotal - Common Stocks - Mutual Funds - Designations Assigned by the SVO							
						311,081	XXX	0
5989999997	Total - Common Stocks - Part 3							
5989999998	Total - Common Stocks - Part 5							
5989999999	Total - Common Stocks							
5999999999	Total - Preferred and Common Stocks							
6009999999	Totals							
						601,266	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ Decrease	Current Year's (Amortization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	
63165T-HX-6	NY NASSAU CTY GO GEN IMPT		04/01/2022	RBC Wealth Management		50,000	50,000	55,100	51,375		(1,375)		(1,375)		50,000			0	1,000	04/01/2022	
0709999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						50,000	50,000	55,100	51,375	0	(1,375)	0	(1,375)	0	50,000	0	0	0	1,000	XXX	
17240F-RR-3	TX CINCO SOUTHWEST MUN UTL		12/01/2022	RBC Wealth Management		65,000	65,000	68,563	65,408		(408)		(408)		65,000			0	1,950	12/01/2022	
0909999999. Subtotal - Bonds - U.S. Special Revenues						65,000	65,000	68,563	65,408	0	(408)	0	(408)	0	65,000	0	0	0	1,950	XXX	
2509999997. Total - Bonds - Part 4						115,000	115,000	123,663	116,783	0	(1,783)	0	(1,783)	0	115,000	0	0	0	2,950	XXX	
2509999998. Total - Bonds - Part 5						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
2509999999. Total - Bonds						115,000	115,000	123,663	116,783	0	(1,783)	0	(1,783)	0	115,000	0	0	0	2,950	XXX	
4509999997. Total - Preferred Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999998. Total - Preferred Stocks - Part 5						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999999. Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
478160-10-4	Johnson & Johnson		01/25/2022	RBC Wealth Management		150,000	24,465	10,465	25,661	(15,196)			(15,196)		25,661		14,000	14,000			
02209S-10-3	Alltria Group Inc		03/10/2022	RBC Wealth Management		300,000	15,183	10,727	14,217	(3,490)			(3,490)		14,217		4,457	4,457	270		
501550-10-0	Kyndryl Holdings Inc		03/10/2022	RBC Wealth Management		20,000	178	501	362	139			139		362		(323)	(323)			
05534B-76-0	BCE Inc		05/05/2022	RBC Wealth Management		400,000	21,073	18,169	20,816	(2,647)			(2,647)		20,816		2,904	2,904	485		
037833-10-0	Apple Inc		07/26/2022	RBC Wealth Management		200,000	30,469	5,937	35,514	(22,233)			(22,233)		35,514		24,532	24,532			
91324P-10-2	UnitedHealth Group Inc		07/26/2022	RBC Wealth Management		25,000	12,807	1,438	12,554	(5,444)			(5,444)		12,554		11,369	11,369			
91324P-10-2	UnitedHealth Group Inc		11/22/2022	RBC Wealth Management		40,000	20,927	2,300	20,086	(8,710)			(8,710)		20,086		18,627	18,627	745		
88579Y-10-1	3M Company		09/13/2022	RBC Wealth Management		200,000	24,100	24,130	35,526	(8,394)			(8,394)		32,525		(30)	(30)	924		
149123-10-1	Caterpillar Inc		11/22/2022	RBC Wealth Management		70,000	15,892	7,022	14,472	(7,450)			(7,450)		14,472		8,870	8,870			
037833-10-0	Apple Inc		11/22/2022	RBC Wealth Management		140,000	20,893	3,935	24,860	(15,563)			(15,563)		24,860		16,958	16,958			
149123-10-1	Caterpillar Inc		12/23/2022	RBC Wealth Management		130,000	30,715	13,041	26,876	(13,835)			(13,835)		26,876		17,674	17,674			
594918-10-4	Microsoft Corp		11/22/2022	RBC Wealth Management		75,000	17,735	4,921	25,224	(12,137)			(12,137)		25,224		12,814	12,814			
437076-10-2	Home Depot Inc		11/22/2022	RBC Wealth Management		50,000	15,360	10,457	20,751	(6,736)			(6,736)		20,751		4,903	4,903			
5019999999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded						249,797	XXX	113,043	276,919	(121,696)	0	0	(121,696)	0	273,918	0	136,755	136,755	2,424	XXX	
01877E-50-3	Alliance Quasar FD Inc Growth		07/25/2022	RBC Wealth Management		2,612,000	146,976	167,183	224,065	(56,885)			(56,885)		224,068		(20,206)	(20,206)			
023375-82-7	AMCAP Class F		07/25/2022	RBC Wealth Management		2,019,000	64,219	69,150	92,786	(23,636)			(23,636)		92,786		(4,930)	(4,930)	4,725		
939330-82-5	American Washington Funf CI F-2		07/25/2022	RBC Wealth Management		1,939,000	100,000	67,570	117,164	(28,583)			(28,583)		117,164		32,430	32,430			
00143W-87-5	Invesco Developing Markets Funds		10/14/2022	RBC Wealth Management		1,102,000	34,619	46,596	51,824	(5,236)			(5,236)		51,824		(11,978)	(11,978)			
38141W-27-3	GOLDMAN SACHS FINANCIAL FUNDS GOVERNMENT		12/31/2022	RBC Wealth Management		258,202,000	258,202	258,202	258,202	0			0		258,202		0	0			
5319999999. Subtotal - Common Stocks - Mutual Funds - Designations Assigned by the SVO						604,016	XXX	608,701	744,041	(114,340)	0	0	(114,340)	0	744,044	0	(4,684)	(4,684)	4,725	XXX	
5989999997. Total - Common Stocks - Part 4						853,813	XXX	721,744	1,020,960	(236,036)	0	0	(236,036)	0	1,017,962	0	132,071	132,071	7,149	XXX	
5989999998. Total - Common Stocks - Part 5						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999999. Total - Common Stocks						853,813	XXX	721,744	1,020,960	(236,036)	0	0	(236,036)	0	1,017,962	0	132,071	132,071	7,149	XXX	
5999999999. Total - Preferred and Common Stocks						853,813	XXX	721,744	1,020,960	(236,036)	0	0	(236,036)	0	1,017,962	0	132,071	132,071	7,149	XXX	
6009999999 - Totals						968,813	XXX	845,407	1,137,743	(236,036)	(1,783)	0	(237,819)	0	1,132,962	0	132,071	132,071	10,099	XXX	

E14

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE D - PART 5

Showing All Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

1 CUSIP Identi- fication	2 Description	3 For- eign	4 Date Acquired	5 Name of Vendor	6 Disposal Date	7 Name of Purchaser	8 Par Value (Bonds) or Number of Shares (Stock)	9 Actual Cost	10 Consid- eration	11 Book/ Adjusted Carrying Value at Disposal	Change in Book/Adjusted Carrying Value					17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Interest and Dividends Received During Year	21 Paid for Accrued Interest and Dividends		
											12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amort- ization)/ Accretion	14 Current Year's Other- Than- Temporary Impairment Recognized	15 Total Change in Book/ Adjusted Carrying Valu (12 + 13 - 14)	16 Total Foreign Exchange Change in Book/ Adjusted Carrying Value							
2509999998. Total - Bonds							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4509999998. Total - Preferred Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5989999998. Total - Common Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5999999999. Total - Preferred and Common Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6009999999 - Totals							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

E15

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

N O N E

Schedule D - Part 6 - Section 2

N O N E

Schedule DA - Part 1 - Short-Term Investments Owned

N O N E

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D - Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D - Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of
Current Year

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0109999999	Total - U.S. Government Bonds					0	0	0
0309999999	Total - All Other Government Bonds					0	0	0
0509999999	Total - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999	Total - U.S. Political Subdivisions Bonds					0	0	0
0909999999	Total - U.S. Special Revenues Bonds					0	0	0
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
1309999999	Total - Hybrid Securities					0	0	0
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds					0	0	0
1909999999	Subtotal - Unaffiliated Bank Loans					0	0	0
2419999999	Total - Issuer Obligations					0	0	0
2429999999	Total - Residential Mortgage-Backed Securities					0	0	0
2439999999	Total - Commercial Mortgage-Backed Securities					0	0	0
2449999999	Total - Other Loan-Backed and Structured Securities					0	0	0
2459999999	Total - SVO Identified Funds					0	0	0
2469999999	Total - Affiliated Bank Loans					0	0	0
2479999999	Total - Unaffiliated Bank Loans					0	0	0
2509999999	Total Bonds					0	0	0
38141W-27-3	Goldman Sachs Financial Funds		12/31/2022			179,409		2,315
8309999999	Subtotal - All Other Money Market Mutual Funds					179,409	0	2,315
8609999999	Total Cash Equivalents					179,409	0	2,315

E28

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:
 Number
 1A 1A ..\$0 1B ..\$0 1C ..\$0 1D ..\$0 1E ..\$0 1F ..\$0 1G ..\$0
 1B 2A ..\$0 2B ..\$0 2C ..\$0
 1C 3A ..\$0 3B ..\$0 3C ..\$0
 1D 4A ..\$0 4B ..\$0 4C ..\$0
 1E 5A ..\$0 5B ..\$0 5C ..\$0
 1F 6\$0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
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 Alien and Other	OT	XXX	XXX			
59. Subtotal	XXX	XXX				
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX				
5899. Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	XXX				

NONE



SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

For The Year Ended December 31, 2022
 (To Be Filed By April 1)

NAIC Group Code 0000.....

FOR THE STATE OF

NAIC Company Code 11387.....

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	Direct Premiums Written	Direct Premiums Earned	Assumed Premiums Earned	Ceded Premiums Earned	Net Premiums Earned (2+3-4)	Direct Incurred Claims Amount	Assumed Incurred Claims Amount	Ceded Incurred Claims Amount	Net Incurred Claims Amount (6+7-8)	Change in Contract Reserves	Loss Ratio (6+10)/2	Number of Policies or Certificates as of Dec. 31	Number of Covered Lives as of Dec. 31	Member Months
A. INDIVIDUAL BUSINESS														
1. Comprehensive major medical														
2.1 Short-Term Medical - 6 Months or Less														
2.2 Short-Term Medical - Over 6 Months														
2.3 Subtotal Short-Term Medical (2.1+2.2)														
3. Other Medical (Non-Comprehensive)														
4. Specified/Named Disease														
5. Limited Benefit														
6. Student														
7. Accident Only or AD&D														
8. Disability Income - Short - Term														
9. Disability Income - Long - Term														
10. Long-Term Care														
11. Medicare Supplement (Medigap)														
12. Dental														
13. State Children's Health Insurance Program														
14. Medicare														
15. Medicaid														
16. Medicare Part D - Stand-Alone														
17. Vision														
18. Other Individual Business														
19. Grand Total Individual														
B. GROUP BUSINESS														
NONE														
Comprehensive Major Medical														
1.1 Single Employer - Small Employer														
1.2 Single Employer - Other Employer														
1.3 Single Employer - Subtotal														
2. Multiple Employer Assns and Trusts														
3. Other Associations and Discretionary Trusts														
4. Other Comprehensive Major Medical														
5. Comprehensive/Major Medical Subtotal														
Other Medical (Non-Comprehensive)														
6. Specified/Named Disease														
7. Limited Benefit														
8. Student														
9. Accident Only or AD&D														
10. Disability Income - Short-Term														
11. Disability Income - Long-Term														
12. Long-Term Care														
13. Medicare Supplement (Medigap)														
14. Federal Employees Health Benefits Plan														
15. Tricare														
16. Dental														
17. Medicare														
18. Medicare Part D - Stand-Alone														
19. Vision														
20. Other Group Care														
21. Grand Total Group Business														
C. OTHER BUSINESS														
1. Credit (Individual and Group)														
2. Stop Loss/Excess Loss														
3. Administrative Services Only	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4. Administrative Services Contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5. Grand Total Other Business														
D. TOTAL BUSINESS														
1. Total Non U.S. Policy Forms														
2. Grand Total Individual, Group and Other Business														

210



SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes - See Cautionary Statement at https://content.naic.org/sites/default/files/inline-files/committees_e_app_blanks_related_shce_cautionary_statement.pdf)

REPORT FOR: 1. CORPORATION

2.

NAIC Group Code	BUSINESS IN THE STATE OF	Business Subject to MLR									DURING THE YEAR 2022					(LOCATION)	
		Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9 Student Health Plans	10 Government Business (excluded by statute)	11 Other Health Business	12 Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	13 Subtotal (Cols. 1 through 12)	14 Uninsured Plans	15 Total 13 + 14	
		1	2	3	4	5	6	7	8								
		Individual	Small Group Employer	Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group								
NONE																	
1. Premium:																	
1.1 Health premiums earned (From Part 2, Line 1.11)															XXX		
1.2 Federal high risk pools															XXX		
1.3 State high risk pools															XXX		
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)															XXX		
1.5 Federal taxes and federal assessments																	
1.6 State insurance, premium and other taxes (Similar local taxes of \$																	
1.6a Community Benefit Expenditures (informational only)																	
1.7 Regulatory authority licenses and fees																	
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)															XXX		
1.9 Net Assumed less Ceded reinsurance premiums earned															XXX		
1.10 Other Adjustments due to MLR calculations - Premiums															XXX		
1.11 Risk Revenue															XXX		
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)															XXX		
2. Claims:																	
2.1 Incurred claims excluding prescription drugs															XXX		
2.2 Prescription drugs															XXX		
2.3 Pharmaceutical rebates															XXX		
2.4 State stop loss, market stabilization and claim/census based assessments (informational only)															XXX		
3. Incurred medical incentive pools and bonuses															XXX		
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)																	
5. 5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 3) (From Part 2, Line 2.15)															XXX		
5.1 Net Assumed less Ceded reinsurance claims incurred															XXX		
5.2 Other Adjustments due to MLR calculations - Claims															XXX		
5.3 Rebates paid										XXX	XXX				XXX		
5.4 Estimated rebates unpaid prior year										XXX	XXX				XXX		
5.5 Estimated rebates unpaid current year										XXX	XXX				XXX		
5.6 Fee for service and co-pay revenue															XXX		
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)															XXX		
6. Improving Health Care Quality Expenses Incurred:																	
6.1 Improve health outcomes																	
6.2 Activities to prevent hospital readmissions																	
6.3 Improve patient safety and reduce medical errors																	
6.4 Wellness and health promotion activities																	
6.5 Health Information Technology expenses related to health improvement																	
6.6 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1+6.2+6.3+6.4+6.5)																	
7. Preliminary Medical Loss Ratio: MLR ((Lines 4 + 5.0 + 6.6 - Footnote 2.0)/Line 1.8)											XXX	XXX		XXX	XXX		
8. Claims Adjustment Expenses:																	
8.1 Cost containment expenses not included in quality of care expenses in Line 6.6																	
8.2 All other claims adjustment expenses																	
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)																	
9. Claims Adjustment Expense Ratio (Line 8.3/Line 1.8)														XXX	XXX		

216-1

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1 (Continued)

	Business Subject to MLR									10	11	12	13	14	15
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9						
	1	2	3	4	5	6	7	8							
Individual	Small Group Employer	Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14	
10. General and Administrative (G&A) Expenses:															
10.1 Direct sales salaries and benefits															
10.2 Agents and brokers fees and commissions.....															
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below).....															
10.4 Other general and administrative expenses.....															
10.4a Community Benefit Expenditures (informational only)															
10.5 Total general and administrative (Lines 10.1 +10.2 + 10.3 + 10.4)															
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.6 - 8.3 - 10.5)														XXX	
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
14. Federal income taxes (excluding taxes on Line 1.5 above)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
16. ICD-10 Implementation Expenses (informational only; already included in general expenses and line 10.4)															
16. 16a ICD-10 Implementation Expenses (informational only; already included in line 10.4)															
OTHER INDICATORS:															
1. Number of certificates/policies															
2. Number of Covered Lives															
3. Number of Groups	XXX			XXX											
4. Member Months															

NONE

Is run off business reported in Columns 1 through 9 or 12? Yes [] No [] If yes, show the amount of premiums and claims included. Premiums \$ Claims \$

AFFORDABLE CARE ACT (ACA) RECEIPTS, PAYMENTS, RECEIVABLES and PAYABLES				
	Current Year		Prior Year	
	Comprehensive Health Coverage		Comprehensive Health Coverage	
	1	2	3	4
	Individual Plans	Small Group Employer Plans	Individual Plans	Small Group Employer Plans
ACA Receivables and Payables				
1. Permanent ACA Risk Adjustment Program				
1.0 Premium adjustments receivable/(payable)				
2. Transitional ACA Reinsurance Program				
2.0 Total amounts recoverable for claims (paid & unpaid)		XXX		XXX
3. Temporary ACA Risk Corridors Program				
3.1 Accrued retrospective premium.....				
3.2 Reserve for rate credits or policy experience refunds				
ACA Receipts and Payments				
4. Permanent ACA Risk Adjustment Program				
4.0 Premium adjustments receipts/(payments)				
5. Transitional ACA Reinsurance Program				
5.0 Amounts received for claims		XXX		XXX
6. Temporary ACA Risk Corridors Program				
6.1 Retrospective premium received.....				
6.2 Rate credits or policy experience refunds paid				

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION

2.

NAIC Group Code	BUSINESS IN THE STATE OF	Business Subject to MLR								(LOCATION) NAIC Company Code				
		Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans:		9	10	11	12	13
		1	2	3	4	5	6	7	8						Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Total (a)
1. Health Premiums Earned:														
1.1 Direct premiums written														
1.2 Unearned premium prior year														
1.3 Unearned premium current year														
1.4 Change in unearned premium (Lines 1.2 - 1.3)														
1.5 Paid rate credits														
1.6 Reserve for rate credits current year														
1.7 Reserve for rate credits prior year														
1.8 Change in reserve for rate credits (Lines 1.6 - 1.7)														
1.9 Premium balances written off														
1.10 Group conversion charge														
1.11 Total direct premiums earned (Lines 1.1 + 1.4 - 1.9 + 1.10)														
1.12 Assumed premiums earned from non-affiliates														
1.13 Net Assumed less Ceded premiums earned from affiliates														
1.14 Ceded premiums earned to non-affiliates														
1.15 Other Adjustments due to MLR calculation - Premiums														
1.16 Net premiums earned (Lines 1.11 - 1.5 - 1.8 + 1.12 + 1.13 - 1.14 + 1.15)														
2. Direct Claims Incurred:														
2.1 Paid claims during the year														
2.2 Direct claim liability current year														
2.3 Direct claim liability prior year														
2.4 Direct claim reserves current year														
2.5 Direct claim reserves prior year														
2.6 Direct contract reserves current year														
2.7 Direct contract reserves prior year														
2.8 Paid rate credits														
2.9 Reserve for rate credits current year														
2.10 Reserve for rate credits prior year														
2.11 Incurred medical incentive pools and bonuses (Lines 2.11a + 2.11b - 2.11c)														
2.11a Paid medical incentive pools and bonuses current year														
2.11b Accrued medical incentive pools and bonuses current year														
2.11c Accrued medical incentive pools and bonuses prior year														
2.12 Net health care receivables (Lines 2.12a - 2.12b)														
2.12a Health care receivables current year														
2.12b Health care receivables prior year														
2.13 Group conversion charge														
2.14 Multi-option coverage blended rate adjustment														
2.15 Total incurred claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 + 2.9 - 2.10 + 2.11 - 2.12 + 2.13 + 2.14)														
2.16 Assumed incurred claims from non-affiliates														
2.17 Net assumed less ceded incurred claims from affiliates														
2.18 Ceded incurred claims to non-affiliates														
2.19 Other adjustments due to MLR calculation - Claims														
2.20 Net Incurred Claims (Lines 2.15 - 2.8 - 2.9 + 2.10 + 2.16 + 2.17 - 2.18 + 2.19)														
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)														

NONE

(a) Column 13, Line 1.1 includes direct written premium of \$ for stand-alone dental and \$ for stand-alone vision policies.

216-3

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION

2.

NAIC Group Code	BUSINESS IN THE STATE OF	DURING THE YEAR					2022		(LOCATION)		10
		Improving Health Care Quality Expenses					Claims Adjustment Expenses		NAIC Company Code		
	All Expenses	1	2	3	4	5	6	7	8	9	
		Improve Health Outcomes	Activities to Prevent Hospital Readmissions	Improve Patient Safety and Reduce Medical Errors	Wellness & Health Promotion Activities	HIT Expenses	Total (1 to 5)	Cost Containment Expenses	Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
1.	Individual Comprehensive Coverage Expenses:										
	1.1 Salaries (including \$ for affiliated services)										
	1.2 Outsourced Services										
	1.3 EDP Equipment and Software (incl \$ for affiliated services)										
	1.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	1.5 Accreditation and Certification (incl \$ for affiliated services)		XXX	XXX	XXX	XXX					
	1.6 Other Expenses (incl \$ for affiliated services)										
	1.7 Subtotal before Reimbursements and Taxes (Lines 1.1 to 1.6)										
	1.8 Reimbursements by uninsured plans and fiscal intermediaries										
	1.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	1.10 Total (1.7 to 1.9)										
	1.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										
2.	Small Group Comprehensive Coverage Expenses:										
	2.1 Salaries (including \$ for affiliated services)										
	2.2 Outsourced Services										
	2.3 EDP Equipment and Software (incl \$ for affiliated services)										
	2.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	2.5 Accreditation and Certification (incl \$ for affiliated services)										
	2.6 Other Expenses (incl \$ for affiliated services)										
	2.7 Subtotal before Reimbursements and Taxes (Lines 2.1 to 2.6)										
	2.8 Reimbursements by uninsured plans and fiscal intermediaries										
	2.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	2.10 Total (2.7 to 2.9)										
	2.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										
3.	Large Group Comprehensive Coverage Expenses:										
	3.1 Salaries (including \$ for affiliated services)										
	3.2 Outsourced Services										
	3.3 EDP Equipment and Software (incl \$ for affiliated services)										
	3.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	3.5 Accreditation and Certification (incl \$ for affiliated services)		XXX	XXX	XXX	XXX					
	3.6 Other Expenses (incl \$ for affiliated services)										
	3.7 Subtotal before Reimbursements and Taxes (Lines 3.1 to 3.6)										
	3.8 Reimbursements by uninsured plans and fiscal intermediaries										
	3.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	3.10 Total (3.7 to 3.9)										
	3.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										

NONE

216-4

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3 (Continued)

	All Expenses	Improving Health Care Quality Expenses					6 Total (1 to 5)	Claims Adjustment Expenses		9 General Administrative Expenses	10 Total Expenses (6 to 9)
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses		7 Cost Containment Expenses	8 Other Claims Adjustment Expenses		
4.	Individual Mini-Med Plans Expenses:										
	4.1 Salaries (including \$ for affiliated services)										
	4.2 Outsourced Services										
	4.3 EDP Equipment and Software (incl \$ for affiliated services)										
	4.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	4.5 Accreditation and Certification (incl \$ for affiliated services)		XXX	XXX	XXX	XXX					
	4.6 Other Expenses (incl \$ for affiliated services)										
	4.7 Subtotal before Reimbursements and Taxes (Lines 4.1 to 4.6)										
	4.8 Reimbursements by uninsured plans and fiscal intermediaries										
	4.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	4.10 Total (4.7 to 4.9)										
	4.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										
5.	Small Group Mini-Med Plans Expenses:										
	5.1 Salaries (including \$ for affiliated services)										
	5.2 Outsourced Services										
	5.3 EDP Equipment and Software (incl \$ for affiliated services)										
	5.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	5.5 Accreditation and Certification (incl \$ for affiliated services)		X	X		XXX					
	5.6 Other Expenses (incl \$ for affiliated services)										
	5.7 Subtotal before Reimbursements and Taxes (Lines 5.1 to 5.6)										
	5.8 Reimbursements by uninsured plans and fiscal intermediaries										
	5.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	5.10 Total (5.7 to 5.9)										
	5.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										
6.	Large Group Mini-Med Plans Expenses:										
	6.1 Salaries (including \$ for affiliated services)										
	6.2 Outsourced Services										
	6.3 EDP Equipment and Software (incl \$ for affiliated services)										
	6.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	6.5 Accreditation and Certification (incl \$ for affiliated services)		XXX	XXX	XXX	XXX					
	6.6 Other Expenses (incl \$ for affiliated services)										
	6.7 Subtotal before Reimbursements and Taxes (Lines 6.1 to 6.6)										
	6.8 Reimbursements by uninsured plans and fiscal intermediaries										
	6.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	6.10 Total (6.7 to 6.9)										
	6.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										

NONE

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3 (Continued)

	All Expenses	Improving Health Care Quality Expenses					6 Total (1 to 5)	Claims Adjustment Expenses		9 General Administrative Expenses	10 Total Expenses (6 to 9)
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses		7 Cost Containment Expenses	8 Other Claims Adjustment Expenses		
7.	Small Group Expatriate Plans Expenses:										
	7.1 Salaries (including \$ for affiliated services)										
	7.2 Outsourced Services										
	7.3 EDP Equipment and Software (incl \$ for affiliated services)										
	7.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	7.5 Accreditation and Certification (incl \$ for affiliated services)		XXX	XXX	XXX	XXX					
	7.6 Other Expenses (incl \$ for affiliated services)										
	7.7 Subtotal before Reimbursements and Taxes (Lines 7.1 to 7.6)										
	7.8 Reimbursements by uninsured plans and fiscal intermediaries										
	7.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	7.10 Total (7.7 to 7.9)										
	7.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										
8.	Large Group Expatriate Plans Expenses:										
	8.1 Salaries (including \$ for affiliated services)										
	8.2 Outsourced Services										
	8.3 EDP Equipment and Software (incl \$ for affiliated services)										
	8.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	8.5 Accreditation and Certification (incl \$ for affiliated services)		X	X		XXX					
	8.6 Other Expenses (incl \$ for affiliated services)										
	8.7 Subtotal before Reimbursements and Taxes (Lines 8.1 to 8.6)										
	8.8 Reimbursements by uninsured plans and fiscal intermediaries										
	8.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	8.10 Total (8.7 to 8.9)										
	8.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										
9.	Student Health Plans Expenses:										
	9.1 Salaries (including \$ for affiliated services)										
	9.2 Outsourced Services										
	9.3 EDP Equipment and Software (incl \$ for affiliated services)										
	9.4 Other Equipment (excl. EDP) (incl \$ for affiliated services)										
	9.5 Accreditation and Certification (incl \$ for affiliated services)		XXX	XXX	XXX	XXX					
	9.6 Other Expenses (incl \$ for affiliated services)										
	9.7 Subtotal before Reimbursements and Taxes (Lines 9.1 to 9.6)										
	9.8 Reimbursements by uninsured plans and fiscal intermediaries										
	9.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
	9.10 Total (9.7 to 9.9)										
	9.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)										

NONE

Supplemental Health Care Exhibit's Expense Allocation Report - Description of Allocation Methodology

N O N E

Supplemental Health Care Exhibit's Expense Allocation Report - Desc of Quality Improvement Expenses

N O N E

Financial Guaranty Insurance Exhibit

N O N E

Financial Guaranty Insurance Exhibit - Part 1

N O N E

Financial Guaranty Insurance Exhibit - Part 2

N O N E

Financial Guaranty Insurance Exhibit Part 3A

N O N E

Financial Guaranty Insurance Exhibit Part 3B

N O N E

Financial Guaranty Insurance Exhibit Part 3C

N O N E

Financial Guaranty Insurance Exhibit Part 3D

N O N E

Financial Guaranty Insurance Exhibit Part 3E

N O N E

Financial Guaranty Insurance Exhibit Part 3F

N O N E

Financial Guaranty Insurance Exhibit Part 4A

N O N E

Financial Guaranty Insurance Exhibit Part 4B

N O N E

Financial Guaranty Insurance Exhibit Part 4C

N O N E

Financial Guaranty Insurance Exhibit Part 4D

N O N E

Financial Guaranty Insurance Exhibit Part 4E

N O N E

Financial Guaranty Insurance Exhibit Part 4F

N O N E

Financial Guaranty Insurance Exhibit Part 4G

N O N E

Financial Guaranty Insurance Exhibit Part 4H

N O N E

Financial Guaranty Insurance Exhibit Part 4I

N O N E

Financial Guaranty Insurance Exhibit - Part 5A

N O N E

Financial Guaranty Insurance Exhibit - Part 5B

N O N E

Financial Guaranty Insurance Exhibit - Part 5C

N O N E

Financial Guaranty Insurance Exhibit - Part 6A

N O N E

Financial Guaranty Insurance Exhibit - Part 6B

N O N E

Financial Guaranty Insurance Exhibit - Part 6C

N O N E

Financial Guaranty Insurance Exhibit - Part 7 (\$000) Omitted

N O N E



INSURANCE EXPENSE EXHIBIT

FOR THE YEAR ENDED DECEMBER 31, 2022

(To Be Filed by April 1)

Of The (Name) Forward Mutual Insurance Company

ADDRESS (City, State and Zip Code) Ixonia , WI 53036

NAIC Group Code 0000 NAIC Company Code 11387 Employer's Identification Number (FEIN) 39-0959933

Contact Person Sarah Mueller Title President/CEO Telephone 920-261-6616

INTERROGATORIES

1. Indicate amounts received from securities subject to proration for federal tax purposes. Report amounts in whole dollars only:

1.1 Amount included on Exhibit of Net Investment Income, Line 1.1, Column 2	\$
1.2 Amount included on Exhibit of Net Investment Income, Line 2.1, Column 2	\$
1.3 Amount included on Exhibit of Net Investment Income, Line 2.11, Column 2	\$
1.4 Amount included on Exhibit of Net Investment Income, Line 2.2, Column 2	\$
1.5 Amount included on Exhibit of Net Investment Income, Line 2.21, Column 2	\$

2. Indicate amounts shown in the Annual Statement for the following items. Report amounts in whole dollars only:

2.1 Net Investment Income, Page 4, Line 9, Column 1	\$ 130,130
2.2 Net Realized Capital Gain or (Loss), Page 4, Line 10, Column 1	\$ 132,071

- 3.1 The information provided in the Insurance Expense Exhibit will be used by many persons to estimate the allocation of expenses and profit to the various lines of business. Are there any items requiring special comment or explanation? Yes [] No []
- 3.2 Are items allocated to lines of business in Parts II and III using methods not defined in the instructions? Yes [] No []
 Statement may be attached.
- 3.3 If yes, explain:

INSURANCE EXPENSE EXHIBIT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

PART I - ALLOCATION TO EXPENSE GROUPS

(\$000 OMITTED)

Operating Expense Classifications	1 Loss Adjustment Expense	Other Underwriting Expenses			5 Investment Expenses	6 Total Expenses
		2 Acquisition, Field Supervision and Collection Expenses	3 General Expenses	4 Taxes, Licenses and Fees		
1. Claim adjustment services:						
1.1 Direct	26				0	26
1.2 Reinsurance assumed	0				0	0
1.3 Reinsurance ceded	0				0	0
1.4 Net claim adjustment services (Lines 1.1+1.2-1.3)	26	0	0	0	0	26
2. Commission and brokerage:						
2.1 Direct excluding contingent	0	236			0	236
2.2 Reinsurance assumed excluding contingent	0	0			0	0
2.3 Reinsurance ceded excluding contingent	0	105			0	105
2.4 Contingent - direct	0	4			0	4
2.5 Contingent - reinsurance assumed	0	0			0	0
2.6 Contingent - reinsurance ceded	0	0			0	0
2.7 Policy and membership fees	0	0			0	0
2.8 Net commission and brokerage (Lines 2.1+2.2-2.3+2.4+2.5-2.6+2.7)	0	136	0	0	0	136
3. Allowances to managers and agents	0				0	0
4. Advertising	1		5		1	6
5. Boards, bureaus and associations	0		17		0	17
6. Surveys and underwriting reports	0		6		0	6
7. Audit of assureds' records	0		3		0	4
8. Salary related items:						
8.1 Salaries	27		217		27	271
8.2 Payroll taxes	2		16		2	20
9. Employee relations and welfare	3		21		3	26
10. Insurance	2		18		2	22
11. Directors' fees	2		18		2	23
12. Travel and travel items	2		15		2	19
13. Rent and rent items	1		10		1	13
14. Equipment	5		43		5	54
15. Cost or depreciation of EDP equipment and software	0		4		0	5
16. Printing and stationery	0		3		0	4
17. Postage, telephone and telegraph, exchange and express	1		8		1	10
18. Legal and auditing	4		34		4	42
19. Totals (Lines 3 to 18)	52	0	438	0	52	542
20. Taxes, licenses and fees:						
20.1 State and local insurance taxes deducting guaranty association credits of \$	0			3	0	4
20.2 Insurance department licenses and fees	0			9	0	9
20.3 Gross guaranty association assessments	0			0	0	0
20.4 All other (excluding Federal and foreign income and real estate)	0			0	0	0
20.5 Total taxes, licenses and fees (Lines 20.1+20.2+20.3+20.4)	0	0	0	12	0	13
21. Real estate expenses	2			13	2	16
22. Real estate taxes	1			6	1	8
23. Reimbursements by uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX
24. Aggregate write-ins for miscellaneous operating expenses	1	0	12	0	13	26
25. TOTAL EXPENSES INCURRED	82	136	450	31	68	766
DETAILS OF WRITE-INS						
2401. Miscellaneous	1		12		1	14
2402. Investment Expenses					12	12
2403.						
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0	0	0
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above)	1	0	12	0	13	26

INSURANCE EXPENSE EXHIBIT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

PART II - ALLOCATION TO LINES OF BUSINESS NET OF REINSURANCE

PREMIUMS, LOSSES, EXPENSES, RESERVES AND PROFITS AND PERCENTAGES TO PREMIUMS EARNED FOR BUSINESS NET OF REINSURANCE

(\$000 OMITTED)

	Premiums Written (Pg. 8, Pt. 1B, Col. 6)		Premiums Earned (Pg. 6, Pt. 1, Col. 4)		Dividends to Policyholders (Pg. 4, Line 17)		Incurred Loss (Pg. 9, Pt. 2, Col. 7)		Loss Adjustment Expense				Unpaid Losses (Pg. 10, Pt. 2A, Col. 8)		Loss Adjustment Expense				Unearned Premium Reserves (Pg. 7, Pt. 1A, Col. 5)		Agents' Balances			
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	Defense and Cost Containment Expenses Incurred		Adjusting and Other Expenses Incurred		13 Amount	14 %	Defense and Cost Containment Expenses Unpaid		Adjusting and Other Expenses Unpaid		19 Amount	20 %	21 Amount	22 %		
									9 Amount	10 %	11 Amount	12 %			15 Amount	16 %	17 Amount	18 %						
1. Fire	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.1 Allied Lines	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.2 Multiple Peril Crop	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.3 Federal Flood	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.4 Private Crop	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.5 Private Flood	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
3. Farmowners Multiple Peril	620	XXX	586	100.0	0	0.0	161	27.5	0	0.0	44	7.5	16	2.7	0	0.0	2	0.3	389	66.3	(14)	(2.3)		
4. Homeowners Multiple Peril	499	XXX	513	100.0	0	0.0	486	94.8	0	0.0	35	6.8	44	8.6	0	0.0	1	0.2	306	59.5	(11)	(2.1)		
5.1 Comm Mult Peril (Non-Liab)	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5.2 Comm Mult Peril (Liab)	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Mortgage Guaranty	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
8. Ocean Marine	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9. Inland Marine	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
10. Financial Guaranty	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.1 Med Prof Liab - Occurrence	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.2 Med Prof Liab - Claims-Made	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Earthquake	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.1 Comprehensive Individual	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.2 Comprehensive Group	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Credit A&H	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.1 Vision Only	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.2 Dental Only	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.3 Disability Income	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.4 Medicare Supplement	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.5 Medicaid Title XIX	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.6 Medicare Title XVIII	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.7 Long-Term Care	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.8 FEHBP	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.9 Other Health	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
16. Workers' Compensation	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.1 Other Liability - Occurrence	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.2 Other Liability - Claims-Made	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.3 Excess Workers' Compensation	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18.1 Products Liab - Occurrence	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18.2 Products Liab - Claims-Made	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.1 Priv Passenger Auto No-Fault	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.2 Other Priv Passenger Auto Liab	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.3 Commercial Auto No-Fault	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.4 Other Commercial Auto Liability	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
21.1 Priv Passenger Auto Phys Damage	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
21.2 Commercial Auto Phys Damage	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
22. Aircraft (all perils)	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
23. Fidelity	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
24. Surety	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
26. Burglary and Theft	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
27. Boiler and Machinery	(2)	XXX	(2)	100.0	0	0.0	0	0.0	0	0.0	2	(86.2)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	(3)	108.0
28. Credit	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
29. International	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
30. Warranty	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
31. Reins-Nonproportional Assumed Property	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
32. Reins-Nonproportional Assumed Liab	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
33. Reins-Nonproportional Assumed Fin Lines	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
34. Aggr Write-Ins for Other Lines of Bus	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
35. TOTAL (Lines 1 through 34)	1,117	XXX	1,097	100.0	0	0.0	648	59.0	0	0.0	81	7.4	60	5.5	0	0.0	3	0.3	695	63.3	(27)	(2.5)		

INSURANCE EXPENSE EXHIBIT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

PART II - ALLOCATION TO LINES OF BUSINESS NET OF REINSURANCE (Continued)

PREMIUMS, LOSSES, EXPENSES, RESERVES AND PROFITS AND PERCENTAGES TO PREMIUMS EARNED FOR BUSINESS NET OF REINSURANCE

(\$000 OMITTED)

	Other Underwriting Expenses																		Total Profit or Loss	
	Commission and Brokerage Expenses Incurred (IEE Pt. 1, Line 2.8, Col. 2)		Taxes, Licenses & Fees Incurred (IEE Pt. 1, Line 20.5, Col. 4)		Other Acquisitions, Field Supervision, and Collection Expenses Incurred (IEE Pt. 1, Line 25 minus 2.8 Col. 2)		General Expenses Incurred (IEE Pt. 1, Line 25, Col. 3)		Other Income Less Other Expenses (Pg. 4, Line 15 minus Line 5)		Pre-Tax Profit or Loss Excluding All Investment Gain		Investment Gain on Funds Attributable to Insurance Transactions		Profit or Loss Excluding Investment Gain Attributable to Capital and Surplus		Investment Gain Attributable to Capital and Surplus			
	23 Amount	24 %	25 Amount	26 %	27 Amount	28 %	29 Amount	30 %	31 Amount	32 %	33 Amount	34 %	35 Amount	36 %	37 Amount	38 %	39 Amount	40 %		41 Amount	42 %
1. Fire	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2.1 Allied Lines	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2.2 Multiple Peril Crop	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2.3 Federal Flood	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2.4 Private Crop	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
2.5 Private Flood	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
3. Farmowners Multiple Peril	74	12.6	7	1.2	16	2.7	244	41.6	16	2.7	72	12.3	9	1.5	81	13.7	130	22.2	211	35.9
4. Homeowners Multiple Peril	59	11.5	6	1.2	13	2.5	195	38.0	13	2.5	(255)	(49.7)	8	1.6	(247)	(48.1)	116	22.5	(131)	(25.6)
5.1 Comm Mult Peril (Non-Liab)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
5.2 Comm Mult Peril (Liab)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
6. Mortgage Guaranty	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
8. Ocean Marine	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
9. Inland Marine	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
10. Financial Guaranty	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
11.1 Med Prof Liab - Occurrence	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
11.2 Med Prof Liab - Claims-Made	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
12. Earthquake	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
13.1 Comprehensive Individual	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
13.2 Comprehensive Group	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
14. Credit A&H	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.1 Vision Only	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.2 Dental Only	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.3 Disability Income	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.4 Medicare Supplement	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.5 Medicaid Title XIX	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.6 Medicare Title XVIII	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.7 Long-Term Care	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.8 FEHBP	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
15.9 Other Health	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
16. Workers' Compensation	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
17.1 Other Liability - Occurrence	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
17.2 Other Liability - Claims-Made	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
17.3 Excess Workers' Compensation	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
18.1 Products Liab - Occurrence	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
18.2 Products Liab - Claims-Made	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
19.1 Priv Passenger Auto No-Fault	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
19.2 Other Priv Passenger Auto Liab	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
19.3 Commercial Auto No-Fault	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
19.4 Other Commercial Auto Liability	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
21.1 Priv Passenger Auto Phys Damage	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
21.2 Commercial Auto Phys Damage	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
22. Aircraft (all perils)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
23. Fidelity	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
24. Surety	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
26. Burglary and Theft	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
27. Boiler and Machinery	3	(129.4)	0.0	0.0	11	(474.3)	0.0	1	(43.1)	(17)	746.8	0.0	0.0	(17)	743.5	0.0	0.0	(18)	756.4	0.0
28. Credit	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
29. International	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
30. Warranty	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
31. Reins-Nonproportional Assumed Property	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
32. Reins-Nonproportional Assumed Liab	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
33. Reins-Nonproportional Assumed Fin Lines	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
34. Aggr Write-Ins for Other Lines of Bus	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
35. TOTAL (Lines 1 through 34)	136	12.4	13	1.2	0	0.0	450	41.0	30	2.7	(200)	(18.3)	17	1.5	(184)	(16.7)	245	22.4	62	5.6
DETAILS OF WRITE-INS																				
3401.																				
3402.																				
3403.																				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) ..																				

INSURANCE EXPENSE EXHIBIT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

PART III - ALLOCATION TO LINES OF DIRECT BUSINESS WRITTEN

PREMIUMS, LOSSES, EXPENSES, RESERVES AND PROFITS, AND PERCENTAGES TO PREMIUMS EARNED FOR DIRECT BUSINESS WRITTEN

(\$000 OMITTED)

	Premiums Written Pg. 8, Pt. 1B, Col. 1		Premiums Earned Sch. T, Line 59, Col. 3		Dividends to Policyholders		Incurred Loss (Sch. T, Line 59, Col. 6)		Loss Adjustment Expense				Unpaid Losses (Sch. T, Line 59, Col. 7)		Loss Adjustment Expense				Unearned Premium Reserves		Agents' Balances			
	1	2	3	4	5	6	7	8	Defense and Cost Containment Expenses Incurred		Adjusting and Other Expenses Incurred		13	14	Defense and Cost Containment Expenses Unpaid		Adjusting and Other Expenses Unpaid		19	20	21	22		
	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%
1. Fire	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.1 Allied Lines	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.2 Multiple Peril Crop	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.3 Federal Flood	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.4 Private Crop	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.5 Private Flood	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
3. Farmowners Multiple Peril	857	XXX	821	100.0	0	0.0	115	14.0	0	0.0	0	0.0	30	3.6	0	0.0	0	0.0	435	53.0	0	0.0	0	0.0
4. Homeowners Multiple Peril	685	XXX	703	100.0	0	0.0	933	132.7	0	0.0	0	0.0	631	89.7	0	0.0	0	0.0	342	48.6	0	0.0	0	0.0
5.1 Comm Mult Peril (Non-Liab)	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5.2 Comm Mult Peril (Liab)	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Mortgage Guaranty	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
8. Ocean Marine	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9. Inland Marine	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
10. Financial Guaranty	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.1 Med Prof Liab - Occurrence	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.2 Med Prof Liab - Claims-Made	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Earthquake	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.1 Comprehensive Individual	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.2 Comprehensive Group	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Credit A&H	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.1 Vision Only	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.2 Dental Only	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.3 Disability Income	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.4 Medicare Supplement	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.5 Medicaid Title XIX	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.6 Medicare Title XVIII	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.7 Long-Term Care	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.8 FEHBP	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.9 Other Health	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
16. Workers' Compensation	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.1 Other Liability - Occurrence	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.2 Other Liability - Claims-Made	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.3 Excess Workers' Compensation	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18.1 Products Liab - Occurrence	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18.2 Products Liab - Claims-Made	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.1 Priv Passenger Auto No-Fault	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.2 Other Priv Passenger Auto Liab	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.3 Commercial Auto No-Fault	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.4 Other Commercial Auto Liability	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
21.1 Priv Passenger Auto Phys Damage	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
21.2 Commercial Auto Phys Damage	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
22. Aircraft (all perils)	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
23. Fidelity	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
24. Surety	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
26. Burglary and Theft	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
27. Boiler and Machinery	41	XXX	42	100.0	0	0.0	6	14.7	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	21	50.0	0	0.0	0	0.0
28. Credit	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
29. International	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
30. Warranty	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
31. Reins-Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins-Nonproportional Assumed Liab	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins-Nonproportional Assumed Fin Lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggr Write-Ins for Other Lines of Bus	0	XXX	0	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
35. TOTAL (Lines 1 through 34)	1,582	XXX	1,566	100.0	0	0.0	1,054	67.3	0	0.0	0	0.0	661	42.2	0	0.0	0	0.0	798	51.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																								

INSURANCE EXPENSE EXHIBIT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company
PART III - ALLOCATION TO LINES OF DIRECT BUSINESS WRITTEN (Continued)
 PREMIUMS, LOSSES, EXPENSES, RESERVES AND PROFITS, AND PERCENTAGES TO PREMIUMS EARNED FOR DIRECT BUSINESS WRITTEN
 (\$000 OMITTED)

	Other Underwriting Expenses								Other Income Less Other Expenses		Pre-Tax Profit or Loss Excluding All Investment	
	Commission and Brokerage Expenses Incurred		Taxes, Licenses & Fees Incurred		Other Acquisitions, Field Supervision, and Collection Expenses Incurred		General Expenses Incurred					
	23 Amount	24 %	25 Amount	26 %	27 Amount	28 %	29 Amount	30 %	31 Amount	32 %	33 Amount	34 %
1. Fire	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.1 Allied Lines	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.2 Multiple Peril Crop	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.3 Federal Flood	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.4 Private Crop	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2.5 Private Flood	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
3. Farmowners Multiple Peril	130	15.9	6	0.7	0	0.0	0	0.0	0	0.0	571	69.5
4. Homeowners Multiple Peril	104	14.8	5	0.7	0	0.0	0	0.0	0	0.0	(339)	(48.1)
5.1 Comm Mult Peril (Non-Liab)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5.2 Comm Mult Peril (Liab)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Mortgage Guaranty	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
8. Ocean Marine	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9. Inland Marine	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
10. Financial Guaranty	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.1 Med Prof Liab - Occurrence	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.2 Med Prof Liab - Claims-Made	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Earthquake	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.1 Comprehensive Individual	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.2 Comprehensive Group	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Credit A&H	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.1 Vision Only	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.2 Dental Only	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.3 Disability Income	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.4 Medicare Supplement	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.5 Medicaid Title XIX	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.6 Medicare Title XVIII	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.7 Long-Term Care	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.8 FEHBP	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15.9 Other Health	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
16. Workers' Compensation	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.1 Other Liability - Occurrence	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.2 Other Liability - Claims-Made	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
17.3 Excess Workers' Compensation	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18.1 Products Liab - Occurrence	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18.2 Products Liab - Claims-Made	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.1 Priv Passenger Auto No-Fault	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.2 Other Priv Passenger Auto Liab	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.3 Commercial Auto No-Fault	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
19.4 Other Commercial Auto Liability	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
21.1 Priv Passenger Auto Phys Damage	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
21.2 Commercial Auto Phys Damage	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
22. Aircraft (all perils)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
23. Fidelity	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
24. Surety	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
26. Burglary and Theft	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
27. Boiler and Machinery	6	14.8	0	0.0	0	0.0	0	0.0	0	0.0	29	69.8
28. Credit	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
29. International	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
30. Warranty	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
31. Reins-Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins-Nonproportional Assumed Liab	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins-Nonproportional Assumed Fin Lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggr Write-Ins for Other Lines of Bus	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
35. TOTAL (Lines 1 through 34)	241	15.4	11	0.7	0	0.0	0	0.0	0	0.0	261	16.7
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0



SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES

For The Year Ended December 31, 2022
(To Be Filed by April 1)

Of The Forward Mutual Insurance Company.....
ADDRESS (City, State and Zip Code) Ixonia , WI 53036
NAIC Group Code 0000 NAIC Company Code 11387 Federal Employer's Identification Number (FEIN) 39-0959933

The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Audited Statutory Financial Statements.

Answer the following interrogatories by reporting the applicable U.S. dollar amounts and percentages of the reporting entity's total admitted assets held in that category of investments.

1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement.\$ 8,428,773

2. Ten largest exposures to a single issuer/borrower/investment.

	1	2	3	4
	Issuer	Description of Exposure	Amount	Percentage of Total Admitted Assets
2.01	WRC Common Stock	Stock	\$767,639	..... 9.1 %
2.02	PRINCIPAL FDS INC SC BLD FD MIDCAP BLEND	Mutual Fund	\$ 196,099	..... 2.3 %
2.03	JP MORGAN LARGE CAP GROWTH FUND-I ...	Mutual Fund	\$ 185,683	..... 2.2 %
2.04	AMERICAN WASH CL F-2 SHS	Mutual Fund	\$174,432	..... 2.1 %
2.05	PA CENTER-WEST JT SWR AUTH	Bond	\$ 123,192	..... 1.5 %
2.06	MN ST LOUIS PARK INDPT SCH	Bond	\$ 118,026	..... 1.4 %
2.07	WI OSHKOSH STORM WTR UTIL REV	Bond	\$ 117,624	..... 1.4 %
2.08	IN FORT WAYNE IND CMNTY SCH BLDG ...	Bond	\$ 114,206	..... 1.4 %
2.09	NEUBERGER BERMAN EQUITY SER GENESIS INSTL FD	Mutual Fund	\$ 113,060	..... 1.3 %
2.10	WI ANTIGO WTRWKS SYS & SEWER	Bond	\$ 105,871	..... 1.3 %

3. Amounts and percentages of the reporting entity's total admitted assets held in bonds and preferred stocks by NAIC designation.

	Bonds		Preferred Stocks	
	1	2	3	4
3.01	NAIC 1 \$4,910,539	.....58.3 %	3.07	NAIC 1 \$ 0.0 %
3.02	NAIC 2 \$0	..... 0.0 %	3.08	NAIC 2 \$ 0.0 %
3.03	NAIC 3 \$0	..... 0.0 %	3.09	NAIC 3 \$ 0.0 %
3.04	NAIC 4 \$0	..... 0.0 %	3.10	NAIC 4 \$ 0.0 %
3.05	NAIC 5 \$0	..... 0.0 %	3.11	NAIC 5 \$ 0.0 %
3.06	NAIC 6 \$0	..... 0.0 %	3.12	NAIC 6 \$ 0.0 %

4. Assets held in foreign investments:

4.01 Are assets held in foreign investments less than 2.5% of the reporting entity's total admitted assets? Yes [X] No []

If response to 4.01 above is yes, responses are not required for interrogatories 5 - 10.

4.02 Total admitted assets held in foreign investments..... \$ 0.0 %

4.03 Foreign-currency-denominated investments \$ 0.0 %

4.04 Insurance liabilities denominated in that same foreign currency \$ 0.0 %

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

5. Aggregate foreign investment exposure categorized by NAIC sovereign designation:

	1	2
5.01 Countries designated NAIC-1	\$	0.0 %
5.02 Countries designated NAIC-2	\$	0.0 %
5.03 Countries designated NAIC-3 or below	\$	0.0 %

6. Largest foreign investment exposures by country, categorized by the country's NAIC sovereign designation:

	1	2
Countries designated NAIC - 1:		
6.01 Country 1:	\$	0.0 %
6.02 Country 2:	\$	0.0 %
Countries designated NAIC - 2:		
6.03 Country 1:	\$	0.0 %
6.04 Country 2:	\$	0.0 %
Countries designated NAIC - 3 or below:		
6.05 Country 1:	\$	0.0 %
6.06 Country 2:	\$	0.0 %

	1	2
7. Aggregate unhedged foreign currency exposure	\$	0.0 %

8. Aggregate unhedged foreign currency exposure categorized by NAIC sovereign designation:

	1	2
8.01 Countries designated NAIC-1	\$	0.0 %
8.02 Countries designated NAIC-2	\$	0.0 %
8.03 Countries designated NAIC-3 or below	\$	0.0 %

9. Largest unhedged foreign currency exposures by country, categorized by the country's NAIC sovereign designation:

	1	2
Countries designated NAIC - 1:		
9.01 Country 1:	\$	0.0 %
9.02 Country 2:	\$	0.0 %
Countries designated NAIC - 2:		
9.03 Country 1:	\$	0.0 %
9.04 Country 2:	\$	0.0 %
Countries designated NAIC - 3 or below:		
9.05 Country 1:	\$	0.0 %
9.06 Country 2:	\$	0.0 %

10. Ten largest non-sovereign (i.e. non-governmental) foreign issues:

	1 Issuer	2 NAIC Designation	3	4
10.01			\$	0.0 %
10.02			\$	0.0 %
10.03			\$	0.0 %
10.04			\$	0.0 %
10.05			\$	0.0 %
10.06			\$	0.0 %
10.07			\$	0.0 %
10.08			\$	0.0 %
10.09			\$	0.0 %
10.10			\$	0.0 %

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

11. Amounts and percentages of the reporting entity's total admitted assets held in Canadian investments and unhedged Canadian currency exposure:

11.01	Are assets held in Canadian investments less than 2.5% of the reporting entity's total admitted assets?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If response to 11.01 is yes, detail is not required for the remainder of interrogatory 11.					
		1		2	
11.02	Total admitted assets held in Canadian investments .....	\$	.....	.....	0.0 %
11.03	Canadian-currency-denominated investments .....	\$	.....	.....	0.0 %
11.04	Canadian-denominated insurance liabilities .....	\$	.....	.....	0.0 %
11.05	Unhedged Canadian currency exposure .....	\$	.....	.....	0.0 %

12. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments with contractual sales restrictions:

12.01	Are assets held in investments with contractual sales restrictions less than 2.5% of the reporting entity's total admitted assets?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If response to 12.01 is yes, responses are not required for the remainder of Interrogatory 12.					
		1		2	3
12.02	Aggregate statement value of investments with contractual sales restrictions .....	\$	.....	.....	0.0 %
Largest three investments with contractual sales restrictions:					
12.03	.....	\$	.....	.....	0.0 %
12.04	.....	\$	.....	.....	0.0 %
12.05	.....	\$	.....	.....	0.0 %

13. Amounts and percentages of admitted assets held in the ten largest equity interests:

13.01	Are assets held in equity interests less than 2.5% of the reporting entity's total admitted assets?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If response to 13.01 above is yes, responses are not required for the remainder of Interrogatory 13.					
		1		2	3
		Issuer			
13.02	WRC Common Stock .....	\$	.....767,639	.....	9.1 %
13.03	PRINCIPAL FDS INC SC BLD FD MIDCAP BLEND .....	\$	.....196,099	.....	2.3 %
13.04	JP MORGAN LARGE CAP GROWTH FUND-I .....	\$	.....185,683	.....	2.2 %
13.05	AMERICAN WASH CL F-2 SHS .....	\$	.....174,432	.....	2.1 %
13.06	NEUBERGER BERMAN EQUITY SER GENESIS INSTL FD .....	\$	.....113,060	.....	1.3 %
13.07	DAVIS GLOBAL FUND - Y .....	\$	.....99,971	.....	1.2 %
13.08	ISHARES TR RUSSELL 1000 VALUE E ETF .....	\$	.....98,573	.....	1.2 %
13.09	EUROPACIFIC GROWTH FD AMERICAN .....	\$	.....62,913	.....	0.7 %
13.10	ISHARES TR RUSSELL 1000 GROWTH .....	\$	.....46,062	.....	0.5 %
13.11	NEXTERA ENERGY INC .....	\$	.....40,128	.....	0.5 %

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

14. Amounts and percentages of the reporting entity's total admitted assets held in nonaffiliated, privately placed equities:

14.01 Are assets held in nonaffiliated, privately placed equities less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 14.01 above is yes, responses are not required for 14.02 through 14.05.

	<u>1</u>	<u>2</u>	<u>3</u>
14.02 Aggregate statement value of investments held in nonaffiliated, privately placed equities	\$ 0.0 %
Largest three investments held in nonaffiliated, privately placed equities:			
14.03 Wisconsin Reinsurance Corporation	\$	767,639	..... 9.1 %
14.04 NAMICO	\$	22,864	..... 0.3 %
14.05	\$ 0.0 %

Ten largest fund managers:

	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
	<u>Fund Manager</u>	<u>Total Invested</u>	<u>Diversified</u>	<u>Nondiversified</u>
14.06	\$ 0	\$	\$
14.07	\$ 0	\$	\$
14.08	\$ 0	\$	\$
14.09	\$ 0	\$	\$
14.10	\$ 0	\$	\$
14.11	\$ 0	\$	\$
14.12	\$ 0	\$	\$
14.13	\$ 0	\$	\$
14.14	\$ 0	\$	\$
14.15	\$ 0	\$	\$

15. Amounts and percentages of the reporting entity's total admitted assets held in general partnership interests:

15.01 Are assets held in general partnership interests less than 2.5% of the reporting entity's total admitted assets? Yes [X] No []

If response to 15.01 above is yes, responses are not required for the remainder of Interrogatory 15.

	<u>1</u>	<u>2</u>	<u>3</u>
15.02 Aggregate statement value of investments held in general partnership interests	\$ 0.0 %
Largest three investments in general partnership interests:			
15.03	\$ 0.0 %
15.04	\$ 0.0 %
15.05	\$ 0.0 %

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

16. Amounts and percentages of the reporting entity's total admitted assets held in mortgage loans:

16.01 Are mortgage loans reported in Schedule B less than 2.5% of the reporting entity's total admitted assets? Yes [X] No []

If response to 16.01 above is yes, responses are not required for the remainder of Interrogatory 16 and Interrogatory 17.

	1	2	3
	Type (Residential, Commercial, Agricultural)		
16.02		\$	0.0 %
16.03		\$	0.0 %
16.04		\$	0.0 %
16.05		\$	0.0 %
16.06		\$	0.0 %
16.07		\$	0.0 %
16.08		\$	0.0 %
16.09		\$	0.0 %
16.10		\$	0.0 %
16.11		\$	0.0 %

Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

		Loans	
16.12	Construction loans	\$	0.0 %
16.13	Mortgage loans over 90 days past due	\$	0.0 %
16.14	Mortgage loans in the process of foreclosure	\$	0.0 %
16.15	Mortgage loans foreclosed	\$	0.0 %
16.16	Restructured mortgage loans	\$	0.0 %

17. Aggregate mortgage loans having the following loan-to-value ratios as determined from the most current appraisal as of the annual statement date:

Loan to Value	Residential		Commercial		Agricultural	
	1	2	3	4	5	6
17.01 above 95%.....	\$	0.0 %	\$	0.0 %	\$	0.0 %
17.02 91 to 95%.....	\$	0.0 %	\$	0.0 %	\$	0.0 %
17.03 81 to 90%.....	\$	0.0 %	\$	0.0 %	\$	0.0 %
17.04 71 to 80%.....	\$	0.0 %	\$	0.0 %	\$	0.0 %
17.05 below 70%.....	\$	0.0 %	\$	0.0 %	\$	0.0 %

18. Amounts and percentages of the reporting entity's total admitted assets held in each of the five largest investments in real estate:

18.01 Are assets held in real estate reported less than 2.5% of the reporting entity's total admitted assets? Yes [X] No []

If response to 18.01 above is yes, responses are not required for the remainder of Interrogatory 18.

Largest five investments in any one parcel or group of contiguous parcels of real estate.

	1	2	3
	Description		
18.02		\$	0.0 %
18.03		\$	0.0 %
18.04		\$	0.0 %
18.05		\$	0.0 %
18.06		\$	0.0 %

19. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments held in mezzanine real estate loans:

19.01 Are assets held in investments held in mezzanine real estate loans less than 2.5% of the reporting entity's total admitted assets? Yes [X] No []

If response to 19.01 is yes, responses are not required for the remainder of Interrogatory 19.

	1	2	3
19.02	Aggregate statement value of investments held in mezzanine real estate loans:	\$	0.0 %
	Largest three investments held in mezzanine real estate loans:		
19.03		\$	0.0 %
19.04		\$	0.0 %
19.05		\$	0.0 %

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

20. Amounts and percentages of the reporting entity's total admitted assets subject to the following types of agreements:

	At Year End		1st Quarter 3	At End of Each Quarter	
	1	2		2nd Quarter 4	3rd Quarter 5
20.01 Securities lending agreements (do not include assets held as collateral for such transactions) \$		0.0 %	\$	\$	\$
20.02 Repurchase agreements		0.0 %	\$	\$	\$
20.03 Reverse repurchase agreements		0.0 %	\$	\$	\$
20.04 Dollar repurchase agreements		0.0 %	\$	\$	\$
20.05 Dollar reverse repurchase agreements		0.0 %	\$	\$	\$

21. Amounts and percentages of the reporting entity's total admitted assets for warrants not attached to other financial instruments, options, caps, and floors:

	Owned		3	Written	
	1	2		4	5
21.01 Hedging	\$	0.0 %	\$	0.0 %	
21.02 Income generation	\$	0.0 %	\$	0.0 %	
21.03 Other	\$	0.0 %	\$	0.0 %	

22. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for collars, swaps, and forwards:

	At Year End		1st Quarter 3	At End of Each Quarter	
	1	2		2nd Quarter 4	3rd Quarter 5
22.01 Hedging	\$ 0	0.0 %	\$ 0	\$ 0	\$ 0
22.02 Income generation	\$ 0	0.0 %	\$ 0	\$ 0	\$ 0
22.03 Replications	\$ 0	0.0 %	\$ 0	\$ 0	\$ 0
22.04 Other	\$ 0	0.0 %	\$ 0	\$ 0	\$ 0

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

	At Year End		1st Quarter 3	At End of Each Quarter	
	1	2		2nd Quarter 4	3rd Quarter 5
23.01 Hedging	\$ 0	0.0 %	\$ 0	\$ 0	\$ 0
23.02 Income generation	\$	0.0 %	\$	\$	\$
23.03 Replications	\$	0.0 %	\$	\$	\$
23.04 Other	\$	0.0 %	\$	\$	\$

Long-Term Care Experience Reporting Form 1

N O N E

Long-Term Care Experience Reporting Form 2

N O N E

Long-Term Care Experience Reporting Form 3 - Individual - Part 1

N O N E

Long-Term Care Experience Reporting Form 3 - Individual - Part 2

N O N E

Long-Term Care Experience Reporting Form 3 - Individual - Part 3

N O N E

Long-Term Care Experience Reporting Form 3 - Individual - Part 4

N O N E

Long-Term Care Experience Reporting Form 3 - Group - Part 1

N O N E

Long-Term Care Experience Reporting Form 3 - Group - Part 2

N O N E

Long-Term Care Experience Reporting Form 3 - Group - Part 3

N O N E

Long-Term Care Experience Reporting Form 3 - Group - Part 4

N O N E

Long-Term Care Experience Reporting Form 3 - Summary - Part 1

N O N E

Long-Term Care Experience Reporting Form 3 - Summary - Part 2

N O N E

Long-Term Care Experience Reporting Form 3 - Summary - Part 3

N O N E

Long-Term Care Experience Reporting Form 3 - Summary - Part 4

N O N E

Long-Term Care Experience Reporting Form 3 Footnote

N O N E

Long-Term Care Experience Reporting Form 4

N O N E

Medicare Part D Coverage Supplement

NONE

Premiums Attributed to Protected Cells

NONE



REINSURANCE ATTESTATION SUPPLEMENT

ATTESTATION OF CHIEF EXECUTIVE OFFICER AND CHIEF FINANCIAL OFFICER
REGARDING REINSURANCE AGREEMENTS

The Chief Executive Officer and Chief Financial Officer shall attest, under penalties of perjury, with respect to all reinsurance contracts for which the reporting entity is taking credit on its current financial statement, that to the best of their knowledge and belief after diligent inquiry:

- (I) Consistent with SSAP No. 62R, Property and Casualty Reinsurance, there are no separate written or oral agreements between the reporting entity (or its affiliates or companies it controls) and the assuming reinsurer that would under any circumstances, reduce, limit, mitigate or otherwise affect any actual or potential loss to the parties under the reinsurance contract, other than insuring contracts that are explicitly defined in the reinsurance contract except as disclosed herein;
- (II) For each such reinsurance contract entered into, renewed, or amended on or after January 1, 1994, for which risk transfer is not reasonably considered to be self-evident, documentation concerning the economic intent of the transaction and the risk transfer analysis evidencing the proper accounting treatment, as required by SSAP No. 62R, Property and Casualty Reinsurance, is available for review;
- (III) The reporting entity complies with all the requirements set forth in SSAP No. 62R, Property and Casualty Reinsurance; and
- (IV) The reporting entity has appropriate controls in place to monitor the use of reinsurance and adhere to the provisions of SSAP No. 62R, Property and Casualty Reinsurance.

If there are any exception(s), that fact should be noted in the Reinsurance Attestation Supplement filed electronically with the NAIC and in hard copy with the domestic regulator (excluding the details of the exceptions). The details of the exceptions shall be filed in a separate hard copy supplement (Exceptions to the Reinsurance Attestation Supplement) with the domestic regulator.

For reporting period ended December 31, 2022

Signed:

Sarah Mueller
Chief Executive Officer

Date

Chief Financial Officer

Date



NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS

SCHEDULES SIS

STOCKHOLDER INFORMATION SUPPLEMENT

For The Year Ended December 31, 2022

(To Be Filed by March 1)

REQUIRED BY THE APPLICABLE QUESTION ON THE SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES
FOR THE PROPERTY/CASUALTY, LIFE, ACCIDENT AND HEALTH, TITLE AND HEALTH/FRATERNAL,
TITLE AND HEALTH INSURANCE BLANKS

TO THE ANNUAL STATEMENT OF THE

Forward Mutual Insurance Company

COMPANY

Schedule SIS II

NONE

Schedule SIS III

NONE

Schedule SIS IV

NONE

Exhibit B: DISCLOSURES

1
Amount

- 1. Name of the Appointed Actuary Lois A Wiedenhoef
- 2. The Appointed Actuary's relationship to the Company. Enter E or C based upon the following: E
E if an Employee of the Company or Group
C if a Consultant
- 3. The Appointed Actuary's Accepted Actuarial Designation (indicated by the letter code):..... 0
F if a Fellow of the Casualty Actuarial Society (FCAS)
A if an Associate of the Casualty Actuarial Society (ACAS)
S if a Fellow of the Society of Actuaries (FSA) through the General Insurance track
M if the actuary does not have an Accepted Actuarial Designation, but is approved by the Academy's Casualty Practice Council.
O for Other
- 4. Type of Opinion, as identified in the OPINION paragraph. Enter R, I, E, Q, or N based upon the following: R
R if Reasonable
I if Inadequate or Deficient Provision
E if Excessive or Redundant Provision
Q if Qualified. Use Q when part of the OPINION is Qualified.
N if No Opinion
- 5. Materiality Standard expressed in US dollars (Used to Answer Question #6) 700,000
- 6. Are there Significant Risks that could result in Material Adverse Deviation? Yes [] No [X] N/A []
- 7. Statutory Surplus (Liabilities, Surplus and Other Funds page, Col 1, Line 37) 7,541,705
- 8. Anticipated net salvage and subrogation included as a reduction to loss reserves as reported in Schedule P (should equal Part 1 Summary, Col 23, Line 12 * 1000)
- 9. Discount included as a reduction to loss reserves and loss adjustment expense reserves as reported in Schedule P
 - 9.1 Nontabular Discount [Notes, Line 32B23, (Amounts 1, 2, 3 & 4)], Electronic Filing Cols 1, 2, 3, & 4
 - 9.2 Tabular Discount [Notes, Line 32A23, (Amounts 1 & 2)], Electronic Filing Col 1 & 2
- 10. The net reserves for losses and loss adjustment expenses for the Company's share of voluntary and involuntary underwriting pools' and associations' unpaid losses and loss adjustment expenses that are included in reserves shown on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expenses lines.
- 11. The net reserves for losses and loss adjustment expenses that the Company carries for the following liabilities included on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expenses lines. *
 - 11.1 Asbestos, as disclosed in the Notes to Financial Statements (Notes, Line 33A03D, ending net asbestos reserves for current year) Electronic Filing Col 5
 - 11.2 Environmental, as disclosed in the Notes to Financial Statements (Notes, Line 33D03D, ending net environmental reserves for current year), Electronic Filing Col 5
- 12. The total claims made extended loss and loss adjustment expense, and unearned premium reserves (Greater than or equal to Schedule P Interrogatories).
 - 12.1 Amount reported as loss and loss adjustment expense reserves
 - 12.2 Amount reported as unearned premium reserves
- 13. The net reserves for the A&H Long Duration Contracts that the Company carries on the following lines on the Liabilities, Surplus and Other Funds page:
 - 13.1 Losses
 - 13.2 Loss Adjustment Expenses
 - 13.3 Unearned Premium
 - 13.4 Write-In (list separately, adding additional lines as needed, and identify (e.g., "Premium Deficiency Reserves", "Contract Reserves other than Premium Deficiency Reserves" or "AG 51 Reserves"))

* The reserves disclosed in item 11 above, should exclude amounts relating to contracts specifically written to cover asbestos and environmental exposures. Contracts specifically written to cover these exposures include Environmental Impairment Liability (post 1986), Asbestos Abatement, Pollution Legal Liability, Contractor's Pollution Liability, Consultant's Environmental Liability, and Pollution and Remediation Legal Liability.



SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

SUPPLEMENTAL COMPENSATION EXHIBIT

For the Year Ended December 31, 2022

(To be filed by March 1)

PART 1 - INTERROGATORIES

1. Is the reporting insurer a member of a group of insurers or other holding company system? Yes [] No [X]
 If yes, do the amounts below represent 1) total gross compensation earned for each individual by or on behalf of all companies which are part of the group: Yes []; or 2) allocation to each insurer: Yes [].
2. Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statement any commission on the business transactions of the reporting entity? Yes [] No [X]
3. Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commissions whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond the period of 12 months from the date of the agreement? Yes [] No [X]

PART 2 - OFFICERS AND EMPLOYEES COMPENSATION

1 Name and Principal Position	2 Year	3 Salary	4 Bonus	5 Stock Awards	6 Option Awards	7 Sign-on Payments	8 Severance Payments	9 All Other Compensation	10 Totals
Current:									
1. Principal Executive Officer	2022	69,615							69,615
.....	2021	92,123							92,123
.....	2020	89,440							89,440
Current:									
2. Principal Financial Officer	2022								0
.....	2021								0
.....	2020								0
3.	2022								0
.....	2021								0
.....	2020								0
4.	2022								0
.....	2021								0
.....	2020								0
5.	2022								0
.....	2021								0
.....	2020								0
6.	2022								0
.....	2021								0
.....	2020								0
7.	2022								0
.....	2021								0
.....	2020								0
8.	2022								0
.....	2021								0
.....	2020								0
9.	2022								0
.....	2021								0
.....	2020								0
10.	2022								0
.....	2021								0
.....	2020								0

PART 3 - DIRECTOR COMPENSATION

1 Name and Principal Position or Occupation and Company (if Outside Director)	Paid or Deferred for Services as Director				6 All Other Compensation Paid or Deferred	7 Totals
	2 Direct Compensation	3 Stock Awards	4 Option Awards	5 Other		
.....						
.....						
.....						

SUPPLEMENT FOR THE YEAR 2022 OF THE Forward Mutual Insurance Company

PART 4 - NARRATIVE DESCRIPTION OF MATERIAL FACTORS

Provide a narrative description of any material factors necessary to gain an understanding of the information disclosed in the tables.

Trusted Surplus - Cover

N O N E

Trusted Surplus Statement - Assets

N O N E

Trusted Surplus Statement - Liabilities and Trusted Surplus

N O N E

Bail Bonds Supplement

N O N E

Director and Officer Insurance Coverage Supplement

N O N E

Cybersecurity and Identity Theft Insurance Coverage Supplement - Part 1 - Interrogatories

N O N E

Cybersecurity and Identity Theft Insurance Coverage Supplement - Part 2 - Stand Alone Policies

N O N E

Cybersecurity and Identity Theft Insurance Coverage Supplement - Part 3 - Package Policies

N O N E

Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution
Contracts

N O N E

Private Flood Insurance Supplement - Part 1

N O N E

Private Flood Insurance Supplement - Part 2

N O N E

Private Flood Insurance Supplement - Part 3

N O N E

Private Flood Insurance Supplement - Part 4

N O N E

Private Flood Insurance Supplement - Part 5

N O N E

Private Flood Insurance Supplement - Part 6

N O N E

Mortgage Guaranty Insurance Exhibit

N O N E

Mortgage Guaranty Insurance Exhibit - Part 1

N O N E

Mortgage Guaranty Insurance Exhibit - Part 1A

N O N E

Mortgage Guaranty Insurance Exhibit - Part 1B

N O N E

Mortgage Guaranty Insurance Exhibit - Part 2A

N O N E

Mortgage Guaranty Insurance Exhibit - Part 2B

N O N E

Mortgage Guaranty Insurance Exhibit - Part 2C

N O N E

Mortgage Guaranty Insurance Exhibit - Part 2D

N O N E

Mortgage Guaranty Insurance Exhibit - Part 2E

N O N E

Mortgage Guaranty Insurance Exhibit - Part 2F

N O N E

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Assets	2
Cash Flow	5
Exhibit of Capital Gains (Losses)	12
Exhibit of Net Investment Income	12
Exhibit of Nonadmitted Assets	13
Exhibit of Premiums and Losses (State Page)	19
Five-Year Historical Data	17
General Interrogatories	15
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Notes To Financial Statements	14
Overflow Page For Write-ins	101
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	SI02
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	SI02
Schedule BA - Part 1	E07
Schedule BA - Part 2	E08
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	E12
Schedule D - Part 3	E13
Schedule D - Part 4	E14
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI10
Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E19
Schedule DB - Part A - Verification Between Years	SI11
Schedule DB - Part B - Section 1	E20
Schedule DB - Part B - Section 2	E21
Schedule DB - Part B - Verification Between Years	SI11
Schedule DB - Part C - Section 1	SI12
Schedule DB - Part C - Section 2	SI13
Schedule DB - Part D - Section 1	E22
Schedule DB - Part D - Section 2	E23
Schedule DB - Part E	E24
Schedule DB - Verification	SI14
Schedule DL - Part 1	E25
Schedule DL - Part 2	E26
Schedule E - Part 1 - Cash	E27
Schedule E - Part 2 - Cash Equivalents	E28
Schedule E - Part 2 - Verification Between Years	SI15
Schedule E - Part 3 - Special Deposits	E29
Schedule F - Part 1	20
Schedule F - Part 2	21
Schedule F - Part 3	22
Schedule F - Part 4	27
Schedule F - Part 5	28
Schedule F - Part 6	29
Schedule H - Accident and Health Exhibit - Part 1	30
Schedule H - Part 2, Part 3 and 4	31
Schedule H - Part 5 - Health Claims	32

ANNUAL STATEMENT BLANK (Continued)

Schedule P - Part 1 - Summary	33
Schedule P - Part 1A - Homeowners/Farmowners	35
Schedule P - Part 1B - Private Passenger Auto Liability/Medical	36
Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical	37
Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)	38
Schedule P - Part 1E - Commercial Multiple Peril	39
Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence	40
Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made	41
Schedule P - Part 1G - Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler and Machinery)	42
Schedule P - Part 1H - Section 1 - Other Liability-Occurrence	43
Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made	44
Schedule P - Part 1I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	45
Schedule P - Part 1J - Auto Physical Damage	46
Schedule P - Part 1K - Fidelity/Surety	47
Schedule P - Part 1L - Other (Including Credit, Accident and Health)	48
Schedule P - Part 1M - International	49
Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property	50
Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability	51
Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines	52
Schedule P - Part 1R - Section 1 - Products Liability - Occurrence	53
Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made	54
Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty	55
Schedule P - Part 1T - Warranty	56
Schedule P - Part 2, Part 3 and Part 4 - Summary	34
Schedule P - Part 2A - Homeowners/Farmowners	57
Schedule P - Part 2B - Private Passenger Auto Liability/Medical	57
Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical	57
Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)	57
Schedule P - Part 2E - Commercial Multiple Peril	57
Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence	58
Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made	58
Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	58
Schedule P - Part 2H - Section 1 - Other Liability - Occurrence	58
Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made	58
Schedule P - Part 2I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	59
Schedule P - Part 2J - Auto Physical Damage	59
Schedule P - Part 2K - Fidelity, Surety	59
Schedule P - Part 2L - Other (Including Credit, Accident and Health)	59
Schedule P - Part 2M - International	59
Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property	60
Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability	60
Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines	60
Schedule P - Part 2R - Section 1 - Products Liability - Occurrence	61
Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made	61
Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty	61
Schedule P - Part 2T - Warranty	61
Schedule P - Part 3A - Homeowners/Farmowners	62
Schedule P - Part 3B - Private Passenger Auto Liability/Medical	62
Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical	62
Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)	62
Schedule P - Part 3E - Commercial Multiple Peril	62
Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence	63
Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made	63
Schedule P - Part 3G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	63
Schedule P - Part 3H - Section 1 - Other Liability - Occurrence	63
Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made	63
Schedule P - Part 3I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	64
Schedule P - Part 3J - Auto Physical Damage	64
Schedule P - Part 3K - Fidelity/Surety	64
Schedule P - Part 3L - Other (Including Credit, Accident and Health)	64
Schedule P - Part 3M - International	64
Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property	65
Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability	65
Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines	65
Schedule P - Part 3R - Section 1 - Products Liability - Occurrence	66
Schedule P - Part 3R - Section 2 - Products Liability - Claims-Made	66
Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty	66
Schedule P - Part 3T - Warranty	66

ANNUAL STATEMENT BLANK (Continued)

Schedule P - Part 4A - Homeowners/Farmowners	67
Schedule P - Part 4B - Private Passenger Auto Liability/Medical	67
Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical	67
Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)	67
Schedule P - Part 4E - Commercial Multiple Peril	67
Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence	68
Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made	68
Schedule P - Part 4G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	68
Schedule P - Part 4H - Section 1 - Other Liability - Occurrence	68
Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made	68
Schedule P - Part 4I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary and Theft)	69
Schedule P - Part 4J - Auto Physical Damage	69
Schedule P - Part 4K - Fidelity/Surety	69
Schedule P - Part 4L - Other (Including Credit, Accident and Health)	69
Schedule P - Part 4M - International	69
Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property	70
Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability	70
Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines	70
Schedule P - Part 4R - Section 1 - Products Liability - Occurrence	71
Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made	71
Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty	71
Schedule P - Part 4T - Warranty	71
Schedule P - Part 5A - Homeowners/Farmowners	72
Schedule P - Part 5B - Private Passenger Auto Liability/Medical	73
Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical	74
Schedule P - Part 5D - Workers' Compensation (Excluding Excess Workers' Compensation)	75
Schedule P - Part 5E - Commercial Multiple Peril	76
Schedule P - Part 5F - Medical Professional Liability - Claims-Made	78
Schedule P - Part 5F - Medical Professional Liability - Occurrence	77
Schedule P - Part 5H - Other Liability - Claims-Made	80
Schedule P - Part 5H - Other Liability - Occurrence	79
Schedule P - Part 5R - Products Liability - Claims-Made	82
Schedule P - Part 5R - Products Liability - Occurrence	81
Schedule P - Part 5T - Warranty	83
Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical	84
Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation)	84
Schedule P - Part 6E - Commercial Multiple Peril	85
Schedule P - Part 6H - Other Liability - Claims-Made	86
Schedule P - Part 6H - Other Liability - Occurrence	85
Schedule P - Part 6M - International	86
Schedule P - Part 6N - Reinsurance - Nonproportional Assumed Property	87
Schedule P - Part 6O - Reinsurance - Nonproportional Assumed Liability	87
Schedule P - Part 6R - Products Liability - Claims-Made	88
Schedule P - Part 6R - Products Liability - Occurrence	88
Schedule P - Part 7A - Primary Loss Sensitive Contracts	89
Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts	91
Schedule P Interrogatories	93
Schedule T - Exhibit of Premiums Written	94
Schedule T - Part 2 - Interstate Compact	95
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule Y - Part 1A - Detail of Insurance Holding Company System	97
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	98
Schedule Y - Part 3 - Ultimate Controlling Party and Listing of Other U.S. Insurance Groups or Entities Under That Ultimate Controlling Party's Control	99
Statement of Income	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	100
Underwriting and Investment Exhibit Part 1	6
Underwriting and Investment Exhibit Part 1A	7
Underwriting and Investment Exhibit Part 1B	8
Underwriting and Investment Exhibit Part 2	9
Underwriting and Investment Exhibit Part 2A	10
Underwriting and Investment Exhibit Part 3	11