FORM 4	4
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

(02)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respons	ses)										
1. Name and Address Hance Michael L	2. Issuer Name a FORWARD AII			0.	bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
430 AIRPORT RO	(First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 02/06/2015							X Officer (give title below) Other (specify below) Senior VP, CLO and Secretary			
GREENEVILLE, T	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		12/31/2014		J	v	6.4377 (1) A \$ 0		\$ 0	11,062.4377	D	
Common Stock		02/06/2015		F ⁽²⁾ 509 D \$0			D	\$ 0	10,553.4377	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Nu	mber	6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	ion	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Deriv	ative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Secur	ities			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acqu	ired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					(A) o	r			4)			Following	Direct (D)	
						Dispo	sed						Reported	or Indirect	
						of (D))						Transaction(s)	(I)	
						(Instr	. 3,						(Instr. 4)	(Instr. 4)	
						4, and	l 5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Hance Michael L 430 AIRPORT ROAD GREENEVILLE, TN 37745			Senior VP, CLO and Secretary						

Signatures

/s/ Michael P. McLean, Attorney-in-Fact	02/10/2015
-**Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Includes 6.4377 shares acquired under the Issuer's employee stock purchase plan in June and December 2014.

(2) Restricted stock withheld by Issuer to satisfy minimum tax withholding obligation on vesting of restricted stock.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.