FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

hours per response:

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

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

Check this box to indicate that a transaction was made pursuant to a
contract, instruction or written plan
for the purchase or sale of equity
securities of the issuer that is
intended to satisfy the affirmative
defense conditions of Rule 10b5-

(Last) 800 GESS SUITE 60 (Street) HOUSTO		of Donorting Porcor																			
(Last) 800 GESS SUITE 60 (Street) HOUSTO	1. Name and Address of Reporting Person* Hays James Charles				<u>S</u>	2. Issuer Name and Ticker or Trading Symbol Skyward Specialty Insurance Group, Inc. [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
800 GESS SUITE 60 (Street) HOUSTC (City)					3. Date of Earliest Transaction (Month/Day/Year) 11/27/2024									٧		r (give title			(specify		
HOUSTC (City)	(Last) (First) (Middle) 800 GESSNER SUITE 600													, , , , , , , , , , , , , , , , , , ,							
	(Street) HOUSTON TX 7702				4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
1. Title of S) (State) (Zip)																				
1. Title of S		Table	e I -	Non-Deriva	ıtiv	e Secur	ities	Acqu	ired,	Dispo	osed o	f, or I	Benefici	ally	/ Own	ed					
	1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea	Execution		Date,	3. Transaction Code (Instr. 8)						Sec Ben Owr		Amount of ecurities eneficially wned bllowing		: Direct I r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amou		A) or D)	Price		Reporte Transac (Instr. 3	ction(s)					
Common	Stock														1,97	75,851			JWayne, LLC ⁽¹⁾		
Common	Stock														27	,618		D			
Common Stock			11/27/2024	11/27/2024		S			33,	539	D	\$53.8749	3.8749(2)		772,261		I 1	Marquis Lafayette, LLC ⁽¹⁾			
		Ta	ble	II - Derivati (e.g., pu											Owne	d					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	on Date E se (Month/Day/Year) if				ansaction ode (Instr.	5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	tive (ties red sed 3, 4	Expiration (Month/Dies ed		Exercisable and on Date Day/Year)		le and unt of rities ritlying rative rity (Instr. I 4)	De Se	Price of erivative ecurity estr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)		
			1				ana o,					1					- 1		1		

Explanation of Responses:

- 1. The Reporting Person is the controlling member of the entity.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$53.7407 to \$54.08, inclusive. The Reporting Person undertakes to provide the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth above.

Exercisable

Expiration

/s/ Stacy E. Skelton, Attorney-12/02/2024

** Signature of Reporting Person

Shares

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

- * 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).

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

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 Number.