



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2013  
OF THE CONDITION AND AFFAIRS OF THE

Nationwide Life Insurance Company

NAIC Group Code 0140 (Current) 0140 (Prior) NAIC Company Code 66869 Employer's ID Number 31-4156830

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States of America

Incorporated/Organized 03/21/1929 Commenced Business 01/10/1931

Statutory Home Office One West Nationwide Blvd. (Street and Number) Columbus, OH, US 43215-2220 (City or Town, State, Country and Zip Code)

Main Administrative Office One West Nationwide Blvd. (Street and Number) Columbus, OH, US 43215-2220 (City or Town, State, Country and Zip Code) 800-882-2822 (Area Code) (Telephone Number)

Mail Address One West Nationwide Blvd., 1-04-701 (Street and Number or P.O. Box) Columbus, OH, US 43215-2220 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records One West Nationwide Blvd., 1-04-701 (Street and Number) Columbus, OH, US 43215-2220 (City or Town, State, Country and Zip Code) 800-882-2822 (Area Code) (Telephone Number)

Internet Website Address www.nationwide.com

Statutory Statement Contact Ronald S. Porter (Name) 614-249-1545 (Area Code) (Telephone Number) statacct@nationwide.com (E-mail Address) 877-669-5908 (FAX Number)

OFFICERS

President & COO Kirt Alan Walker Sr VP & Treasurer David Patrick LaPaul

VP - Corp Governance & Secretary Robert William Horner III VP - NF Chief Actuary Steven Andrew Ginnan

OTHER

Anne Louise Arvia Sr VP - NW Retirement Plans	Wesley Kim Austen Sr VP - P&C Comm/Farm Prod	David Alan Bano Sr VP - Chief Claims Officer
James David Benson Sr VP - CAO & Corp Controller	David William Berson Sr VP - Chief Economist	Pamela Ann Biesecker Sr VP - Head of Taxation
William Joseph Burke Sr VP - Corp Marketing	John Laughlin Carter Sr VP - NW Retirement Plans	Thomas Edward Clark # Sr VP - Field Operations IC
Tammy Craig Sr VP - IT Strategic Initiatives	Rae Ann Dankovic # Sr VP - NFS Legal	Steven Michael English Sr VP - Government Relations
Terri Lisa Forgy Sr VP - Talent, Div & Org Effect	Timothy Gerard Frommeyer Sr VP - CFO	Mark Anthony Gaetano Sr VP - BTO
David Luther Giertz # Sr VP - NF Distrib & Sales	Peter Anthony Golato Sr VP - NW Financial Network	Judith Lynn Greenstein Sr VP - Pres Nationwide Bank
Daniel Gerard Greteman Sr VP - CIO Allied Group	Susan Jean Gueli Sr VP - CIO NF Systems	Melissa Doss Gutierrez Sr VP - PCIO Sales Support
Harry Hansen Hallowell Sr VP	Jennifer Marie Hanley Sr VP, NI Brand Marketing	Patricia Ruth Hatler Exec VP & Chief Legal & Gov Off
Eric Shawn Henderson Sr VP - Ind Products & Sol	Peter Joseph Hersha # Sr VP - Trial Division	Terri Lynn Hill Exec VP
Matthew Eric Jauchius Exec VP - Chief Market	Michael Craig Keller Exec VP - Chief Info Officer	Gale Verdell King Exec VP - Chief Human Res Officer
Michael Patrick Leach Sr VP - CFO - P&C	Katherine Marie Liebel Sr VP - Corp Strategy	Michael William Mahaffey Sr VP, Chief Risk Officer
Kai Vincent Monahan Sr VP - Internal Audit	Gregory Stephen Moran Sr VP - CIO IT Infrastructure	Sandra Lee Neely Sr VP - Deputy Gen Counsel
Mark Angelo Pizzi Exec VP	Steven Charles Power Sr VP - NF	Stephen Scott Rasmussen Chief Executive Officer
Sandra Lynn Rich Sr VP - Chief Compliance Officer	Michael Anthony Richardson Sr VP - CIO Enter Apps	Amy Taylor Shore Sr VP - Field Operations EC
David Gerard Sommers # Sr VP-Cust Insights & Analyts	Michael Scott Spangler Sr VP - Invest Manag Group	Mark Raymond Thresher Exec VP
Guruprasad Chitrapura Vasudeva Sr VP - Ent CTO	Andrew Dawny Walker Sr VP - IT Finance SMS/PMO	

DIRECTORS OR TRUSTEES

John Laughlin Carter #	Timothy Gerard Frommeyer	Eric Shawn Henderson
Stephen Scott Rasmussen	Mark Raymond Thresher	Kirt Alan Walker

State of Ohio SS:  
County of Franklin

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.

Kirt Alan Walker President & COO Robert William Horner, III VP - Corp Governance & Secretary David Patrick LaPaul Sr VP & Treasurer

Subscribed and sworn to before me this 31 day of JANUARY, 2014  
Jeffrey W. Cloud

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.....



Jeffrey W. Cloud  
Notary Public, State of Ohio  
My Commission Expires 09-29-2016



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	5,827,284		65,688		5,892,972
2. Annuity considerations .....	2,729,729				2,729,729
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	45,697,140		59,802,257		105,499,397
5. Totals (Sum of Lines 1 to 4) .....	54,254,153		59,867,945		114,122,098
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	123,474		25		123,498
6.2 Applied to pay renewal premiums .....	74,246				74,246
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	221,814				221,814
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	419,534		25		419,559
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	762				762
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	762				762
8. Grand Totals (Lines 6.5 plus 7.4) .....	420,296		25		420,321
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,091,897		(114,354)		2,977,543
10. Matured endowments .....	3,000				3,000
11. Annuity benefits .....	51,193,508		69,867,004		121,060,512
12. Surrender values and withdrawals for life contracts .....	3,085,359		683		3,086,042
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	102,196				102,196
15. Totals .....	57,475,961		69,753,333		127,229,294
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	13	132,763			4	11,035			17	143,798
17. Incurred during current year Settled during current year:	76	3,122,572			7	10,646			83	3,133,218
18.1 By payment in full .....	80	3,094,492			11	21,681			91	3,116,173
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	80	3,094,492			11	21,681			91	3,116,173
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	80	3,094,492			11	21,681			91	3,116,173
19. Unpaid Dec. 31, current year (16+17-18.6) .....	9	160,844							9	160,844
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	7,747	1,018,102,896	(a)		2	27,010,151			7,749	1,045,113,048
21. Issued during year .....	14	19,903,408							14	19,903,408
22. Other changes to in force (Net) .....	(428)	(58,942,702)				(583,958)			(428)	(59,526,661)
23. In force December 31 of current year .....	7,333	979,063,602	(a)		2	26,426,193			7,335	1,005,489,795

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	1,117,192	830,953		355,392	359,692
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	74,508	74,508		25,775	25,775
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	74,508	74,508		25,775	25,775
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,191,701	905,462		381,167	385,467

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 5,120 and number of persons insured under indemnity only products 554 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,210,303		6,650		1,216,953
2. Annuity considerations .....	764,976				764,976
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	7,641,565		1,518,752		9,160,317
5. Totals (Sum of Lines 1 to 4) .....	9,616,844		1,525,402		11,142,246
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	8,161				8,161
6.2 Applied to pay renewal premiums .....	10,098				10,098
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	12,321				12,321
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	30,579				30,579
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	802				802
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	802				802
8. Grand Totals (Lines 6.5 plus 7.4) .....	31,382				31,382
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	31,107		1,000		32,107
10. Matured endowments .....					
11. Annuity benefits .....	5,531,375		2,601,752		8,133,126
12. Surrender values and withdrawals for life contracts .....	552,070				552,070
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	3				3
15. Totals .....	6,114,555		2,602,752		8,717,307
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	3	4,243							3	4,243
17. Incurred during current year .....	17	31,107			1	1,000			18	32,107
Settled during current year:										
18.1 By payment in full .....	19	33,169			1	1,000			20	34,169
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	19	33,169			1	1,000			20	34,169
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	19	33,169			1	1,000			20	34,169
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	2,181							1	2,181
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	446	108,181,146	(a)			372,638			446	108,553,784
21. Issued during year .....										
22. Other changes to in force (Net) .....	(17)	(2,994,394)				8,594			(17)	(2,985,800)
23. In force December 31 of current year .....	429	105,186,752	(a)			381,232			429	105,567,985

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	630,841	629,019		1,330,223	1,330,723
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	630,841	629,019		1,330,223	1,330,723

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....5 and number of persons  
insured under indemnity only products .....34 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	12,913,528		10,659,428		23,572,956
2. Annuity considerations .....	9,493,939				9,493,939
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	138,907,805		161,970,348		300,878,153
5. Totals (Sum of Lines 1 to 4) .....	161,315,272		172,629,776		333,945,048
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	140,862				140,862
6.2 Applied to pay renewal premiums .....	157,252				157,252
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	228,629				228,629
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	526,743				526,743
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	3,057				3,057
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	3,057				3,057
8. Grand Totals (Lines 6.5 plus 7.4) .....	529,799				529,799
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,451,406		1,332,971		2,784,378
10. Matured endowments .....	7,270				7,270
11. Annuity benefits .....	98,375,010		191,251,641		289,626,651
12. Surrender values and withdrawals for life contracts .....	6,407,306		2,920		6,410,226
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	46,825				46,825
15. Totals .....	106,287,817		192,587,532		298,875,349
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	21	559,479			4	8,285			25	567,764
17. Incurred during current year Settled during current year:	70	1,434,246			23	50,549			93	1,484,795
18.1 By payment in full .....	76	1,797,853			19	38,015			95	1,835,868
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	76	1,797,853			19	38,015			95	1,835,868
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	76	1,797,853			19	38,015			95	1,835,868
19. Unpaid Dec. 31, current year (16+17-18.6) .....	15	195,872			8	20,819			23	216,691
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	5,152	973,041,670	(a)		147	559,920,319			5,299	1,532,961,989
21. Issued during year .....	48	45,963,102			33	21,248,000			81	67,211,102
22. Other changes to in force (Net) .....	(306)	(38,499,263)				4,371,842			(306)	(34,127,421)
23. In force December 31 of current year .....	4,894	980,505,509	(a)		180	585,540,162			5,074	1,566,045,671

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,705,765	3,844,905		1,965,180	2,073,080
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	421	421			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	28,032	28,032		63,931	63,931
25.3 Non-renewable for stated reasons only (b) .....	1,090	1,090			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	29,122	29,122		63,931	63,931
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,735,308	3,874,448		2,029,111	2,137,011

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 635 and number of persons insured under indemnity only products 705 .





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,032,432		32,520		2,064,952
2. Annuity considerations .....	4,535,220				4,535,220
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	34,490,877		36,922,087		71,412,964
5. Totals (Sum of Lines 1 to 4) .....	41,058,528		36,954,607		78,013,135
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	46,794				46,794
6.2 Applied to pay renewal premiums .....	15,322				15,322
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	77,111				77,111
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	139,226				139,226
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	2,167				2,167
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	2,167				2,167
8. Grand Totals (Lines 6.5 plus 7.4) .....	141,392				141,392
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,773,576		36,060		1,809,635
10. Matured endowments .....	2,000				2,000
11. Annuity benefits .....	25,212,866		18,746,004		43,958,869
12. Surrender values and withdrawals for life contracts .....	1,477,579		2,719		1,480,298
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	26,788				26,788
15. Totals .....	28,492,809		18,784,782		47,277,591
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	5	1,102,144							5	1,102,144
17. Incurred during current year Settled during current year:	25	1,771,069			1	11,264			26	1,782,333
18.1 By payment in full .....	26	1,976,944			1	11,264			27	1,988,208
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	26	1,976,944			1	11,264			27	1,988,208
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	26	1,976,944			1	11,264			27	1,988,208
19. Unpaid Dec. 31, current year (16+17-18.6) .....	4	896,269							4	896,269
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	3,114	396,965,070	(a)		8	19,122,883			3,122	416,087,953
21. Issued during year .....	1	1,000,000							1	1,000,000
22. Other changes to in force (Net) .....	(205)	(25,423,561)				(58,583)			(205)	(25,482,144)
23. In force December 31 of current year .....	2,910	372,541,509	(a)		8	19,064,300			2,918	391,605,809

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	1,263,335	1,349,797		554,093	1,050,993
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	215	215		4,160	4,160
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	6,376	6,376		961	961
25.3 Non-renewable for stated reasons only (b) .....	1,672	1,672		65,329	65,329
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	8,048	8,048		66,290	66,290
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,271,598	1,358,060		624,542	1,121,442

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 119 and number of persons insured under indemnity only products 831 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	65,218,908		74,429,558		139,648,466
2. Annuity considerations .....	63,645,308				63,645,308
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	643,702,364		367,585,234		1,011,287,598
5. Totals (Sum of Lines 1 to 4) .....	772,566,580		442,014,792		1,214,581,372
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	925,579		174		925,753
6.2 Applied to pay renewal premiums .....	1,118,337		35		1,118,372
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,773,657		118		1,773,775
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	3,817,573		327		3,817,900
Annuities:					
7.1 Paid in cash or left on deposit .....	218				218
7.2 Applied to provide paid-up annuities .....	434				434
7.3 Other .....	13,124				13,124
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	13,776				13,776
8. Grand Totals (Lines 6.5 plus 7.4) .....	3,831,348		327		3,831,675
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	29,205,258		3,869,773		33,075,031
10. Matured endowments .....	105,001				105,001
11. Annuity benefits .....	559,035,604		399,486,100		958,521,704
12. Surrender values and withdrawals for life contracts .....	49,555,016		5,085,556		54,640,572
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	148,376				148,376
15. Totals .....	638,049,255		408,441,428		1,046,490,684
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	89	2,656,323			16	332,136			105	2,988,459
17. Incurred during current year Settled during current year:	306	29,174,090			69	3,324,732			375	32,498,821
18.1 By payment in full .....	299	30,541,263			54	3,589,838			353	34,131,101
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	299	30,541,263			54	3,589,838			353	34,131,101
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	299	30,541,263			54	3,589,838			353	34,131,101
19. Unpaid Dec. 31, current year (16+17-18.6) .....	96	1,289,150			31	67,030			127	1,356,179
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	26,077	8,048,435,539	(a)		1,977	2,671,580,936			28,054	10,720,016,475
21. Issued during year .....	192	170,654,797			33	125,003,549			225	295,658,346
22. Other changes to in force (Net) .....	(1,667)	(574,712,737)			(24)	21,023,914			(1,691)	(553,688,823)
23. In force December 31 of current year .....	24,602	7,644,377,599	(a)		1,986	2,817,608,399			26,588	10,461,985,998

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	25,839,753	16,321,567		6,880,190	8,369,218
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	211	211			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	25,015	25,015		29,133	29,133
25.3 Non-renewable for stated reasons only (b) .....	2,093	2,093		121	121
25.4 Other accident only .....					
25.5 All other (b) .....	175	175		1,800	1,800
25.6 Totals (sum of Lines 25.1 to 25.5) .....	27,283	27,283		31,055	31,055
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	25,867,246	16,349,061		6,911,245	8,400,273

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 19,941 and number of persons insured under indemnity only products 2,646 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	4,987,808		2,561,235		7,549,043
2. Annuity considerations .....	7,428,781				7,428,781
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	84,001,555		37,145,233		121,146,788
5. Totals (Sum of Lines 1 to 4) .....	96,418,145		39,706,468		136,124,613
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	112,738				112,738
6.2 Applied to pay renewal premiums .....	145,284		6		145,290
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	184,781				184,781
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	442,803		6		442,808
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	60				60
7.3 Other .....	1,894				1,894
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	1,953				1,953
8. Grand Totals (Lines 6.5 plus 7.4) .....	444,756		6		444,762
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,102,896		33,557		2,136,453
10. Matured endowments .....	14,919				14,919
11. Annuity benefits .....	60,552,116		73,013,340		133,565,456
12. Surrender values and withdrawals for life contracts .....	8,987,476				8,987,476
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1,891				1,891
15. Totals .....	71,659,299		73,046,897		144,706,195
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	14	244,157							14	244,157
17. Incurred during current year Settled during current year:	35	2,095,362			14	33,557			49	2,128,919
18.1 By payment in full .....	42	2,327,225			14	33,557			56	2,360,782
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	42	2,327,225			14	33,557			56	2,360,782
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	42	2,327,225			14	33,557			56	2,360,782
19. Unpaid Dec. 31, current year (16+17-18.6) .....	7	12,294							7	12,294
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	4,725	823,582,704	(a)		63	194,191,821			4,788	1,017,774,525
21. Issued during year .....	44	35,705,889							44	35,705,889
22. Other changes to in force (Net) .....	(223)	(70,419,885)			1	(168,105)			(222)	(70,587,990)
23. In force December 31 of current year .....	4,546	788,868,708	(a)		64	194,023,716			4,610	982,892,425

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	7,473,315	7,719,549		7,599,945	7,616,945
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....				2,400	2,400
25.2 Guaranteed renewable (b) .....	16,543	16,543		8,161	8,161
25.3 Non-renewable for stated reasons only (b) .....	276	276			
25.4 Other accident only .....					
25.5 All other (b) .....				224	224
25.6 Totals (sum of Lines 25.1 to 25.5) .....	16,819	16,819		10,785	10,785
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,490,134	7,736,368		7,610,730	7,627,730

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 3,273 and number of persons  
insured under indemnity only products 472 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	7,569,697		105,544		7,675,240
2. Annuity considerations .....	17,532,255				17,532,255
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	112,253,421		41,880,972		154,134,393
5. Totals (Sum of Lines 1 to 4) .....	137,355,373		41,986,515		179,341,888
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	312,817				312,817
6.2 Applied to pay renewal premiums .....	228,326				228,326
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	389,061		24		389,085
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	930,203		24		930,227
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	126				126
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	126				126
8. Grand Totals (Lines 6.5 plus 7.4) .....	930,329		24		930,353
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,332,646		90,171		6,422,817
10. Matured endowments .....	26,850				26,850
11. Annuity benefits .....	90,501,037		44,617,493		135,118,530
12. Surrender values and withdrawals for life contracts .....	5,925,071		91,354		6,016,425
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	37,326				37,326
15. Totals .....	102,822,930		44,799,019		147,621,948
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	32	572,499			2	3,000			34	575,499
17. Incurred during current year Settled during current year:	166	6,065,851			15	34,136			181	6,099,987
18.1 By payment in full .....	162	6,304,221			13	32,104			175	6,336,325
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	162	6,304,221			13	32,104			175	6,336,325
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	162	6,304,221			13	32,104			175	6,336,325
19. Unpaid Dec. 31, current year (16+17-18.6) .....	36	334,129			4	5,032			40	339,161
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	12,625	1,507,353,179	(a)		60	85,568,722			12,685	1,592,921,901
21. Issued during year .....	6	4,300,000							6	4,300,000
22. Other changes to in force (Net) .....	(812)	(104,794,572)			(1)	(890,798)			(813)	(105,685,369)
23. In force December 31 of current year .....	11,819	1,406,858,607	(a)		59	84,677,924			11,878	1,491,536,531

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	19,353,336	10,361,925		4,956,870	7,178,670
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	420,738	420,738		235,253	235,253
25.3 Non-renewable for stated reasons only (b) .....	511	511			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	421,249	421,249		235,253	235,253
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	19,774,585	10,783,174		5,192,123	7,413,923

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 14,989 and number of persons insured under indemnity only products 255 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	23,194,773		137,085,573		160,280,346
2. Annuity considerations .....	5,356,693				5,356,693
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	37,976,701		2,281,811		40,258,512
5. Totals (Sum of Lines 1 to 4) .....	66,528,167		139,367,384		205,895,551
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	227,989		13		228,002
6.2 Applied to pay renewal premiums .....	206,613				206,613
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	667,057				667,057
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,101,659		13		1,101,672
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,101,659		13		1,101,672
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	9,477,924		57,234,677		66,712,601
10. Matured endowments .....	124,649				124,649
11. Annuity benefits .....	14,950,353		7,263,237		22,213,591
12. Surrender values and withdrawals for life contracts .....	12,120,332		5,000,000		17,120,332
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	46,940				46,940
15. Totals .....	36,720,199		69,497,914		106,218,112
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	27	96,751			2	58,099			29	154,849
17. Incurred during current year Settled during current year:	147	9,430,455			40	57,218,637			187	66,649,092
18.1 By payment in full .....	152	9,104,976			40	56,640,250			192	65,745,226
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	152	9,104,976			40	56,640,250			192	65,745,226
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	152	9,104,976			40	56,640,250			192	65,745,226
19. Unpaid Dec. 31, current year (16+17-18.6) .....	22	422,230			2	636,486			24	1,058,716
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	13,162	2,278,938,252	(a)		9,524	16,389,627,242			22,686	18,668,565,494
21. Issued during year .....	121	112,180,419			361	373,116,375			482	485,296,794
22. Other changes to in force (Net) .....	(617)	(81,903,534)			(29)	50,546,358			(646)	(31,357,176)
23. In force December 31 of current year .....	12,666	2,309,215,137	(a)		9,856	16,813,289,975			22,522	19,122,505,112

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	5,113,950	4,585,039		2,281,113	2,263,713
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	9,564	9,564		5,805	5,805
25.3 Non-renewable for stated reasons only (b) .....	3,867	3,867			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	13,431	13,431		5,805	5,805
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	5,127,381	4,598,469		2,286,917	2,269,517

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....3,396 and number of persons insured under indemnity only products .....115 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	747,591		31,875		779,466
2. Annuity considerations .....	738,057				738,057
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	9,856,008		1,360,103		11,216,111
5. Totals (Sum of Lines 1 to 4) .....	11,341,656		1,391,978		12,733,634
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	39,484				39,484
6.2 Applied to pay renewal premiums .....	40,024				40,024
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	31,461				31,461
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	110,968				110,968
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	181				181
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	181				181
8. Grand Totals (Lines 6.5 plus 7.4) .....	111,149				111,149
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	139,443		40,135		179,578
10. Matured endowments .....					
11. Annuity benefits .....	5,139,112		9,487,684		14,626,796
12. Surrender values and withdrawals for life contracts .....	591,182		41,851		633,033
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1,136				1,136
15. Totals .....	5,870,874		9,569,670		15,440,543
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	10	44,037			6	72,757			16	116,794
17. Incurred during current year Settled during current year:	15	135,943			8	18,481			23	154,424
18.1 By payment in full .....	19	160,761			6	15,072			25	175,833
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	19	160,761			6	15,072			25	175,833
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	19	160,761			6	15,072			25	175,833
19. Unpaid Dec. 31, current year (16+17-18.6) .....	6	19,219			8	76,166			14	95,385
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,137	401,848,188	(a)		2	4,426,268			1,139	406,274,456
21. Issued during year .....		(547,043)								(547,043)
22. Other changes to in force (Net) .....	(56)	8,618,660				(89,529)			(56)	8,529,131
23. In force December 31 of current year .....	1,081	409,919,805	(a)		2	4,336,739			1,083	414,256,544

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	293,093	288,654		9,969	12,659
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	4,354	4,354		243	243
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,354	4,354		243	243
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	297,447	293,008		10,212	12,902

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1 and number of persons insured under indemnity only products 54 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	26,867,752		25,129,097		51,996,849
2. Annuity considerations .....	46,024,869				46,024,869
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	451,660,731		517,409,361		969,070,092
5. Totals (Sum of Lines 1 to 4) .....	524,553,352		542,538,458		1,067,091,810
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	1,006,549		107		1,006,655
6.2 Applied to pay renewal premiums .....	857,268		6		857,274
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,429,013		54		1,429,067
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	3,292,830		167		3,292,997
Annuities:					
7.1 Paid in cash or left on deposit .....	3				3
7.2 Applied to provide paid-up annuities .....	40				40
7.3 Other .....	1,215				1,215
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	1,257				1,257
8. Grand Totals (Lines 6.5 plus 7.4) .....	3,294,087		167		3,294,254
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	33,676,120		2,017,025		35,693,144
10. Matured endowments .....	209,491				209,491
11. Annuity benefits .....	373,208,832		448,698,305		821,907,137
12. Surrender values and withdrawals for life contracts .....	28,611,750		116,143		28,727,894
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	343,342				343,342
15. Totals .....	436,049,536		450,831,473		886,881,009
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	122	1,673,051			10	118,861			132	1,791,912
17. Incurred during current year Settled during current year:	481	33,736,722			56	742,117			537	34,478,840
18.1 By payment in full .....	499	32,222,642			47	775,759			546	32,998,401
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	499	32,222,642			47	775,759			546	32,998,401
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	499	32,222,642			47	775,759			546	32,998,401
19. Unpaid Dec. 31, current year (16+17-18.6) .....	104	3,187,131			19	85,219			123	3,272,350
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	35,154	4,834,926,315	(a)		1,440	1,172,037,954			36,594	6,006,964,269
21. Issued during year .....	40	21,720,803			94	125,523,368			134	147,244,171
22. Other changes to in force (Net) .....	(1,785)	(370,408,020)			(5)	30,228,755			(1,790)	(340,179,265)
23. In force December 31 of current year .....	33,409	4,486,239,098	(a)		1,529	1,327,790,076			34,938	5,814,029,174

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	6,607,277	6,522,319		3,235,273	4,344,073
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	411	411			
25.2 Guaranteed renewable (b) .....	1,240,020	1,240,020		1,152,285	1,152,285
25.3 Non-renewable for stated reasons only (b) .....	56,031	56,031			
25.4 Other accident only .....					
25.5 All other (b) .....	46	46		3,094	3,094
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,296,509	1,296,509		1,155,379	1,155,379
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,903,786	7,818,828		4,390,652	5,499,452

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 63 and number of persons insured under indemnity only products 2,391 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	22,647,150		14,865,251		37,512,401
2. Annuity considerations .....	8,996,843				8,996,843
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	113,927,641		72,810,915		186,738,556
5. Totals (Sum of Lines 1 to 4) .....	145,571,634		87,676,166		233,247,800
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	434,142		505		434,647
6.2 Applied to pay renewal premiums .....	288,273		7		288,280
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	628,821		6		628,827
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,351,236		518		1,351,754
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	55				55
7.3 Other .....	3,506				3,506
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	3,562				3,562
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,354,797		518		1,355,315
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,063,346		223,917		6,287,263
10. Matured endowments .....	8,000				8,000
11. Annuity benefits .....	80,327,558		172,687,414		253,014,972
12. Surrender values and withdrawals for life contracts .....	9,899,131		11,698,880		21,598,011
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	123,943				123,943
15. Totals .....	96,421,978		184,610,211		281,032,189
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	27	641,444			5	17,391			32	658,835
17. Incurred during current year Settled during current year:	199	5,895,134			24	150,016			223	6,045,150
18.1 By payment in full .....	199	5,516,633			27	136,038			226	5,652,671
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	199	5,516,633			27	136,038			226	5,652,671
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	199	5,516,633			27	136,038			226	5,652,671
19. Unpaid Dec. 31, current year (16+17-18.6) .....	27	1,019,944			2	31,369			29	1,051,313
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	14,930	2,321,152,034	(a)		448	549,522,864			15,378	2,870,674,898
21. Issued during year .....	49	28,815,028							49	28,815,028
22. Other changes to in force (Net) .....	(877)	(154,313,070)			(35)	(23,439,881)			(912)	(177,752,951)
23. In force December 31 of current year .....	14,102	2,195,653,992	(a)		413	526,082,984			14,515	2,721,736,976

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,721,738	3,090,261		1,737,971	1,795,373
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	19,718	19,718			
25.2 Guaranteed renewable (b) .....	418,096	418,096		305,446	305,446
25.3 Non-renewable for stated reasons only (b) .....	48,658	48,658			
25.4 Other accident only .....					
25.5 All other (b) .....	29	29			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	486,501	486,501		305,446	305,446
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,208,240	3,576,763		2,043,417	2,100,819

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....915 and number of persons  
insured under indemnity only products .....1,101 .





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,338,417		296,629		1,635,046
2. Annuity considerations .....	3,707,355				3,707,355
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	53,159,345		7,370,654		60,529,999
5. Totals (Sum of Lines 1 to 4) .....	58,205,117		7,667,283		65,872,400
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	19,780				19,780
6.2 Applied to pay renewal premiums .....	19,082				19,082
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	22,704				22,704
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	61,566				61,566
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	61,566				61,566
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,265,747		16,504		1,282,251
10. Matured endowments .....					
11. Annuity benefits .....	43,725,260		22,831,701		66,556,961
12. Surrender values and withdrawals for life contracts .....	1,488,011		2,526		1,490,537
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	2				2
15. Totals .....	46,479,020		22,850,731		69,329,751
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	4	127,968							4	127,968
17. Incurred during current year Settled during current year:	9	1,248,747			5	16,504			14	1,265,251
18.1 By payment in full .....	10	1,079,100			5	16,504			15	1,095,604
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	10	1,079,100			5	16,504			15	1,095,604
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	10	1,079,100			5	16,504			15	1,095,604
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	297,615							3	297,615
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,296	347,547,769	(a)		25	6,216,662			1,321	353,764,431
21. Issued during year .....	10	3,290,000							10	3,290,000
22. Other changes to in force (Net) .....	(52)	(15,807,885)				(21,503)			(52)	(15,829,389)
23. In force December 31 of current year .....	1,254	335,029,884	(a)		25	6,195,159			1,279	341,225,043

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	15,411	15,375		4,504	5,804
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	3,311	3,311		838	838
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	3,311	3,311		838	838
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	18,722	18,686		5,342	6,642

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 9 and number of persons insured under indemnity only products 23 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,167,935		14,923		2,182,857
2. Annuity considerations .....	186,130				186,130
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	17,526,043		26,200,926		43,726,969
5. Totals (Sum of Lines 1 to 4) .....	19,880,108		26,215,849		46,095,957
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	19,619		133		19,752
6.2 Applied to pay renewal premiums .....	7,283				7,283
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	24,570				24,570
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	51,471		133		51,604
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	2,030				2,030
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	2,030				2,030
8. Grand Totals (Lines 6.5 plus 7.4) .....	53,501		133		53,634
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,123,675		15,831		1,139,506
10. Matured endowments .....					
11. Annuity benefits .....	14,473,605		43,582,759		58,056,364
12. Surrender values and withdrawals for life contracts .....	708,070		2,102		710,171
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1				1
15. Totals .....	16,305,352		43,600,691		59,906,043
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	1	1,000			1	2,669			2	3,669
17. Incurred during current year Settled during current year:	9	1,106,855			7	15,831			16	1,122,686
18.1 By payment in full .....	9	1,106,677			6	13,456			15	1,120,133
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	9	1,106,677			6	13,456			15	1,120,133
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	9	1,106,677			6	13,456			15	1,120,133
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	1,178			2	5,044			3	6,222
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	755	155,501,760	(a)		5	7,515,882			760	163,017,642
21. Issued during year .....	17	17,000,000							17	17,000,000
22. Other changes to in force (Net) .....	(37)	(10,262,288)				(7,295)			(37)	(10,269,583)
23. In force December 31 of current year .....	735	162,239,471	(a)		5	7,508,587			740	169,748,059

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	603,287	610,291		3,716,197	2,688,097
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	852	852			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	852	852			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	604,139	611,144		3,716,197	2,688,097

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 65 and number of persons insured under indemnity only products 127 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	17,815,304		176,588,734		194,404,038
2. Annuity considerations .....	16,050,150		192,236		16,242,385
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	209,949,736		205,309,353		415,259,088
5. Totals (Sum of Lines 1 to 4) .....	243,815,189		382,090,323		625,905,512
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	260,226		22		260,249
6.2 Applied to pay renewal premiums .....	230,602		8		230,610
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	465,532		7		465,539
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	956,361		37		956,398
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	508				508
7.3 Other .....	12,364				12,364
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	12,872				12,872
8. Grand Totals (Lines 6.5 plus 7.4) .....	969,233		37		969,270
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	14,452,067		2,682,368		17,134,435
10. Matured endowments .....	25,787				25,787
11. Annuity benefits .....	181,522,548		273,397,724		454,920,272
12. Surrender values and withdrawals for life contracts .....	34,416,300		26,101,629		60,517,929
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	32,497				32,497
15. Totals .....	230,449,199		302,181,721		532,630,920
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	29	355,184			2	3,291			31	358,474
17. Incurred during current year Settled during current year:	161	14,169,211			41	2,630,118			202	16,799,329
18.1 By payment in full .....	158	13,164,406			40	2,626,597			198	15,791,003
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	158	13,164,406			40	2,626,597			198	15,791,003
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	158	13,164,406			40	2,626,597			198	15,791,003
19. Unpaid Dec. 31, current year (16+17-18.6) .....	32	1,359,989			3	6,812			35	1,366,801
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	14,408	3,137,743,750	(a)		800	1,233,540,310			15,208	4,371,284,061
21. Issued during year .....	44	40,483,511			75	438,403,898			119	478,887,409
22. Other changes to in force (Net) .....	(837)	(277,506,351)			(38)	(48,281,625)			(875)	(325,787,976)
23. In force December 31 of current year .....	13,615	2,900,720,911	(a)		837	1,623,662,583			14,452	4,524,383,494

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	5,050,686	4,492,240		1,612,612	2,502,334
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	14,214	14,214		34,850	34,850
25.3 Non-renewable for stated reasons only (b) .....	185	185			
25.4 Other accident only .....					
25.5 All other (b) .....				212	212
25.6 Totals (sum of Lines 25.1 to 25.5) .....	14,399	14,399		35,062	35,062
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	5,065,085	4,506,639		1,647,674	2,537,396

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 728 and number of persons insured under indemnity only products 1,431 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	4,087,952		4,690,130		8,778,081
2. Annuity considerations .....	9,440,637				9,440,637
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	145,154,279		60,253,101		205,407,380
5. Totals (Sum of Lines 1 to 4) .....	158,682,867		64,943,230		223,626,098
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	159,659		113		159,773
6.2 Applied to pay renewal premiums .....	186,789		15		186,804
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	283,185		7		283,192
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	629,634		135		629,769
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	44				44
7.3 Other .....	3,302				3,302
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	3,346				3,346
8. Grand Totals (Lines 6.5 plus 7.4) .....	632,980		135		633,115
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,096,677		188,852		6,285,530
10. Matured endowments .....	20,240				20,240
11. Annuity benefits .....	77,913,873		83,925,472		161,839,344
12. Surrender values and withdrawals for life contracts .....	4,705,449		27,696		4,733,145
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	33,817				33,817
15. Totals .....	88,770,056		84,142,020		172,912,077
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	13	54,191			4	8,019			17	62,209
17. Incurred during current year Settled during current year:	82	5,795,627			29	53,852			111	5,849,479
18.1 By payment in full .....	84	5,738,980			28	54,195			112	5,793,175
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	84	5,738,980			28	54,195			112	5,793,175
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	84	5,738,980			28	54,195			112	5,793,175
19. Unpaid Dec. 31, current year (16+17-18.6) .....	11	110,838			5	7,676			16	118,514
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	7,981	790,006,797	(a)		97	163,299,544			8,078	953,306,341
21. Issued during year .....	19	14,713,984							19	14,713,984
22. Other changes to in force (Net) .....	(398)	(46,809,093)				2,588			(398)	(46,806,505)
23. In force December 31 of current year .....	7,602	757,911,689	(a)		97	163,302,132			7,699	921,213,821

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	5,938,210	5,871,986		2,990,271	3,416,194
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	73,158	73,158		55,673	55,673
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	73,158	73,158		55,673	55,673
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	6,011,368	5,945,144		3,045,943	3,471,867

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 452 and number of persons insured under indemnity only products 665 .



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ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,651,573		3,154,813		6,806,386
2. Annuity considerations	3,089,793				3,089,793
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations	26,446,299		25,751,140		52,197,439
5. Totals (Sum of Lines 1 to 4)	33,187,665		28,905,953		62,093,618
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	93,634				93,634
6.2 Applied to pay renewal premiums	104,809				104,809
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	146,683		43		146,726
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	345,126		43		345,169
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other	4,965				4,965
7.4 Totals (Sum of Lines 7.1 to 7.3)	4,965				4,965
8. Grand Totals (Lines 6.5 plus 7.4)	350,091		43		350,134
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,105,352		1,751,435		2,856,787
10. Matured endowments	75,968				75,968
11. Annuity benefits	30,092,881		32,045,997		62,138,879
12. Surrender values and withdrawals for life contracts	1,428,706		2,260		1,430,966
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	3,706				3,706
15. Totals	32,706,613		33,799,693		66,506,306
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	3	493,515			1	8,969			4	502,484
17. Incurred during current year	98	1,136,683			5	6,846			103	1,143,529
Settled during current year:										
18.1 By payment in full	94	1,576,100			2	3,349			96	1,579,449
18.2 By payment on compromised claims										
18.3 Totals paid	94	1,576,100			2	3,349			96	1,579,449
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	94	1,576,100			2	3,349			96	1,579,449
19. Unpaid Dec. 31, current year (16+17-18.6)	7	54,098			4	12,466			11	66,564
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	2,157	298,712,483	(a)		35	1,033,164,888			2,192	1,331,877,371
21. Issued during year	22	38,500,000							22	38,500,000
22. Other changes to in force (Net)	(112)	(11,059,339)				(16,077)			(112)	(11,075,415)
23. In force December 31 of current year	2,067	326,153,145	(a)		35	1,033,148,811			2,102	1,359,301,955

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	3,007,506	2,350,084		1,735,595	1,847,695
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,672	1,672		1,859	1,859
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,672	1,672		1,859	1,859
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,009,178	2,351,756		1,737,454	1,849,554

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1,219 and number of persons  
insured under indemnity only products 697 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	3,430,218		818,756		4,248,974
2. Annuity considerations .....	6,778,374				6,778,374
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	68,582,779		9,419,805		78,002,584
5. Totals (Sum of Lines 1 to 4) .....	78,791,371		10,238,561		89,029,932
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	45,632				45,632
6.2 Applied to pay renewal premiums .....	51,913				51,913
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	117,306		22		117,328
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	214,851		22		214,873
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	91				91
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	91				91
8. Grand Totals (Lines 6.5 plus 7.4) .....	214,943		22		214,964
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,202,597		157,904		1,360,501
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	65,125,869		10,260,085		75,385,954
12. Surrender values and withdrawals for life contracts .....	3,878,027		5,342		3,883,369
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	5,096				5,096
15. Totals .....	70,212,590		10,423,332		80,635,921
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	4	212,920							4	212,920
17. Incurred during current year Settled during current year:	24	1,179,677			4	12,804			28	1,192,481
18.1 By payment in full .....	24	1,131,037			4	12,804			28	1,143,841
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	24	1,131,037			4	12,804			28	1,143,841
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	24	1,131,037			4	12,804			28	1,143,841
19. Unpaid Dec. 31, current year (16+17-18.6) .....	4	261,560							4	261,560
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	2,699	511,229,459	(a)		3	58,334,387			2,702	569,563,846
21. Issued during year .....	3	300,000							3	300,000
22. Other changes to in force (Net) .....	(121)	(59,052,521)				(136,506)			(121)	(59,189,026)
23. In force December 31 of current year .....	2,581	452,476,938	(a)		3	58,197,881			2,584	510,674,819

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	2,878,294	2,589,284		916,500	939,400
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	207	207			
25.3 Non-renewable for stated reasons only (b) .....	26,087	26,087			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	26,295	26,295			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,904,589	2,615,578		916,500	939,400

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 593 and number of persons insured under indemnity only products 325 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	5,196,218		7,742,696		12,938,914
2. Annuity considerations .....	5,915,341				5,915,341
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	88,141,071		22,340,790		110,481,861
5. Totals (Sum of Lines 1 to 4) .....	99,252,630		30,083,486		129,336,116
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	237,008		14		237,022
6.2 Applied to pay renewal premiums .....	319,947				319,947
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	485,011				485,011
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,041,966		14		1,041,980
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	471				471
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	471				471
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,042,436		14		1,042,451
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	10,985,554		5,179,714		16,165,268
10. Matured endowments .....	27,599				27,599
11. Annuity benefits .....	39,469,223		29,430,521		68,899,744
12. Surrender values and withdrawals for life contracts .....	4,472,457		4,587		4,477,045
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	98,500				98,500
15. Totals .....	55,053,334		34,614,823		89,668,156
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	22	446,420							22	446,420
17. Incurred during current year Settled during current year:	212	10,953,502			2	3,964			214	10,957,466
18.1 By payment in full .....	209	11,212,581			2	3,964			211	11,216,545
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	209	11,212,581			2	3,964			211	11,216,545
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	209	11,212,581			2	3,964			211	11,216,545
19. Unpaid Dec. 31, current year (16+17-18.6) .....	25	187,340							25	187,340
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	9,099	916,691,181	(a)			4,032,592,316			9,099	4,949,283,497
21. Issued during year .....	1	450,000							1	450,000
22. Other changes to in force (Net) .....	(574)	(69,474,231)				(63,470)			(574)	(69,537,701)
23. In force December 31 of current year .....	8,526	847,666,951	(a)			4,032,528,846			8,526	4,880,195,797

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	7,777,302	7,394,763		4,802,307	4,842,806
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	85,310	85,310		52,150	52,150
25.3 Non-renewable for stated reasons only (b) .....	1,005	1,005			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	86,315	86,315		52,150	52,150
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,863,617	7,481,078		4,854,457	4,894,957

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 41 and number of persons insured under indemnity only products 464 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	3,037,938		730,754		3,768,692
2. Annuity considerations .....	2,925,178				2,925,178
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	88,794,745		41,243,146		130,037,891
5. Totals (Sum of Lines 1 to 4) .....	94,757,860		41,973,900		136,731,760
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	170,940				170,940
6.2 Applied to pay renewal premiums .....	119,753				119,753
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	167,361		16		167,376
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	458,054		16		458,069
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	1,613				1,613
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	1,613				1,613
8. Grand Totals (Lines 6.5 plus 7.4) .....	459,667		16		459,683
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,200,401		1,272,348		4,472,749
10. Matured endowments .....					
11. Annuity benefits .....	44,051,218		34,251,336		78,302,554
12. Surrender values and withdrawals for life contracts .....	2,126,936		6,251		2,133,187
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	19,657				19,657
15. Totals .....	49,398,212		35,529,935		84,928,147
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	7	108,549			4	10,991			11	119,540
17. Incurred during current year Settled during current year:	51	3,135,957			18	1,277,238			69	4,413,195
18.1 By payment in full .....	54	3,196,647			15	1,265,359			69	4,462,006
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	54	3,196,647			15	1,265,359			69	4,462,006
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	54	3,196,647			15	1,265,359			69	4,462,006
19. Unpaid Dec. 31, current year (16+17-18.6) .....	4	47,859			7	22,870			11	70,729
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,621	306,390,922	(a)		56	84,490,653			1,677	390,881,576
21. Issued during year .....	4	2,900,646							4	2,900,646
22. Other changes to in force (Net) .....	(118)	(35,804,665)			(1)	(29,312)			(119)	(35,833,977)
23. In force December 31 of current year .....	1,507	273,486,904	(a)		55	84,461,341			1,562	357,948,245

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,380,093	3,166,816		1,475,277	1,667,777
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,380,093	3,166,816		1,475,277	1,667,777

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....593 and number of persons  
insured under indemnity only products .....433 .





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,096,215		17,671		1,113,886
2. Annuity considerations .....	1,219,720				1,219,720
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	17,795,058		5,279,302		23,074,360
5. Totals (Sum of Lines 1 to 4) .....	20,110,993		5,296,973		25,407,966
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	114,334				114,334
6.2 Applied to pay renewal premiums .....	108,432				108,432
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	119,398				119,398
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	342,164				342,164
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	342,164				342,164
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,368,783		14,195		1,382,979
10. Matured endowments .....	37,291				37,291
11. Annuity benefits .....	18,048,979		11,728,295		29,777,274
12. Surrender values and withdrawals for life contracts .....	893,262		6,772		900,034
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	8,107				8,107
15. Totals .....	20,356,422		11,749,263		32,105,685
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	4	1,129			2	3,611			6	4,740
17. Incurred during current year Settled during current year:	47	1,363,189			2	6,195			49	1,369,384
18.1 By payment in full .....	42	1,206,554			3	8,706			45	1,215,260
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	42	1,206,554			3	8,706			45	1,215,260
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	42	1,206,554			3	8,706			45	1,215,260
19. Unpaid Dec. 31, current year (16+17-18.6) .....	9	157,764			1	1,100			10	158,864
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,269	196,866,870	(a)			2,522,267			2,269	199,389,137
21. Issued during year .....										
22. Other changes to in force (Net) .....	(122)	(11,978,869)				173,302			(122)	(11,805,567)
23. In force December 31 of current year .....	2,147	184,888,001	(a)			2,695,568			2,147	187,583,570

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	4,947,278	4,266,265		3,749,897	4,040,897
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	1,481	1,481			
25.2 Guaranteed renewable (b) .....	21,077	21,077		9,633	9,633
25.3 Non-renewable for stated reasons only (b) .....	680	680			
25.4 Other accident only .....					
25.5 All other (b) .....	98	98			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	23,337	23,337		9,633	9,633
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,970,615	4,289,602		3,759,530	4,050,530

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 3,362 and number of persons insured under indemnity only products 118 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	20,068,879		5,560,229		25,629,108
2. Annuity considerations .....	17,067,449		266,019		17,333,468
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	120,427,699		67,624,714		188,052,412
5. Totals (Sum of Lines 1 to 4) .....	157,564,027		73,450,961		231,014,988
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	632,041		405		632,445
6.2 Applied to pay renewal premiums .....	520,104		7		520,110
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	988,582		33		988,614
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,140,726		444		2,141,170
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	1,539				1,539
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	1,539				1,539
8. Grand Totals (Lines 6.5 plus 7.4) .....	2,142,265		444		2,142,709
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	21,470,899		945,774		22,416,674
10. Matured endowments .....	189,358				189,358
11. Annuity benefits .....	82,095,953		82,129,637		164,225,591
12. Surrender values and withdrawals for life contracts .....	13,824,198		693		13,824,891
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	161,244				161,244
15. Totals .....	117,741,653		83,076,105		200,817,758
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	62	920,043			4	12,500			66	932,543
17. Incurred during current year Settled during current year:	534	21,126,857			24	51,299			558	21,178,155
18.1 By payment in full .....	541	20,424,448			22	36,405			563	20,460,853
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	541	20,424,448			22	36,405			563	20,460,853
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	541	20,424,448			22	36,405			563	20,460,853
19. Unpaid Dec. 31, current year (16+17-18.6) .....	55	1,622,451			6	27,394			61	1,649,845
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	35,886	3,181,523,814	(a)		260	481,945,320			36,146	3,663,469,134
21. Issued during year .....	27	40,974,400							27	40,974,400
22. Other changes to in force (Net) .....	(2,110)	(226,037,251)				(81,394)			(2,110)	(226,118,645)
23. In force December 31 of current year .....	33,803	2,996,460,963	(a)		260	481,863,926			34,063	3,478,324,889

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,834,054	1,886,755		365,118	348,718
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	962,649	962,649		571,529	575,249
25.3 Non-renewable for stated reasons only (b) .....	557	557			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	963,206	963,206		571,529	575,249
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,797,260	2,849,961		936,647	923,967

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 3 and number of persons insured under indemnity only products 686 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2013

NAIC Group Code 0140

LIFE INSURANCE

NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	9,326,455		2,691,214		12,017,670
2. Annuity considerations .....	45,002,491				45,002,491
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	219,380,533		61,166,675		280,547,208
5. Totals (Sum of Lines 1 to 4) .....	273,709,480		63,857,889		337,567,368
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	302,368		35		302,402
6.2 Applied to pay renewal premiums .....	424,739		(10)		424,728
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	555,923		15		555,938
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,283,029		40		1,283,068
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	84				84
7.3 Other .....	2,440				2,440
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	2,523				2,523
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,285,552		40		1,285,592
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	14,106,261		1,510,868		15,617,129
10. Matured endowments .....	66,125				66,125
11. Annuity benefits .....	182,246,442		106,568,127		288,814,569
12. Surrender values and withdrawals for life contracts .....	8,571,189		9,720		8,580,909
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	45,145				45,145
15. Totals .....	205,035,162		108,088,716		313,123,877
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	24	473,735			9	21,826			33	495,561
17. Incurred during current year Settled during current year:	146	14,124,592			47	1,393,868			193	15,518,461
18.1 By payment in full .....	141	13,753,839			49	1,399,207			190	15,153,047
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	141	13,753,839			49	1,399,207			190	15,153,047
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	141	13,753,839			49	1,399,207			190	15,153,047
19. Unpaid Dec. 31, current year (16+17-18.6) .....	29	844,488			7	16,487			36	860,975
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	8,788	1,606,050,399	(a)		340	217,703,334			9,128	1,823,753,733
21. Issued during year .....	8	2,343,000			9	9,710,775			17	12,053,775
22. Other changes to in force (Net) .....	(464)	(108,577,347)			335	340,996,243			(129)	232,418,896
23. In force December 31 of current year .....	8,332	1,499,816,052	(a)		684	568,410,352			9,016	2,068,226,404

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	7,370,658	7,368,439		3,451,344	3,414,081
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	1,553	1,553			
25.2 Guaranteed renewable (b) .....	7,731	7,731		4,542	4,542
25.3 Non-renewable for stated reasons only (b) .....	199	199			
25.4 Other accident only .....					
25.5 All other (b) .....	87	87		178	178
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,569	9,569		4,720	4,720
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,380,228	7,378,008		3,456,064	3,418,801

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1,655 and number of persons insured under indemnity only products 253 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	22,347,905		6,974,543		29,322,449
2. Annuity considerations .....	15,551,330				15,551,330
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	174,822,038		107,850,511		282,672,549
5. Totals (Sum of Lines 1 to 4) .....	212,721,274		114,825,054		327,546,327
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	200,938		48		200,986
6.2 Applied to pay renewal premiums .....	137,103				137,103
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	281,140		49		281,189
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	619,181		97		619,278
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	26				26
7.3 Other .....	9,983				9,983
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	10,009				10,009
8. Grand Totals (Lines 6.5 plus 7.4) .....	629,190		97		629,287
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,917,120		1,246,647		9,163,767
10. Matured endowments .....	31,428				31,428
11. Annuity benefits .....	119,815,412		266,649,001		386,464,413
12. Surrender values and withdrawals for life contracts .....	14,344,743		7,152		14,351,895
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	24,014				24,014
15. Totals .....	142,132,718		267,902,801		410,035,518
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	21	937,124			5	22,614			26	959,738
17. Incurred during current year Settled during current year:	121	7,912,241			10	36,054			131	7,948,295
18.1 By payment in full .....	129	8,228,925			9	31,219			138	8,260,144
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	129	8,228,925			9	31,219			138	8,260,144
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	129	8,228,925			9	31,219			138	8,260,144
19. Unpaid Dec. 31, current year (16+17-18.6) .....	13	620,440			6	27,449			19	647,889
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	13,984	3,354,977,454	(a)		144	355,991,398			14,128	3,710,968,851
21. Issued during year .....	42	37,548,084							42	37,548,084
22. Other changes to in force (Net) .....	(882)	(244,815,152)				1,746,444			(882)	(243,068,708)
23. In force December 31 of current year .....	13,144	3,147,710,386	(a)		144	357,737,841			13,288	3,505,448,227

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	4,104,891	3,699,265		2,349,440	2,459,738
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	37,910	37,910		26,130	26,130
25.3 Non-renewable for stated reasons only (b) .....	897	897			
25.4 Other accident only .....					
25.5 All other (b) .....	1,623	1,623			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	40,430	40,430		26,130	26,130
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,145,321	3,739,695		2,375,571	2,485,869

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1,925 and number of persons insured under indemnity only products 831 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	5,684,721		41,706,736		47,391,456
2. Annuity considerations .....	2,852,133		89,716		2,941,849
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	77,878,848		52,764,794		130,643,642
5. Totals (Sum of Lines 1 to 4) .....	86,415,701		94,561,246		180,976,948
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	231,681				231,681
6.2 Applied to pay renewal premiums .....	337,364		7		337,371
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	392,746				392,746
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	961,791		7		961,797
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	397				397
7.3 Other .....	5,917				5,917
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	6,313				6,313
8. Grand Totals (Lines 6.5 plus 7.4) .....	968,104		7		968,111
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,699,713		274,275		3,973,988
10. Matured endowments .....	84,426				84,426
11. Annuity benefits .....	74,493,074		81,158,725		155,651,799
12. Surrender values and withdrawals for life contracts .....	37,683,037		9,633		37,692,670
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1,398				1,398
15. Totals .....	115,961,648		81,442,633		197,404,281
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	14	147,768			8	16,614			22	164,382
17. Incurred during current year Settled during current year:	81	3,640,308			16	273,275			97	3,913,583
18.1 By payment in full .....	87	3,640,363			20	282,984			107	3,923,347
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	87	3,640,363			20	282,984			107	3,923,347
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	87	3,640,363			20	282,984			107	3,923,347
19. Unpaid Dec. 31, current year (16+17-18.6) .....	8	147,713			4	6,904			12	154,617
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	6,579	1,443,348,868	(a)		469	375,182,323			7,048	1,818,531,192
21. Issued during year .....	6	4,980,873			335	719,622,030			341	724,602,903
22. Other changes to in force (Net) .....	(394)	(170,460,093)			(2)	(2,027,921)			(396)	(172,488,014)
23. In force December 31 of current year .....	6,191	1,277,869,649	(a)		802	1,092,776,433			6,993	2,370,646,081

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	1,280,044	813,301		476,037	643,337
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	18,552	18,552		23,261	23,261
25.3 Non-renewable for stated reasons only (b) .....	619	619			
25.4 Other accident only .....					
25.5 All other (b) .....	295	295			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	19,466	19,466		23,261	23,261
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,299,510	832,767		499,297	666,597

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 729 and number of persons insured under indemnity only products 319 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	3,336,119		50,023		3,386,142
2. Annuity considerations .....	964,107				964,107
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	21,489,702		5,783,832		27,273,534
5. Totals (Sum of Lines 1 to 4) .....	25,789,929		5,833,855		31,623,784
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	64,629				64,629
6.2 Applied to pay renewal premiums .....	37,420				37,420
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	103,791				103,791
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	205,839				205,839
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	91				91
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	91				91
8. Grand Totals (Lines 6.5 plus 7.4) .....	205,930				205,930
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,940,039				1,940,039
10. Matured endowments .....	7,573				7,573
11. Annuity benefits .....	14,567,374		10,107,104		24,674,478
12. Surrender values and withdrawals for life contracts .....	1,065,495				1,065,495
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	55,102				55,102
15. Totals .....	17,635,584		10,107,104		27,742,687
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	5	131,181							5	131,181
17. Incurred during current year Settled during current year:	38	1,864,982							38	1,864,982
18.1 By payment in full .....	39	1,834,021							39	1,834,021
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	39	1,834,021							39	1,834,021
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	39	1,834,021							39	1,834,021
19. Unpaid Dec. 31, current year (16+17-18.6) .....	4	162,142							4	162,142
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	3,782	414,147,510	(a)		1	23,663,196			3,783	437,810,706
21. Issued during year .....										
22. Other changes to in force (Net) .....	(207)	(18,313,318)				(145,601)			(207)	(18,458,919)
23. In force December 31 of current year .....	3,575	395,834,192	(a)		1	23,517,595			3,576	419,351,787

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	814,796	791,370		322,707	315,307
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	129,286	129,286		58,908	58,908
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	129,286	129,286		58,908	58,908
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	944,082	920,656		381,615	374,215

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 8 and number of persons  
insured under indemnity only products 496 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	6,535,898		8,162,450		14,698,349
2. Annuity considerations .....	8,943,278				8,943,278
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	70,076,039		47,410,797		117,486,836
5. Totals (Sum of Lines 1 to 4) .....	85,555,216		55,573,247		141,128,463
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	93,832		27		93,859
6.2 Applied to pay renewal premiums .....	67,899				67,899
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	219,245		6		219,251
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	380,976		34		381,010
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	328				328
7.3 Other .....	2,610				2,610
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	2,938				2,938
8. Grand Totals (Lines 6.5 plus 7.4) .....	383,914		34		383,947
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,424,833		84,594		1,509,427
10. Matured endowments .....	5,859				5,859
11. Annuity benefits .....	54,786,765		74,681,009		129,467,774
12. Surrender values and withdrawals for life contracts .....	5,941,035		7,230		5,948,265
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	17,352				17,352
15. Totals .....	62,175,844		74,772,833		136,948,676
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	15	213,854			3	118,684			18	332,538
17. Incurred during current year Settled during current year:	34	1,353,789			15	33,974			49	1,387,763
18.1 By payment in full .....	39	1,475,835			13	125,376			52	1,601,211
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	39	1,475,835			13	125,376			52	1,601,211
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	39	1,475,835			13	125,376			52	1,601,211
19. Unpaid Dec. 31, current year (16+17-18.6) .....	10	91,808			5	27,282			15	119,090
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	3,762	658,926,066	(a)		182	228,399,772			3,944	887,325,838
21. Issued during year .....	16	17,400,000			19	27,756,245			35	45,156,245
22. Other changes to in force (Net) .....	(210)	(25,694,861)				4,554,873			(210)	(21,139,988)
23. In force December 31 of current year .....	3,568	650,631,205	(a)		201	260,710,890			3,769	911,342,095

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	5,185,376	4,795,892		2,164,271	3,008,271
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	3,711	3,711		11,416	11,416
25.3 Non-renewable for stated reasons only (b) .....	95	95			
25.4 Other accident only .....					
25.5 All other (b) .....	1,053	1,053			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,859	4,859		11,416	11,416
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	5,190,235	4,800,751		2,175,687	3,019,687

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1,022 and number of persons insured under indemnity only products 893 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	373,635		10,389		384,024
2. Annuity considerations .....	1,290,444				1,290,444
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	7,056,243		6,153,245		13,209,488
5. Totals (Sum of Lines 1 to 4) .....	8,720,322		6,163,634		14,883,956
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	12,078				12,078
6.2 Applied to pay renewal premiums .....	11,896				11,896
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	37,419				37,419
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	61,393				61,393
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	61,393				61,393
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	854,173		39,383		893,555
10. Matured endowments .....					
11. Annuity benefits .....	5,937,462		8,383,736		14,321,198
12. Surrender values and withdrawals for life contracts .....	516,338		3,951		520,289
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4,809				4,809
15. Totals .....	7,312,781		8,427,070		15,739,851
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	2	30,765			1	3,000			3	33,765
17. Incurred during current year Settled during current year:	19	856,121			3	29,383			22	885,503
18.1 By payment in full .....	19	880,676			2	27,378			21	908,053
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	19	880,676			2	27,378			21	908,053
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	19	880,676			2	27,378			21	908,053
19. Unpaid Dec. 31, current year (16+17-18.6) .....	2	6,210			2	5,005			4	11,215
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	610	101,256,523	(a)		1	4,517,952			611	105,774,475
21. Issued during year .....										
22. Other changes to in force (Net) .....	(7)	(13,421,476)				(53,382)			(7)	(13,474,859)
23. In force December 31 of current year .....	603	87,835,046	(a)		1	4,464,570			604	92,299,616

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	53,957	82,265		59,953	60,453
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	1,857	1,857		5,483	5,483
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,857	1,857		5,483	5,483
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	55,814	84,122		65,436	65,936

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 4 and number of persons  
insured under indemnity only products 112 .





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	939,763		13,255		953,018
2. Annuity considerations .....	1,051,769				1,051,769
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	28,801,457		13,977,393		42,778,850
5. Totals (Sum of Lines 1 to 4) .....	30,792,990		13,990,648		44,783,637
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	32,163		20		32,183
6.2 Applied to pay renewal premiums .....	17,795				17,795
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	78,722				78,722
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	128,680		20		128,700
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	197				197
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	197				197
8. Grand Totals (Lines 6.5 plus 7.4) .....	128,877		20		128,897
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,247,441		188,773		1,436,214
10. Matured endowments .....	4,000				4,000
11. Annuity benefits .....	23,483,622		23,593,974		47,077,597
12. Surrender values and withdrawals for life contracts .....	660,607		3,226		663,833
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4				4
15. Totals .....	25,395,674		23,785,974		49,181,647
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	5	20,788							5	20,788
17. Incurred during current year Settled during current year:	51	1,243,995			2	3,761			53	1,247,756
18.1 By payment in full .....	53	1,260,063			2	3,761			55	1,263,824
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	53	1,260,063			2	3,761			55	1,263,824
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	53	1,260,063			2	3,761			55	1,263,824
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	4,720							3	4,720
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	940	149,026,208	(a)		1	120,952,001			941	269,978,209
21. Issued during year .....	1	400,000							1	400,000
22. Other changes to in force (Net) .....	(72)	(7,463,467)				(18,355)			(72)	(7,481,822)
23. In force December 31 of current year .....	869	141,962,741	(a)		1	120,933,646			870	262,896,388

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,153,437	608,444		380,217	535,017
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	69	69			
25.3 Non-renewable for stated reasons only (b) .....	16,525	16,525			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	16,594	16,594			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,170,030	625,037		380,217	535,017

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 2,133 and number of persons insured under indemnity only products 243 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,802,721		23,035		1,825,756
2. Annuity considerations .....	1,108,177				1,108,177
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	44,397,115		6,390,906		50,788,021
5. Totals (Sum of Lines 1 to 4) .....	47,308,012		6,413,941		53,721,953
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	64,408				64,408
6.2 Applied to pay renewal premiums .....	41,558				41,558
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	51,091				51,091
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	157,058				157,058
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	247				247
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	247				247
8. Grand Totals (Lines 6.5 plus 7.4) .....	157,305				157,305
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	469,614		8,499		478,113
10. Matured endowments .....	2,298				2,298
11. Annuity benefits .....	30,845,703		5,714,566		36,560,269
12. Surrender values and withdrawals for life contracts .....	1,007,366		754		1,008,120
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	33,345				33,345
15. Totals .....	32,358,326		5,723,819		38,082,145
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	3	18,850			2	2,638			5	21,488
17. Incurred during current year Settled during current year:	18	469,614			3	8,499			21	478,113
18.1 By payment in full .....	16	459,300			2	7,440			18	466,740
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	16	459,300			2	7,440			18	466,740
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	16	459,300			2	7,440			18	466,740
19. Unpaid Dec. 31, current year (16+17-18.6) .....	5	29,163			3	3,697			8	32,860
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,392	407,413,724	(a)		51	12,374,113			1,443	419,787,838
21. Issued during year .....	11	6,400,000							11	6,400,000
22. Other changes to in force (Net) .....	(54)	(26,530,534)				144,091			(54)	(26,386,442)
23. In force December 31 of current year .....	1,349	387,283,191	(a)		51	12,518,205			1,400	399,801,395

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	718,561	692,284		881,981	882,181
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	1,719	1,719		179	179
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,719	1,719		179	179
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	720,281	694,003		882,160	882,360

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 622 and number of persons  
insured under indemnity only products 789 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,684,694		17,458		2,702,152
2. Annuity considerations .....	5,099,616				5,099,616
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	33,097,857		4,995,678		38,093,535
5. Totals (Sum of Lines 1 to 4) .....	40,882,167		5,013,136		45,895,303
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	98,222				98,222
6.2 Applied to pay renewal premiums .....	92,176				92,176
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	116,940				116,940
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	307,337				307,337
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	138				138
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	138				138
8. Grand Totals (Lines 6.5 plus 7.4) .....	307,475				307,475
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,362,860		30,584		2,393,444
10. Matured endowments .....	184,581				184,581
11. Annuity benefits .....	23,610,578		13,429,813		37,040,391
12. Surrender values and withdrawals for life contracts .....	3,410,078		2,103		3,412,181
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	9,250				9,250
15. Totals .....	29,577,346		13,462,499		43,039,846
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	10	810,535							10	810,535
17. Incurred during current year Settled during current year:	25	2,349,930			16	30,584			41	2,380,514
18.1 By payment in full .....	30	3,128,588			12	24,740			42	3,153,328
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	30	3,128,588			12	24,740			42	3,153,328
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	30	3,128,588			12	24,740			42	3,153,328
19. Unpaid Dec. 31, current year (16+17-18.6) .....	5	31,877			4	5,844			9	37,721
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	3,439	473,197,177	(a)		3	9,991,912			3,442	483,189,089
21. Issued during year .....	1	250,000							1	250,000
22. Other changes to in force (Net) .....	(175)	(22,590,193)				(256,909)			(175)	(22,847,103)
23. In force December 31 of current year .....	3,265	450,856,984	(a)		3	9,735,002			3,268	460,591,986

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,362,512	2,358,923		497,798	631,238
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	5,985	5,985		4,347	4,347
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	5,985	5,985		4,347	4,347
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,368,498	2,364,909		502,144	635,585

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 4 and number of persons insured under indemnity only products 18 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	33,104,199		15,429,774		48,533,973
2. Annuity considerations .....	18,984,105		3,552		18,987,657
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	254,886,849		122,141,600		377,028,449
5. Totals (Sum of Lines 1 to 4) .....	306,975,153		137,574,927		444,550,080
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	947,704		297		948,001
6.2 Applied to pay renewal premiums .....	1,292,750				1,292,750
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,629,906		13		1,629,920
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	3,870,361		310		3,870,671
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	144				144
7.3 Other .....	4,908				4,908
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	5,052				5,052
8. Grand Totals (Lines 6.5 plus 7.4) .....	3,875,413		310		3,875,723
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	17,912,624		521,130		18,433,754
10. Matured endowments .....	151,407				151,407
11. Annuity benefits .....	180,524,738		156,701,290		337,226,028
12. Surrender values and withdrawals for life contracts .....	27,815,978		32,586		27,848,564
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	178,466		929		179,395
15. Totals .....	226,583,213		157,255,935		383,839,148
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	76	3,768,021			5	26,766			81	3,794,787
17. Incurred during current year Settled during current year:	252	17,821,796			51	294,744			303	18,116,540
18.1 By payment in full .....	271	19,801,648			49	284,744			320	20,086,392
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	271	19,801,648			49	284,744			320	20,086,392
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	271	19,801,648			49	284,744			320	20,086,392
19. Unpaid Dec. 31, current year (16+17-18.6) .....	57	1,788,169			7	36,766			64	1,824,935
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	25,531	5,258,933,198	(a)		258	258,886,223			25,789	5,517,819,421
21. Issued during year .....	80	71,246,111			24	38,900,000			104	110,146,111
22. Other changes to in force (Net) .....	(1,675)	(430,287,755)			(6)	(3,440,122)			(1,681)	(433,727,876)
23. In force December 31 of current year .....	23,936	4,899,891,554	(a)		276	294,346,102			24,212	5,194,237,656

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	8,294,668	8,269,877		3,873,741	4,282,141
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	276	276		2,400	2,400
25.2 Guaranteed renewable (b) .....	37,275	37,275		32,240	32,240
25.3 Non-renewable for stated reasons only (b) .....	464	464			
25.4 Other accident only .....					
25.5 All other (b) .....	570	570			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	38,585	38,585		34,640	34,640
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	8,333,253	8,308,462		3,908,381	4,316,781

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1,299 and number of persons insured under indemnity only products 662 .



6 6 8 6 9 2 0 1 3 4 3 0 3 2 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2013

NAIC Group Code 0140

LIFE INSURANCE

NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	643,021		19,881		662,902
2. Annuity considerations .....	1,381,471				1,381,471
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	21,951,381		7,642,776		29,594,157
5. Totals (Sum of Lines 1 to 4) .....	23,975,873		7,662,656		31,638,529
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	31,907				31,907
6.2 Applied to pay renewal premiums .....	31,550				31,550
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	47,227		40		47,267
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	110,685		40		110,724
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	22				22
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	22				22
8. Grand Totals (Lines 6.5 plus 7.4) .....	110,707		40		110,746
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	365,510		25,819		391,329
10. Matured endowments .....					
11. Annuity benefits .....	23,863,273		14,441,679		38,304,952
12. Surrender values and withdrawals for life contracts .....	604,897		2,028		606,924
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4,518				4,518
15. Totals .....	24,838,197		14,469,526		39,307,723
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	7	94,488							7	94,488
17. Incurred during current year Settled during current year:	15	337,487			5	13,319			20	350,806
18.1 By payment in full .....	15	412,634			3	10,212			18	422,846
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	15	412,634			3	10,212			18	422,846
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	15	412,634			3	10,212			18	422,846
19. Unpaid Dec. 31, current year (16+17-18.6) .....	7	19,340			2	3,107			9	22,447
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,027	118,744,464	(a)			8,704,092			1,027	127,448,555
21. Issued during year .....										
22. Other changes to in force (Net) .....	(27)	(3,794,818)				(235,316)			(27)	(4,030,133)
23. In force December 31 of current year .....	1,000	114,949,646	(a)			8,468,776			1,000	123,418,422

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	221,391	230,754		117,440	445,440
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	84	84		106	106
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	84	84		106	106
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	221,475	230,838		117,546	445,546

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 9 and number of persons  
insured under indemnity only products 195 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	103,788,631		3,973,228		107,761,860
2. Annuity considerations .....	64,629,300				64,629,300
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	866,955,229		158,376,928		1,025,332,157
5. Totals (Sum of Lines 1 to 4) .....	1,035,373,160		162,350,157		1,197,723,317
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	1,661,808		136		1,661,944
6.2 Applied to pay renewal premiums .....	1,629,130		50		1,629,181
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	3,477,287		27		3,477,315
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	6,768,225		214		6,768,439
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	290				290
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	290				290
8. Grand Totals (Lines 6.5 plus 7.4) .....	6,768,515		214		6,768,729
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	33,523,903		8,708,829		42,232,732
10. Matured endowments .....	219,089				219,089
11. Annuity benefits .....	715,752,815		449,391,370		1,165,144,184
12. Surrender values and withdrawals for life contracts .....	55,171,591		2,263,521		57,435,111
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	550,271		25,186		575,457
15. Totals .....	805,217,668		460,388,905		1,265,606,574
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	168	4,673,111			21	47,700			189	4,720,812
17. Incurred during current year Settled during current year:	971	33,633,200			107	8,412,565			1,078	42,045,765
18.1 By payment in full .....	998	35,007,098			97	8,222,128			1,095	43,229,226
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	998	35,007,098			97	8,222,128			1,095	43,229,226
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	998	35,007,098			97	8,222,128			1,095	43,229,226
19. Unpaid Dec. 31, current year (16+17-18.6) .....	141	3,299,214			31	238,137			172	3,537,350
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	83,522	13,939,608,537	(a)		2,205	1,342,703,448			85,727	15,282,311,984
21. Issued during year .....	3,554	1,046,064,263							3,554	1,046,064,263
22. Other changes to in force (Net) .....	(5,737)	(969,147,614)			(415)	(330,312,684)			(6,152)	(1,299,460,297)
23. In force December 31 of current year .....	81,339	14,016,525,186	(a)		1,790	1,012,390,764			83,129	15,028,915,950

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	14,237,026	15,699,626		9,459,457	8,650,327
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	150	150			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	923,535	923,535		3,132,038	3,132,041
25.2 Guaranteed renewable (b) .....	354,021	354,021		434,372	434,372
25.3 Non-renewable for stated reasons only (b) .....	38,538	38,538			
25.4 Other accident only .....					
25.5 All other (b) .....	1,816	1,816			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,317,910	1,317,910		3,566,410	3,566,413
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	15,555,085	17,017,686		13,025,867	12,216,740

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 15,136 and number of persons insured under indemnity only products 1,554 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	58,409,146		21,300,600		79,709,746
2. Annuity considerations .....	16,847,563				16,847,563
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	139,187,313		28,254,243		167,441,556
5. Totals (Sum of Lines 1 to 4) .....	214,444,022		49,554,843		263,998,865
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	920,541		5,114		925,655
6.2 Applied to pay renewal premiums .....	598,772				598,772
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,342,950		32		1,342,982
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,862,263		5,145		2,867,408
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	67				67
7.3 Other .....	2,068				2,068
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	2,135				2,135
8. Grand Totals (Lines 6.5 plus 7.4) .....	2,864,398		5,145		2,869,543
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	21,592,070		2,028,597		23,620,667
10. Matured endowments .....	110,725				110,725
11. Annuity benefits .....	133,725,240		43,480,499		177,205,739
12. Surrender values and withdrawals for life contracts .....	26,364,204		20,124		26,384,329
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	387,121				387,121
15. Totals .....	182,179,361		45,529,220		227,708,581
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	56	863,816			2	3,682			58	867,498
17. Incurred during current year Settled during current year:	718	21,162,175			11	751,011			729	21,913,186
18.1 By payment in full .....	701	20,187,748			12	401,547			713	20,589,295
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	701	20,187,748			12	401,547			713	20,589,295
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	701	20,187,748			12	401,547			713	20,589,295
19. Unpaid Dec. 31, current year (16+17-18.6) .....	73	1,838,244			1	353,146			74	2,191,389
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	55,960	6,237,988,755	(a)		646	1,361,023,120			56,606	7,599,011,875
21. Issued during year .....	73	76,219,787			96	90,779,938			169	166,999,725
22. Other changes to in force (Net) .....	(3,438)	(418,543,059)			3	21,869,463			(3,435)	(396,673,596)
23. In force December 31 of current year .....	52,595	5,895,665,484	(a)		745	1,473,672,521			53,340	7,369,338,004

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	11,094,564	11,037,254		7,577,810	7,498,709
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	89	89			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	45,605	45,605		16,141	16,141
25.2 Guaranteed renewable (b) .....	1,289,703	1,289,703		1,332,866	1,332,866
25.3 Non-renewable for stated reasons only (b) .....	27,872	27,872	15		
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,363,180	1,363,180	15	1,349,007	1,349,007
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	12,457,833	12,400,523	15	8,926,818	8,847,717

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 6 and number of persons insured under indemnity only products 939 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	28,262,144		3,742		28,265,886
2. Annuity considerations .....	(542)		48,872		48,331
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	2,246,250		13,223,156		15,469,407
5. Totals (Sum of Lines 1 to 4) .....	30,507,853		13,275,770		43,783,623
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	2,845				2,845
6.2 Applied to pay renewal premiums .....	6,680				6,680
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	8,374				8,374
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	17,899				17,899
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	542				542
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	542				542
8. Grand Totals (Lines 6.5 plus 7.4) .....	18,441				18,441
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	81,526		2,205		83,731
10. Matured endowments .....					
11. Annuity benefits .....	3,447,488		6,282,047		9,729,535
12. Surrender values and withdrawals for life contracts .....	58,886				58,886
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1				1
15. Totals .....	3,587,901		6,284,252		9,872,153
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	1	1,710			1	4,559			2	6,269
17. Incurred during current year Settled during current year:	3	81,526			1	2,205			4	83,731
18.1 By payment in full .....	4	83,236			2	6,764			6	90,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	4	83,236			2	6,764			6	90,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	4	83,236			2	6,764			6	90,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	941	583,746,676	(a)			3,189,534			941	586,936,210
21. Issued during year .....	343	238,522,820			19	18,748,573			362	257,271,393
22. Other changes to in force (Net) .....	(7)	651,650				(56,763)			(7)	594,887
23. In force December 31 of current year .....	1,277	822,921,146	(a)		19	21,881,344			1,296	844,802,490

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	85,060	85,625		7,259	8,659
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	85,060	85,625		7,259	8,659

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 2 and number of persons  
insured under indemnity only products 29 .





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	37,926,204		22,351,569		60,277,773
2. Annuity considerations .....	32,482,768		102,097		32,584,864
3. Deposit-type contract funds .....	887,490,030	XXX		XXX	887,490,030
4. Other considerations .....	341,265,027		316,876,468		658,141,495
5. Totals (Sum of Lines 1 to 4) .....	1,299,164,029		339,330,134		1,638,494,162
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	1,322,809		7,362		1,330,172
6.2 Applied to pay renewal premiums .....	796,297				796,297
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	2,079,653				2,079,653
6.4 Other .....	(3,741,544)		(1,712)		(3,743,255)
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	457,215		5,651		462,866
Annuities:					
7.1 Paid in cash or left on deposit .....	49,174				49,174
7.2 Applied to provide paid-up annuities .....	106				106
7.3 Other .....	155				155
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	49,435				49,435
8. Grand Totals (Lines 6.5 plus 7.4) .....	506,650		5,651		512,301
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	37,696,115		10,333,356		48,029,471
10. Matured endowments .....	254,660				254,660
11. Annuity benefits .....	240,113,323		413,092,712		653,206,035
12. Surrender values and withdrawals for life contracts .....	(30,811,208)		(944,241)		(31,755,448)
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	212,179		(360,692)		(148,512)
15. Totals .....	247,465,069		422,121,136		669,586,205
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	201	11,307,457			13	327,473			214	11,634,930
17. Incurred during current year Settled during current year:	1,393	39,572,886			3	1,664,749			1,396	41,237,636
18.1 By payment in full .....	1,466	41,388,134			3	1,664,749			1,469	43,052,883
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1,466	41,388,134			3	1,664,749			1,469	43,052,883
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1,466	41,388,134			3	1,664,749			1,469	43,052,883
19. Unpaid Dec. 31, current year (16+17-18.6) .....	128	9,492,209			13	327,473			141	9,819,682
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	94,093	9,325,420,749	(a)		562	5,069,623,782			94,655	14,395,044,531
21. Issued during year .....	60	28,393,661							60	28,393,661
22. Other changes to in force (Net) .....	(5,087)	(336,805,586)			(2)	8,979,279			(5,089)	(327,826,307)
23. In force December 31 of current year .....	89,066	9,017,008,823	(a)		560	5,078,603,061			89,626	14,095,611,884

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	16,078,551	16,028,779		7,038,123	13,888,485
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....		(16)			59
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	340	272			82
25.2 Guaranteed renewable (b) .....	1,931,898	2,052,826		1,269,806	1,100,889
25.3 Non-renewable for stated reasons only (b) .....					(22,442)
25.4 Other accident only .....					
25.5 All other (b) .....	459	459		2,400	2,154
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,932,696	2,053,556		1,272,206	1,080,683
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	18,011,247	18,082,320		8,310,329	14,969,228

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....129 and number of persons insured under indemnity only products .....1,286 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	1,381,896		60,042		1,441,937
2. Annuity considerations .....	3,588,562				3,588,562
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	38,389,876		41,858,608		80,248,484
5. Totals (Sum of Lines 1 to 4) .....	43,360,334		41,918,649		85,278,983
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	36,398				36,398
6.2 Applied to pay renewal premiums .....	41,298				41,298
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	104,892				104,892
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	182,589				182,589
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	403				403
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	403				403
8. Grand Totals (Lines 6.5 plus 7.4) .....	182,991				182,991
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,564,948		55,787		1,620,735
10. Matured endowments .....					
11. Annuity benefits .....	32,475,779		43,539,028		76,014,807
12. Surrender values and withdrawals for life contracts .....	2,201,160		2,111		2,203,272
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	6,864				6,864
15. Totals .....	36,248,751		43,596,926		79,845,677
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	6	25,083			6	25,559			12	50,642
17. Incurred during current year Settled during current year:	16	1,566,296			12	23,287			28	1,589,584
18.1 By payment in full .....	12	1,524,812			11	36,444			23	1,561,256
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	12	1,524,812			11	36,444			23	1,561,256
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	12	1,524,812			11	36,444			23	1,561,256
19. Unpaid Dec. 31, current year (16+17-18.6) .....	10	66,568			7	12,402			17	78,970
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,449	202,077,393	(a)		22	12,255,122			1,471	214,332,515
21. Issued during year .....										
22. Other changes to in force (Net) .....	(87)	(21,025,229)				27,836			(87)	(20,997,393)
23. In force December 31 of current year .....	1,362	181,052,164	(a)		22	12,282,958			1,384	193,335,123

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,251,125	1,140,451		390,969	820,869
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	110	110			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	9,579	9,579		11,741	11,741
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,579	9,579		11,741	11,741
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,260,814	1,150,140		402,709	832,609

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 195 and number of persons insured under indemnity only products 294 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2013

NAIC Group Code 0140

LIFE INSURANCE

NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,623,497		27,109		1,650,606
2. Annuity considerations .....	6,157,561				6,157,561
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	48,413,995		29,069,698		77,483,693
5. Totals (Sum of Lines 1 to 4) .....	56,195,053		29,096,806		85,291,860
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	93,673				93,673
6.2 Applied to pay renewal premiums .....	116,925		12		116,937
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	114,405				114,405
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	325,003		12		325,016
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	38				38
7.3 Other .....	2,017				2,017
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	2,055				2,055
8. Grand Totals (Lines 6.5 plus 7.4) .....	327,058		12		327,070
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	453,183		279,296		732,479
10. Matured endowments .....	3,311				3,311
11. Annuity benefits .....	66,505,064		44,535,596		111,040,659
12. Surrender values and withdrawals for life contracts .....	17,090,183		22,906		17,113,088
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	26,912				26,912
15. Totals .....	84,078,652		44,837,797		128,916,449
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	7	28,158							7	28,158
17. Incurred during current year Settled during current year:	41	369,583			3	279,296			44	648,879
18.1 By payment in full .....	40	329,805			2	7,061			42	336,866
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	40	329,805			2	7,061			42	336,866
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	40	329,805			2	7,061			42	336,866
19. Unpaid Dec. 31, current year (16+17-18.6) .....	8	67,936			1	272,235			9	340,171
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	2,392	411,606,921	(a)		39	89,828,022			2,431	501,434,943
21. Issued during year .....	2	921,347							2	921,347
22. Other changes to in force (Net) .....	(179)	(127,143,518)			(2)	(925,251)			(181)	(128,068,769)
23. In force December 31 of current year .....	2,215	285,384,750	(a)		37	88,902,771			2,252	374,287,521

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,044,826	927,418		420,767	422,167
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	6,850	6,850		9,714	9,714
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	190	190			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	7,040	7,040		9,714	9,714
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,051,866	934,458		430,481	431,881

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 310 and number of persons insured under indemnity only products 265 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	69,798,216		6,347,199		76,145,415
2. Annuity considerations .....	54,513,380				54,513,380
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	393,021,971		64,924,678		457,946,649
5. Totals (Sum of Lines 1 to 4) .....	517,333,567		71,271,877		588,605,443
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	2,764,456		69		2,764,525
6.2 Applied to pay renewal premiums .....	2,178,049		26		2,178,075
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	3,866,371		49		3,866,421
6.4 Other .....	135,094				135,094
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	8,943,970		144		8,944,115
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	8,916				8,916
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	8,916				8,916
8. Grand Totals (Lines 6.5 plus 7.4) .....	8,952,886		144		8,953,031
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	44,538,203		1,471,742		46,009,945
10. Matured endowments .....	388,819				388,819
11. Annuity benefits .....	304,679,394		182,135,605		486,814,999
12. Surrender values and withdrawals for life contracts .....	43,162,990		57,892		43,220,882
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	660,486				660,486
15. Totals .....	393,429,891		183,665,239		577,095,130
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	194	8,015,640			10	83,382			204	8,099,022
17. Incurred during current year Settled during current year:	1,304	44,775,474			112	404,091			1,416	45,179,566
18.1 By payment in full .....	1,319	40,412,002			108	358,007			1,427	40,770,009
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1,319	40,412,002			108	358,007			1,427	40,770,009
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1,319	40,412,002			108	358,007			1,427	40,770,009
19. Unpaid Dec. 31, current year (16+17-18.6) .....	179	12,379,112			14	129,467			193	12,508,579
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	116,739	9,639,680,972	(a)		509	1,021,284,491			117,248	10,660,965,464
21. Issued during year .....	62	45,163,995							62	45,163,995
22. Other changes to in force (Net) .....	(6,228)	(583,149,642)				(672,790)			(6,228)	(583,822,432)
23. In force December 31 of current year .....	110,573	9,101,695,326	(a)		509	1,020,611,701			111,082	10,122,307,027

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	10,544,955	10,738,127		6,800,851	7,616,351
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....				48,422	48,422
25.2 Guaranteed renewable (b) .....	1,424,022	1,424,022		1,096,955	1,096,955
25.3 Non-renewable for stated reasons only (b) .....	2,491	2,491		2,212	2,212
25.4 Other accident only .....					
25.5 All other (b) .....	1,487	1,487			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,428,000	1,428,000		1,147,588	1,147,588
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	11,972,955	12,166,127		7,948,439	8,763,939

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 8,416 and number of persons insured under indemnity only products 1,852



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,976,487		15,585		3,992,072
2. Annuity considerations	3,487,826				3,487,826
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations	26,063,180		4,428,950		30,492,129
5. Totals (Sum of Lines 1 to 4)	33,527,492		4,444,535		37,972,027
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	192,803				192,803
6.2 Applied to pay renewal premiums	150,703				150,703
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	252,452				252,452
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)	595,958				595,958
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other	52				52
7.4 Totals (Sum of Lines 7.1 to 7.3)	52				52
8. Grand Totals (Lines 6.5 plus 7.4)	596,011				596,011
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,638,391		21,642		1,660,033
10. Matured endowments	8,267				8,267
11. Annuity benefits	32,115,162		10,152,095		42,267,257
12. Surrender values and withdrawals for life contracts	2,348,579		4,970		2,353,549
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health	69,277				69,277
15. Totals	36,179,676		10,178,707		46,358,383
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	8	5,504,859			1	4,860			9	5,509,719
17. Incurred during current year	62	1,629,625			6	21,642			68	1,651,267
Settled during current year:										
18.1 By payment in full	63	7,109,499			6	24,129			69	7,133,628
18.2 By payment on compromised claims										
18.3 Totals paid	63	7,109,499			6	24,129			69	7,133,628
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	63	7,109,499			6	24,129			69	7,133,628
19. Unpaid Dec. 31, current year (16+17-18.6)	7	24,984			1	2,373			8	27,357
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	6,787	679,696,670	(a)		10	9,480,228			6,797	689,176,898
21. Issued during year										
22. Other changes to in force (Net)	(386)	(36,277,724)				(21,294)			(386)	(36,299,018)
23. In force December 31 of current year	6,401	643,418,946	(a)		10	9,458,934			6,411	652,877,880

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	12,354,587	15,151,901		14,027,451	13,492,951
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b)	11,395	11,395			
25.2 Guaranteed renewable (b)	56,412	56,412		71,315	71,315
25.3 Non-renewable for stated reasons only (b)	114	114			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	67,921	67,921		71,315	71,315
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	12,422,509	15,219,823		14,098,767	13,564,267

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 4,784 and number of persons insured under indemnity only products 68 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	7,405,099		203,980		7,609,079
2. Annuity considerations .....	5,662,301				5,662,301
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	55,561,060		7,997,731		63,558,791
5. Totals (Sum of Lines 1 to 4) .....	68,628,460		8,201,711		76,830,171
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	252,800		59		252,859
6.2 Applied to pay renewal premiums .....	157,981				157,981
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	357,486				357,486
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	768,267		59		768,326
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	138				138
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	138				138
8. Grand Totals (Lines 6.5 plus 7.4) .....	768,405		59		768,464
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	11,366,074		51,952		11,418,026
10. Matured endowments .....	66,286				66,286
11. Annuity benefits .....	46,551,733		17,105,418		63,657,151
12. Surrender values and withdrawals for life contracts .....	6,609,454				6,609,454
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	147,070				147,070
15. Totals .....	64,740,617		17,157,370		81,897,987
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	23	284,370							23	284,370
17. Incurred during current year .....	181	11,308,351							181	11,308,351
Settled during current year:										
18.1 By payment in full .....	185	11,148,576							185	11,148,576
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	185	11,148,576							185	11,148,576
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	185	11,148,576							185	11,148,576
19. Unpaid Dec. 31, current year (16+17-18.6) .....	19	444,145							19	444,145
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	13,904	1,236,198,073	(a)		42	146,991,838			13,946	1,383,189,911
21. Issued during year .....	2	535,000							2	535,000
22. Other changes to in force (Net) .....	(697)	(77,801,537)				(13,751)			(697)	(77,815,288)
23. In force December 31 of current year .....	13,209	1,158,931,536	(a)		42	146,978,087			13,251	1,305,909,623

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	4,481,132	3,693,278		1,766,066	1,738,902
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	340,399	340,399		197,320	197,320
25.3 Non-renewable for stated reasons only (b) .....	324	324			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	340,724	340,724		197,320	197,320
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,821,856	4,034,001		1,963,386	1,936,222

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 66 and number of persons insured under indemnity only products 595 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	688,197		6,447		694,644
2. Annuity considerations .....	161,280				161,280
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	6,062,704		1,237,390		7,300,093
5. Totals (Sum of Lines 1 to 4) .....	6,912,181		1,243,836		8,156,017
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	6,338		7		6,345
6.2 Applied to pay renewal premiums .....	6,926				6,926
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	17,567				17,567
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	30,831		7		30,838
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	183				183
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	183				183
8. Grand Totals (Lines 6.5 plus 7.4) .....	31,014		7		31,021
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	452,588				452,588
10. Matured endowments .....					
11. Annuity benefits .....	7,634,830		6,877,268		14,512,097
12. Surrender values and withdrawals for life contracts .....	703,019		1,051		704,070
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	5				5
15. Totals .....	8,790,441		6,878,319		15,668,760
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	4	452,588							4	452,588
Settled during current year:										
18.1 By payment in full .....	3	451,512							3	451,512
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	3	451,512							3	451,512
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	3	451,512							3	451,512
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	1,075							1	1,075
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	620	144,922,257	(a)		2	6,464,674			622	151,386,931
21. Issued during year .....										
22. Other changes to in force (Net) .....	(56)	1,226,894				3,515			(56)	1,230,409
23. In force December 31 of current year .....	564	146,149,151	(a)		2	6,468,188			566	152,617,339

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	194,429	126,394		64,498	64,598
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	194,429	126,394		64,498	64,598

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 129 and number of persons  
insured under indemnity only products 68 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	6,798,807		132,972		6,931,779
2. Annuity considerations .....	10,200,134				10,200,134
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	96,391,936		65,892,334		162,284,270
5. Totals (Sum of Lines 1 to 4) .....	113,390,877		66,025,306		179,416,183
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	250,835		26		250,861
6.2 Applied to pay renewal premiums .....	295,972		8		295,979
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	484,408				484,408
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,031,215		34		1,031,248
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	330				330
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	330				330
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,031,545		34		1,031,579
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,442,139		340,815		4,782,953
10. Matured endowments .....	23,690				23,690
11. Annuity benefits .....	83,379,922		71,854,099		155,234,022
12. Surrender values and withdrawals for life contracts .....	4,776,043		1,303		4,777,345
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	82,806				82,806
15. Totals .....	92,704,600		72,196,217		164,900,816
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	14	156,672							14	156,672
17. Incurred during current year Settled during current year:	111	4,354,702			11	25,415			122	4,380,117
18.1 By payment in full .....	110	4,263,942			11	25,415			121	4,289,358
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	110	4,263,942			11	25,415			121	4,289,358
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	110	4,263,942			11	25,415			121	4,289,358
19. Unpaid Dec. 31, current year (16+17-18.6) .....	15	247,432							15	247,432
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	11,568	1,227,559,707	(a)		291	339,237,564			11,859	1,566,797,270
21. Issued during year .....										
22. Other changes to in force (Net) .....	(652)	(68,904,377)				(9,931,373)			(652)	(78,835,749)
23. In force December 31 of current year .....	10,916	1,158,655,330	(a)		291	329,306,191			11,207	1,487,961,521

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	3,090,298	3,074,203		1,440,399	1,442,999
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	190,880	190,880		125,930	125,930
25.3 Non-renewable for stated reasons only (b) .....	731	731			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	191,611	191,611		125,930	125,930
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,281,910	3,265,814		1,566,329	1,568,929

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 215 and number of persons  
insured under indemnity only products 1,052





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	34,987,021		8,813,173		43,800,195
2. Annuity considerations .....	24,324,722				24,324,722
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	277,755,418		210,482,667		488,238,086
5. Totals (Sum of Lines 1 to 4) .....	337,067,162		219,295,841		556,363,003
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	585,727				585,727
6.2 Applied to pay renewal premiums .....	560,221				560,221
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,316,115		24		1,316,139
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,462,062		24		2,462,086
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	111				111
7.3 Other .....	5,871				5,871
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	5,982				5,982
8. Grand Totals (Lines 6.5 plus 7.4) .....	2,468,044		24		2,468,068
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	13,718,825		1,384,938		15,103,763
10. Matured endowments .....	51,047				51,047
11. Annuity benefits .....	270,946,365		209,724,293		480,670,658
12. Surrender values and withdrawals for life contracts .....	37,783,163		321,090		38,104,253
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	81,684				81,684
15. Totals .....	322,581,084		211,430,322		534,011,406
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	72	3,669,094			1	176,726			73	3,845,820
17. Incurred during current year Settled during current year:	213	13,643,835			7	1,021,588			220	14,665,423
18.1 By payment in full .....	214	15,951,090			8	1,198,314			222	17,149,405
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	214	15,951,090			8	1,198,314			222	17,149,405
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	214	15,951,090			8	1,198,314			222	17,149,405
19. Unpaid Dec. 31, current year (16+17-18.6) .....	71	1,361,838							71	1,361,839
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	22,797	5,446,528,638	(a)		465	942,503,300			23,262	6,389,031,938
21. Issued during year .....	110	95,916,499			7	3,166,086			117	99,082,585
22. Other changes to in force (Net) .....	(1,333)	(490,446,512)			(3)	6,519,522			(1,336)	(483,926,990)
23. In force December 31 of current year .....	21,574	5,051,998,625	(a)		469	952,188,908			22,043	6,004,187,533

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	10,075,746	8,644,840		4,538,543	5,638,843
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	308	308			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	2,102	2,102			
25.2 Guaranteed renewable (b) .....	95,375	95,375		81,175	81,175
25.3 Non-renewable for stated reasons only (b) .....	131	131			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	97,608	97,608		81,175	81,175
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	10,173,661	8,742,755		4,619,718	5,720,018

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 4,061 and number of persons insured under indemnity only products 3,035 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,105,715		9,223,001		11,328,716
2. Annuity considerations .....	4,359,949				4,359,949
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	30,373,334		5,124,986		35,498,320
5. Totals (Sum of Lines 1 to 4) .....	36,838,997		14,347,988		51,186,985
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	17,227				17,227
6.2 Applied to pay renewal premiums .....	19,642				19,642
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	26,077				26,077
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	62,947				62,947
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	370				370
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	370				370
8. Grand Totals (Lines 6.5 plus 7.4) .....	63,318				63,318
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	82,255				82,255
10. Matured endowments .....					
11. Annuity benefits .....	27,187,383		6,558,207		33,745,589
12. Surrender values and withdrawals for life contracts .....	1,027,807				1,027,807
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	258				258
15. Totals .....	28,297,703		6,558,207		34,855,910
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	2	1,445			1	1,600			3	3,045
17. Incurred during current year Settled during current year:	7	82,255							7	82,255
18.1 By payment in full .....	8	81,200			1	1,600			9	82,800
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	8	81,200			1	1,600			9	82,800
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	8	81,200			1	1,600			9	82,800
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	2,500							1	2,500
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	894	202,484,422	(a)		2	17,621,685			896	220,106,107
21. Issued during year .....	15	5,553,164			72	109,365,119			87	114,918,283
22. Other changes to in force (Net) .....	(61)	(11,269,971)				(151,600)			(61)	(11,421,571)
23. In force December 31 of current year .....	848	196,767,616	(a)		74	126,835,204			922	323,602,819

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	279,304	267,377		102,683	104,483
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	279,304	267,377		102,683	104,483

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 25 and number of persons insured under indemnity only products 133 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,670,461		7,594		1,678,055
2. Annuity considerations .....	1,047,753				1,047,753
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	11,049,572		6,318,329		17,367,901
5. Totals (Sum of Lines 1 to 4) .....	13,767,785		6,325,923		20,093,708
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	106,568				106,568
6.2 Applied to pay renewal premiums .....	158,895				158,895
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	173,944				173,944
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	439,406				439,406
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	439,406				439,406
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,104,389				2,104,389
10. Matured endowments .....	23,757				23,757
11. Annuity benefits .....	12,324,654		5,604,310		17,928,965
12. Surrender values and withdrawals for life contracts .....	1,594,334				1,594,334
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	12,338				12,338
15. Totals .....	16,059,473		5,604,310		21,663,783
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	9	26,571							9	26,571
17. Incurred during current year .....	55	2,104,389							55	2,104,389
Settled during current year:										
18.1 By payment in full .....	48	2,014,124							48	2,014,124
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	48	2,014,124							48	2,014,124
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	48	2,014,124							48	2,014,124
19. Unpaid Dec. 31, current year (16+17-18.6) .....	16	116,836							16	116,836
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	4,242	256,090,510	(a)		2	4,346,196			4,244	260,436,706
21. Issued during year .....	1	600,000							1	600,000
22. Other changes to in force (Net) .....	(263)	(17,666,121)				2,965			(263)	(17,663,156)
23. In force December 31 of current year .....	3,980	239,024,389	(a)		2	4,349,161			3,982	243,373,550

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	4,072,736	4,523,951		3,378,539	3,665,439
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	10,899	10,899			
25.2 Guaranteed renewable (b) .....	31,822	31,822		16,546	16,546
25.3 Non-renewable for stated reasons only (b) .....	2,548	2,548			
25.4 Other accident only .....					
25.5 All other (b) .....	506	506			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	45,775	45,775		16,546	16,546
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,118,511	4,569,726		3,395,085	3,681,985

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 3,634 and number of persons insured under indemnity only products 55 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	22,002,158		235,967		22,238,125
2. Annuity considerations .....	13,559,841				13,559,841
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	120,999,380		33,985,464		154,984,845
5. Totals (Sum of Lines 1 to 4) .....	156,561,379		34,221,432		190,782,810
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	731,898		34		731,932
6.2 Applied to pay renewal premiums .....	441,151		15		441,166
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,005,353				1,005,353
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,178,401		49		2,178,450
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	30				30
7.3 Other .....	1,185				1,185
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	1,215				1,215
8. Grand Totals (Lines 6.5 plus 7.4) .....	2,179,616		49		2,179,665
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	14,254,888		555,282		14,810,170
10. Matured endowments .....	74,945				74,945
11. Annuity benefits .....	94,926,013		62,917,526		157,843,539
12. Surrender values and withdrawals for life contracts .....	15,880,120		18,989		15,899,109
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	237,679				237,679
15. Totals .....	125,373,644		63,491,797		188,865,441
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	46	955,866							46	955,866
17. Incurred during current year Settled during current year:	475	13,959,305			28	99,403			503	14,058,708
18.1 By payment in full .....	466	13,858,973			27	89,403			493	13,948,377
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	466	13,858,973			27	89,403			493	13,948,377
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	466	13,858,973			27	89,403			493	13,948,377
19. Unpaid Dec. 31, current year (16+17-18.6) .....	55	1,056,198			1	10,000			56	1,066,198
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	42,165	3,731,777,348	(a)		12	279,316,242			42,177	4,011,093,590
21. Issued during year .....	4	5,637,263							4	5,637,263
22. Other changes to in force (Net) .....	(2,479)	(268,012,801)				(983,599)			(2,479)	(268,996,400)
23. In force December 31 of current year .....	39,690	3,469,401,811	(a)		12	278,332,643			39,702	3,747,734,454

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	2,179,042	2,318,335		1,171,555	1,260,605
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	1,280	1,280			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	1,554	1,554			
25.2 Guaranteed renewable (b) .....	882,722	882,722		669,403	669,403
25.3 Non-renewable for stated reasons only (b) .....	530	530			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	884,806	884,806		669,403	669,403
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,065,127	3,204,420		1,840,959	1,930,009

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 4 and number of persons insured under indemnity only products 794 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	3,378,255		76,561		3,454,816
2. Annuity considerations .....	10,026,947				10,026,947
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	87,621,103		51,129,587		138,750,690
5. Totals (Sum of Lines 1 to 4) .....	101,026,305		51,206,148		152,232,453
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	141,288		10		141,298
6.2 Applied to pay renewal premiums .....	123,077				123,077
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	194,713		30		194,742
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	459,078		40		459,118
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	74				74
7.3 Other .....	233				233
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	306				306
8. Grand Totals (Lines 6.5 plus 7.4) .....	459,384		40		459,424
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,644,407		78,249		4,722,656
10. Matured endowments .....	15,531				15,531
11. Annuity benefits .....	92,862,350		63,784,658		156,647,008
12. Surrender values and withdrawals for life contracts .....	5,309,672		745		5,310,417
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	5,907				5,907
15. Totals .....	102,837,867		63,863,651		166,701,519
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	13	65,025			2	6,850			15	71,875
17. Incurred during current year Settled during current year:	47	4,589,380			8	17,041			55	4,606,421
18.1 By payment in full .....	50	4,631,317			7	15,503			57	4,646,821
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	50	4,631,317			7	15,503			57	4,646,821
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	50	4,631,317			7	15,503			57	4,646,821
19. Unpaid Dec. 31, current year (16+17-18.6) .....	10	23,088			3	8,388			13	31,476
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	3,659	604,432,157	(a)		3	45,406,605			3,662	649,838,763
21. Issued during year .....	3	3,593,300							3	3,593,300
22. Other changes to in force (Net) .....	(177)	(32,393,348)				(830,367)			(177)	(33,223,714)
23. In force December 31 of current year .....	3,485	575,632,110	(a)		3	44,576,239			3,488	620,208,348

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	3,236,872	3,231,625		1,157,360	921,045
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	138	138			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	11,073	11,073			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	11,073	11,073			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,248,084	3,242,837		1,157,360	921,045

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 18 and number of persons insured under indemnity only products 514 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	5,529,712		24,275		5,553,987
2. Annuity considerations .....	7,054,098				7,054,098
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	33,901,016		6,488,392		40,389,409
5. Totals (Sum of Lines 1 to 4) .....	46,484,826		6,512,668		52,997,494
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	237,932				237,932
6.2 Applied to pay renewal premiums .....	72,676				72,676
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	296,970				296,970
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	607,578				607,578
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	607,578				607,578
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,300,078		88,961		4,389,039
10. Matured endowments .....	32,620				32,620
11. Annuity benefits .....	20,965,508		7,227,913		28,193,421
12. Surrender values and withdrawals for life contracts .....	2,902,182		2,557		2,904,739
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	168,935				168,935
15. Totals .....	28,369,323		7,319,431		35,688,753
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	24	372,400			1	1,648			25	374,048
17. Incurred during current year Settled during current year:	213	4,238,596			6	13,921			219	4,252,517
18.1 By payment in full .....	216	4,477,485			5	12,932			221	4,490,417
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	216	4,477,485			5	12,932			221	4,490,417
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	216	4,477,485			5	12,932			221	4,490,417
19. Unpaid Dec. 31, current year (16+17-18.6) .....	21	133,511			2	2,637			23	136,148
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	15,065	778,093,876	(a)			50,063,740			15,065	828,157,616
21. Issued during year .....	1	40,000							1	40,000
22. Other changes to in force (Net) .....	(851)	(55,224,515)				(18,626)			(851)	(55,243,142)
23. In force December 31 of current year .....	14,215	722,909,360	(a)			50,045,114			14,215	772,954,474

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,076,425	906,760		260,173	608,873
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	643,963	643,963		336,861	336,861
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	643,963	643,963		336,861	336,861
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,720,388	1,550,723		597,034	945,734

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 6 and number of persons  
insured under indemnity only products 337 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	4,615,202		33,682		4,648,885
2. Annuity considerations .....	5,582,338		2		5,582,340
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	94,228,906		79,466,464		173,695,370
5. Totals (Sum of Lines 1 to 4) .....	104,426,447		79,500,148		183,926,595
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	109,781		13		109,794
6.2 Applied to pay renewal premiums .....	147,124				147,124
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	308,672				308,672
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	565,577		13		565,590
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....	1,035				1,035
7.3 Other .....	44,982				44,982
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	46,017				46,017
8. Grand Totals (Lines 6.5 plus 7.4) .....	611,594		13		611,607
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,361,791		107,758		1,469,550
10. Matured endowments .....	2,574				2,574
11. Annuity benefits .....	67,102,315		127,089,796		194,192,111
12. Surrender values and withdrawals for life contracts .....	2,363,960		13,239		2,377,199
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	8,805				8,805
15. Totals .....	70,839,446		127,210,793		198,050,239
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	14	806,960			3	3,858			17	810,818
17. Incurred during current year Settled during current year:	44	1,202,722			10	24,986			54	1,227,708
18.1 By payment in full .....	52	1,997,282			8	23,107			60	2,020,389
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	52	1,997,282			8	23,107			60	2,020,389
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	52	1,997,282			8	23,107			60	2,020,389
19. Unpaid Dec. 31, current year (16+17-18.6) .....	6	12,400			5	5,737			11	18,138
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	5,579	474,996,060	(a)		61	101,699,457			5,640	576,695,517
21. Issued during year .....	46	42,284,740							46	42,284,740
22. Other changes to in force (Net) .....	(250)	(26,011,725)				(1,143,419)			(250)	(27,155,145)
23. In force December 31 of current year .....	5,375	491,269,075	(a)		61	100,556,038			5,436	591,825,113

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	4,136,498	2,256,621		1,256,094	1,509,988
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	1,324	1,324			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,324	1,324			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,137,822	2,257,944		1,256,094	1,509,988

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 2,759 and number of persons insured under indemnity only products 345 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,867,021		8,312		1,875,333
2. Annuity considerations .....	136,049				136,049
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	3,102,632		1,859,620		4,962,252
5. Totals (Sum of Lines 1 to 4) .....	5,105,701		1,867,932		6,973,633
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	11,133				11,133
6.2 Applied to pay renewal premiums .....	36,197				36,197
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	6,279				6,279
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	53,609				53,609
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....	171				171
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	171				171
8. Grand Totals (Lines 6.5 plus 7.4) .....	53,779				53,779
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	158,691		9,751		168,442
10. Matured endowments .....					
11. Annuity benefits .....	3,177,681		1,507,030		4,684,711
12. Surrender values and withdrawals for life contracts .....	89,511				89,511
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1				1
15. Totals .....	3,425,884		1,516,781		4,942,665
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	2	8,261			1	3,189			3	11,450
17. Incurred during current year Settled during current year:	1	158,691				1,811			1	160,502
18.1 By payment in full .....	3	166,952			1	5,000			4	171,952
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	3	166,952			1	5,000			4	171,952
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	3	166,952			1	5,000			4	171,952
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	406	60,560,416	(a)			1,041,344			406	61,601,760
21. Issued during year .....	22	10,037,932							22	10,037,932
22. Other changes to in force (Net) .....	(17)	(2,439,542)				(4,999)			(17)	(2,444,541)
23. In force December 31 of current year .....	411	68,158,806	(a)			1,036,344			411	69,195,150

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	395,215	371,393		330,701	330,501
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	252	252			
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	755	755			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,007	1,007			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	396,222	372,400		330,701	330,501

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 49 and number of persons  
insured under indemnity only products 42 .





ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2013

NAIC Group Code 0140

LIFE INSURANCE

NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	58,334				58,334
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	58,334				58,334
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	1,143				1,143
6.2 Applied to pay renewal premiums .....	134				134
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	2				2
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,279				1,279
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,279				1,279
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....	22,113				22,113
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	22,113				22,113
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:	2	22,865							2	22,865
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....	2	22,865							2	22,865
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	46	15,108,463	(a)						46	15,108,463
21. Issued during year .....										
22. Other changes to in force (Net) .....	(7)	(1,058,882)							(7)	(1,058,882)
23. In force December 31 of current year .....	39	14,049,581	(a)						39	14,049,581

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam  
NAIC Group Code 0140

DURING THE YEAR 2013  
NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	1,170				1,170
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	43,273		4,800		48,073
5. Totals (Sum of Lines 1 to 4) .....	44,442		4,800		49,242
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....	997,942		326,795		1,324,737
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	997,942		326,795		1,324,737
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2	84,379	(a)						2	84,379
21. Issued during year .....										
22. Other changes to in force (Net) .....		9								9
23. In force December 31 of current year .....	2	84,388	(a)						2	84,388

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2013

NAIC Group Code 0140

NAIC Company Code 66869

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	465,236				465,236
2. Annuity considerations .....	673,296				673,296
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	36,034,836		1,722,680		37,757,516
5. Totals (Sum of Lines 1 to 4) .....	37,173,368		1,722,680		38,896,048
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	5,213				5,213
6.2 Applied to pay renewal premiums .....	70				70
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	3,710				3,710
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	8,992				8,992
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	8,992				8,992
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	523,470		11,988		535,458
10. Matured endowments .....					
11. Annuity benefits .....	24,917,597		7,232,381		32,149,978
12. Surrender values and withdrawals for life contracts .....	186,342				186,342
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	113				113
15. Totals .....	25,627,522		7,244,369		32,871,891
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	1	291							1	291
17. Incurred during current year Settled during current year:	1	500,000							1	500,000
18.1 By payment in full .....	1	500,000							1	500,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1	500,000							1	500,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1	500,000							1	500,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	291							1	291
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	135	51,006,594	(a)		3	331,112			138	51,337,706
21. Issued during year .....	4	4,000,000							4	4,000,000
22. Other changes to in force (Net) .....	(14)	(5,212,689)							(14)	(5,212,689)
23. In force December 31 of current year .....	125	49,793,905	(a)		3	331,112			128	50,125,017

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....		22			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	501	501			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	501	501			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	501	522			

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



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2013

NAIC Group Code 0140

NAIC Company Code 66869

NAIC Group Code      0140		LIFE INSURANCE			NAIC Company Code    66869	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	123,800			27		123,827
2. Annuity considerations .....						
3. Deposit-type contract funds .....		XXX			XXX	
4. Other considerations .....	5,017,655			58,486		5,076,141
5. Totals (Sum of Lines 1 to 4) .....	5,141,455			58,513		5,199,968
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....	842					842
6.2 Applied to pay renewal premiums .....	450					450
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,292					1,292
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3) .....						
8. Grand Totals (Lines 6.5 plus 7.4) .....	1,292					1,292
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						
10. Matured endowments .....						
11. Annuity benefits .....	395,338			75,014		470,352
12. Surrender values and withdrawals for life contracts .....	5,612					5,612
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals .....	400,951			75,014		475,964
DETAILS OF WRITE-INS						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	36	2,816,117	(a)						36	2,816,117
21. Issued during year										
22. Other changes to in force (Net)	(2)	(338,637)							(2)	(338,637)
23. In force December 31 of current year	34	2,477,480	(a)						34	2,477,480

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b) .....	16,543	18,772		31,352	31,352
24.1	Federal Employees Health Benefits Plan premium (b) .....					
24.2	Credit (Group and Individual) .....					
24.3	Collectively renewable policies (b) .....					
24.4	Medicare Title XVIII exempt from state taxes or fees .....					
	Other Individual Policies: .....					
25.1	Non-cancelable (b) .....					
25.2	Guaranteed renewable (b) .....					
25.3	Non-renewable for stated reasons only (b) .....					
25.4	Other accident only .....					
25.5	All other (b) .....					
25.6	Totals (sum of Lines 25.1 to 25.5) .....					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	16,543	18,772		31,352	31,352

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



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Canada  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	94,761				94,761
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....			16,977		16,977
5. Totals (Sum of Lines 1 to 4) .....	94,761		16,977		111,738
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	13,455				13,455
6.2 Applied to pay renewal premiums .....	11,519				11,519
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	6,618				6,618
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	31,592				31,592
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	31,592				31,592
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	32,960				32,960
10. Matured endowments .....					
11. Annuity benefits .....	176,497		281,706		458,203
12. Surrender values and withdrawals for life contracts .....	73,022				73,022
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	282				282
15. Totals .....	282,761		281,706		564,467
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	3	12,000							3	12,000
17. Incurred during current year Settled during current year:	(2)	(1,888)							(2)	(1,888)
18.1 By payment in full .....	1	10,112							1	10,112
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1	10,112							1	10,112
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1	10,112							1	10,112
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	205	46,897,911	(a)		2	47,787			207	46,945,698
21. Issued during year .....										
22. Other changes to in force (Net) .....	1	1,997,385							1	1,997,385
23. In force December 31 of current year .....	206	48,895,297	(a)		2	47,787			208	48,943,084

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Other Aliens  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2013  
NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	1,007,531		854		1,008,384
2. Annuity considerations .....	14,214				14,214
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....	119,006		97,267		216,273
5. Totals (Sum of Lines 1 to 4) .....	1,140,750		98,121		1,238,871
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	47,033				47,033
6.2 Applied to pay renewal premiums .....	65,184				65,184
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	110,792				110,792
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	223,010				223,010
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....	223,010				223,010
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	670,773		3,211		673,984
10. Matured endowments .....	5,000				5,000
11. Annuity benefits .....	528,193		86,304		614,498
12. Surrender values and withdrawals for life contracts .....	2,665,640		9,418		2,675,058
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	12,907				12,907
15. Totals .....	3,882,513		98,933		3,981,446
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	7	269,776							7	269,776
17. Incurred during current year Settled during current year:	1	514,159							1	514,159
18.1 By payment in full .....	5	65,754							5	65,754
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	5	65,754							5	65,754
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	5	65,754							5	65,754
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	718,181							3	718,181
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	772	103,423,652	(a)		2	2,393,309			774	105,816,961
21. Issued during year .....										
22. Other changes to in force (Net) .....	(47)	(4,227,106)				(19,976)			(47)	(4,247,082)
23. In force December 31 of current year .....	725	99,196,546	(a)		2	2,373,333			727	101,569,879

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,672	1,672		9,900	9,900
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,672	1,672		9,900	9,900

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons  
insured under indemnity only products 9 .



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2013

NAIC Group Code 0140

LIFE INSURANCE

NAIC Company Code 66869

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....	719,851,709		612,532,428		1,332,384,137
2. Annuity considerations .....	600,365,055		702,494		601,067,549
3. Deposit-type contract funds .....	887,490,030	XXX		XXX	887,490,030
4. Other considerations .....	6,183,735,595		3,336,654,113		9,520,389,708
5. Totals (Sum of Lines 1 to 4)	8,391,442,389		3,949,889,035		12,341,331,424
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	16,725,935		14,768		16,740,702
6.2 Applied to pay renewal premiums .....	14,917,078		191		14,917,269
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	27,533,299		615		27,533,913
6.4 Other .....	(3,606,450)		(1,712)		(3,608,161)
6.5 Totals (Sum of Lines 6.1 to 6.4)	55,569,861		13,862		55,583,723
Annuities:					
7.1 Paid in cash or left on deposit .....	49,394				49,394
7.2 Applied to provide paid-up annuities .....	3,579				3,579
7.3 Other .....	147,665				147,665
7.4 Totals (Sum of Lines 7.1 to 7.3)	200,639				200,639
8. Grand Totals (Lines 6.5 plus 7.4)	55,770,500		13,862		55,784,362
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	407,119,223		106,454,788		513,574,012
10. Matured endowments .....	2,696,445				2,696,445
11. Annuity benefits .....	4,977,609,810		4,603,594,195		9,581,204,005
12. Surrender values and withdrawals for life contracts .....	494,352,830		50,074,024		544,426,854
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4,286,698		(334,578)		3,952,120
15. Totals	5,886,065,006		4,759,788,429		10,645,853,435
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....	1,565	54,143,484			163	1,574,843			1,728	55,718,327
17. Incurred during current year Settled during current year:	9,425	406,004,426			888	80,550,259			10,313	486,554,684
18.1 By payment in full .....	9,602	413,453,256			830	79,625,083			10,432	493,078,339
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	9,602	413,453,256			830	79,625,083			10,432	493,078,339
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	9,602	413,453,256			830	79,625,083			10,432	493,078,339
19. Unpaid Dec. 31, current year (16+17-18.6)	1,388	46,694,654			221	2,500,018			1,609	49,194,672
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	756,252	101,943,570,643	(a)		21,282	41,240,222,947			777,534	143,183,793,590
21. Issued during year .....	5,129	2,342,360,784			1,177	2,101,343,956			6,306	4,443,704,740
22. Other changes to in force (Net) .....	(43,695)	(6,858,758,777)			(224)	66,067,448			(43,919)	(6,792,691,329)
23. In force December 31 of current year	717,686	97,427,172,649	(a)		22,235	43,407,634,351			739,921	140,834,807,000

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	242,038,615	218,143,085		128,079,975	145,098,110
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....	2,920	2,903		4,160	4,219
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	1,018,868	1,018,800		3,201,401	3,201,486
25.2 Guaranteed renewable (b) .....	10,918,850	11,039,779		8,374,142	8,208,945
25.3 Non-renewable for stated reasons only (b) .....	234,789	234,789	15	67,662	45,220
25.4 Other accident only .....					
25.5 All other (b) .....	11,014	11,014		7,908	7,661
25.6 Totals (sum of Lines 25.1 to 25.5) .....	12,183,522	12,304,382	15	11,651,113	11,463,312
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	254,225,057	230,450,371	15	139,735,247	156,565,642

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 104,876 and number of persons insured under indemnity only products 32,204



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE		1
		Amount
1.	Reserve as of December 31, Prior Year .....	79,540,835
2.	Current year's realized pre-tax capital gains/(losses) of \$ .....(17,852,532) transferred into the reserve net of taxes of \$ .....(6,248,386)	(11,604,146)
3.	Adjustment for current year's liability gains/(losses) released from the reserve .....	
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3) .....	67,936,689
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	12,399,160
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	55,537,529

AMORTIZATION				
	1	2	3	4
Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2013 .....	12,171,278	227,882		12,399,160
2. 2014 .....	9,596,505	35,267		9,631,772
3. 2015 .....	8,550,500	(471,122)		8,079,378
4. 2016 .....	7,011,214	(563,136)		6,448,078
5. 2017 .....	5,282,179	(582,794)		4,699,385
6. 2018 .....	6,579,725	(663,721)		5,916,004
7. 2019 .....	4,030,668	(857,965)		3,172,703
8. 2020 .....	4,113,877	(730,055)		3,383,822
9. 2021 .....	3,786,837	(611,403)		3,175,434
10. 2022 .....	3,262,812	(533,391)		2,729,421
11. 2023 .....	2,930,035	(301,650)		2,628,385
12. 2024 .....	2,306,517	(229,499)		2,077,018
13. 2025 .....	2,165,771	(235,154)		1,930,617
14. 2026 .....	1,519,041	(249,096)		1,269,945
15. 2027 .....	811,542	(264,233)		547,309
16. 2028 .....	615,866	(304,926)		310,940
17. 2029 .....	597,724	(327,005)		270,719
18. 2030 .....	604,266	(347,422)		256,844
19. 2031 .....	358,387	(360,227)		(1,840)
20. 2032 .....	352,918	(373,168)		(20,250)
21. 2033 .....	575,081	(383,987)		191,094
22. 2034 .....	710,968	(396,652)		314,316
23. 2035 .....	754,070	(410,125)		343,945
24. 2036 .....	740,896	(381,722)		359,174
25. 2037 .....	724,487	(390,366)		334,121
26. 2038 .....	456,558	(407,429)		49,129
27. 2039 .....	127,315	(425,590)		(298,275)
28. 2040 .....	117,829	(407,816)		(289,987)
29. 2041 .....	(306,685)	(362,364)		(669,049)
30. 2042 .....	(316,355)	(256,399)		(572,754)
31. 2043 and Later	(690,991)	(38,878)		(729,869)
32. Total (Lines 1 to 31)	79,540,835	(11,604,146)		67,936,689

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1	2	3	4	5	6	
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year .....	128,385,839	47,436,973	175,822,813	1,741,910	5,000,223	6,742,133	182,564,945
2. Realized capital gains/(losses) net of taxes - General Account .....	(7,391,223)		(7,391,223)	378,290	(212,025)	166,265	(7,224,958)
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....	7,097,017	2,409,565	9,506,582	18,375,115	(4,357,126)	14,017,989	23,524,571
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts .....							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....							
7. Basic contribution .....	43,277,774	20,271,977	63,549,751		502,805	502,805	64,052,556
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	171,369,407	70,118,516	241,487,923	20,495,315	933,877	21,429,191	262,917,114
9. Maximum reserve .....	209,570,884	75,295,914	284,866,798	2,861,522	3,783,147	6,644,669	291,511,467
10. Reserve objective .....	145,237,685	57,919,935	203,157,620	2,731,822	3,224,475	5,956,297	209,113,917
11. 20% of (Line 10 - Line 8) .....	(5,226,344)	(2,439,716)	(7,666,061)	(3,552,699)	458,120	(3,094,579)	(10,760,639)
12. Balance before transfers (Lines 8 + 11) .....	166,143,063	67,678,799	233,821,862	16,942,616	1,391,996	18,334,613	252,156,475
13. Transfers .....				(2,391,151)	2,391,151		XXX
14. Voluntary contribution .....							
15. Adjustment down to maximum/up to zero .....				(11,689,944)		(11,689,944)	(11,689,944)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	166,143,063	67,678,799	233,821,862	2,861,521	3,783,147	6,644,669	240,466,531

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Num- ber	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve		
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10	
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)	
LONG-TERM BONDS													
1.		Exempt Obligations .....	108,723,864	XXX	XXX	108,723,864	0.0000		0.0000		0.0000		
2.	1	Highest Quality .....	13,867,894,752	XXX	XXX	13,867,894,752	0.0004	5,547,158	0.0023	31,896,158	0.0030	41,603,684	
3.	2	High Quality .....	10,139,451,927	XXX	XXX	10,139,451,927	0.0019	19,264,959	0.0058	58,808,821	0.0090	91,255,067	
4.	3	Medium Quality .....	861,280,690	XXX	XXX	861,280,690	0.0093	8,009,910	0.0230	19,809,456	0.0340	29,283,543	
5.	4	Low Quality .....	274,390,267	XXX	XXX	274,390,267	0.0213	5,844,513	0.0530	14,542,684	0.0750	20,579,270	
6.	5	Lower Quality .....	63,596,274	XXX	XXX	63,596,274	0.0432	2,747,359	0.1100	6,995,590	0.1700	10,811,367	
7.	6	In or Near Default .....	32,763,272	XXX	XXX	32,763,272	0.0000		0.2000	6,552,654	0.2000	6,552,654	
8.		Total Unrated Multi-class Securities Acquired by Conversion .....		XXX	XXX		XXX		XXX		XXX		
9.		Total Bonds (Sum of Lines 1 through 8)	25,348,101,046	XXX	XXX	25,348,101,046	XXX	41,413,899	XXX	138,605,364	XXX	200,085,586	
PREFERRED STOCK													
10.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030		
11.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090		
12.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340		
13.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750		
14.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700		
15.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000		
16.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000		
17.		Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX		XXX		
SHORT - TERM BONDS													
18.		Exempt Obligations .....	181,289,397	XXX	XXX	181,289,397	0.0000		0.0000		0.0000		
19.	1	Highest Quality .....	47,710,841	XXX	XXX	47,710,841	0.0004	19,084	0.0023	109,735	0.0030	143,133	
20.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090		
21.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340		
22.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750		
23.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700		
24.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000		
25.		Total Short - Term Bonds (Sum of Lines 18 through 24)	229,000,238	XXX	XXX	229,000,238	XXX	19,084	XXX	109,735	XXX	143,133	

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Num- ber	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded .....	170,809,354	XXX	XXX	170,809,354	0.0004	68,324	0.0023	392,862	0.0030	512,428
27.	1	Highest Quality .....	22,141,348	XXX	XXX	22,141,348	0.0004	8,857	0.0023	50,925	0.0030	66,424
28.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
29.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340	
30.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
31.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
32.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
33.		Total Derivative Instruments .....	192,950,702	XXX	XXX	192,950,702	XXX	77,180	XXX	443,787	XXX	578,852
34.		Total (Lines 9 + 17 + 25 + 33)	25,770,051,986	XXX	XXX	25,770,051,986	XXX	41,510,163	XXX	139,158,885	XXX	200,807,571
MORTGAGE LOANS												
In Good Standing:												
35.		Farm Mortgages .....			XXX		0.0035		0.0100		0.0130	
36.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
37.		Residential Mortgages - All Other .....			XXX		0.0013		0.0030		0.0040	
38.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
39.		Commercial Mortgages - All Other .....	5,690,344,864		XXX	5,690,344,864	0.0035	19,916,207	0.0100	56,903,449	0.0130	73,974,483
40.		In Good Standing With Restructured Terms .....	1,220,006		XXX	1,220,006	0.0035	4,270	0.0100	12,200	0.0130	15,860
Overdue, Not in Process:												
41.		Farm Mortgages .....			XXX		0.0420		0.0760		0.1200	
42.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
43.		Residential Mortgages - All Other .....			XXX		0.0025		0.0058		0.0090	
44.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
45.		Commercial Mortgages - All Other .....			XXX		0.0420		0.0760		0.1200	
In Process of Foreclosure:												
46.		Farm Mortgages .....			XXX		0.0000		0.1700		0.1700	
47.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
48.		Residential Mortgages - All Other .....			XXX		0.0000		0.0130		0.0130	
49.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
50.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1700		0.1700	
51.		Total Schedule B Mortgages (Sum of Lines 35 through 50)	5,691,564,870		XXX	5,691,564,870	XXX	19,920,477	XXX	56,915,649	XXX	73,990,343
52.		Schedule DA Mortgages			XXX		0.0030		0.0100		0.0130	
53.		Total Mortgage Loans on Real Estate (Lines 51 + 52)	5,691,564,870		XXX	5,691,564,870	XXX	19,920,477	XXX	56,915,649	XXX	73,990,343

ASSET VALUATION RESERVE  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - Public .....	57,102	XXX	XXX	57,102	0.0000		0.2000 (a)	11,420	0.2000 (a)	11,420
2.		Unaffiliated - Private .....	14,304,072	XXX	XXX	14,304,072	0.0000		0.1600	2,288,652	0.1600	2,288,652
3.		Federal Home Loan Bank .....	43,233,400	XXX	XXX	43,233,400	0.0000		0.0050	216,167	0.0080	345,867
4.		Affiliated - Life with AVR .....	534,066,446	XXX	XXX	534,066,446	0.0000		0.0000		0.0000	
Affiliated - Investment Subsidiary:												
5.		Fixed Income - Exempt Obligations .....					XXX		XXX		XXX	
6.		Fixed Income - Highest Quality .....					XXX		XXX		XXX	
7.		Fixed Income - High Quality .....					XXX		XXX		XXX	
8.		Fixed Income - Medium Quality .....					XXX		XXX		XXX	
9.		Fixed Income - Low Quality .....					XXX		XXX		XXX	
10.		Fixed Income - Lower Quality .....					XXX		XXX		XXX	
11.		Fixed Income - In/Near Default .....					XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public .....					0.0000		0.1300 (a)		0.1300 (a)	
13.		Unaffiliated Common Stock - Private .....					0.0000		0.1600		0.1600	
14.		Mortgage Loans .....					0.0030		0.0100		0.0130	
15.		Real Estate .....					(b)		(b)		(b)	
16.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX		0.0000		0.1300		0.1300	
17.		Affiliated - All Other .....	1,347,392	XXX	XXX	1,347,392	0.0000		0.1600	215,583	0.1600	215,583
18.		Total Common Stock (Sum of Lines 1 through 17)	593,008,412			593,008,412	XXX		XXX	2,731,822	XXX	2,861,522
REAL ESTATE												
19.		Home Office Property (General Account only) .....					0.0000		0.0750		0.0750	
20.		Investment Properties .....					0.0000		0.0750		0.0750	
21.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1100		0.1100	
22.		Total Real Estate (Sum of Lines 19 through 21)					XXX		XXX		XXX	
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
23.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
24.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030	
25.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
26.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340	
27.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
28.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
29.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
30.		Total with Bond Characteristics (Sum of Lines 23 through 29)		XXX	XXX		XXX		XXX		XXX	

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Num- ber	NAIC Designation	Description	1  Book/Adjusted Carrying Value	2  Reclassify Related Party Encumbrances	3  Add Third Party Encumbrances	4  Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5  Factor	6  Amount (Cols.4 x 5)	7  Factor	8  Amount (Cols. 4 x 7)	9  Factor	10  Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
31.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030	
32.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
33.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340	
34.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
35.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
36.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
37.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
38.		Total with Preferred Stock Characteristics (Sum of Lines 31 through 37)		XXX	XXX		XXX		XXX		XXX	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing:										
39.		Farm Mortgages .....			XXX		0.0030		0.0100		0.0130	
40.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
41.		Residential Mortgages - All Other .....		XXX	XXX		0.0013		0.0030		0.0040	
42.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
43.		Commercial Mortgages - All Other .....			XXX		0.0030		0.0100		0.0130	
44.		In Good Standing With Restructured Terms .....			XXX		0.0030		0.0100		0.0130	
		Overdue, Not in Process:										
45.		Farm Mortgages .....			XXX		0.0420		0.0760		0.1200	
46.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
47.		Residential Mortgages - All Other .....			XXX		0.0025		0.0058		0.0090	
48.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
49.		Commercial Mortgages - All Other .....			XXX		0.0420		0.0760		0.1200	
		In Process of Foreclosure:										
50.		Farm Mortgages .....			XXX		0.0000		0.1700		0.1700	
51.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
52.		Residential Mortgages - All Other .....			XXX		0.0000		0.0130		0.0130	
53.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
54.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1700		0.1700	
55.		Total with Mortgage Loan Characteristics (Sum of Lines 39 through 54)			XXX		XXX		XXX		XXX	

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Num- ber	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
56.		Unaffiliated Public .....		XXX	XXX		0.0000		0.1300 (a)		0.1300 (a)	
57.		Unaffiliated Private .....	252,719	XXX	XXX	252,719	0.0000			40,435	0.1600	40,435
58.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
59.		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX		0.0000		0.1300		0.1300	
60.		Affiliated Other - All Other .....		XXX	XXX		0.0000		0.1600		0.1600	
61.		Total with Common Stock Characteristics (Sum of Lines 56 through 60)	252,719	XXX	XXX	252,719	XXX		XXX	40,435	XXX	40,435
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
62.		Home Office Property (General Account only) .....					0.0000		0.0750		0.0750	
63.		Investment Properties .....	28,426,102			28,426,102	0.0000		0.0750	2,131,958	0.0750	2,131,958
64.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1100		0.1100	
65.		Total with Real Estate Characteristics (Lines 62 through 64)	28,426,102			28,426,102	XXX		XXX	2,131,958	XXX	2,131,958
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
66.		Guaranteed Federal Low Income Housing Tax Credit .....	1,000			1,000	0.0003		0.0006	1	0.0010	1
67.		Non-guaranteed Federal Low Income Housing Tax Credit .....	78,010,334			78,010,334	0.0063	491,465	0.0120	936,124	0.0190	1,482,196
68.		Guaranteed State Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
69.		Non-guaranteed State Low Income Housing Tax Credit .....	1,799,888			1,799,888	0.0063	11,339	0.0120	21,599	0.0190	34,198
70.		All Other Low Income Housing Tax Credit .....					0.0273		0.0600		0.0975	
71.		Total LIHTC	79,811,222			79,811,222	XXX	502,805	XXX	957,723	XXX	1,516,395
		ALL OTHER INVESTMENTS										
72.		NAIC 1 Working Capital Finance Investments .....		XXX			0.0000		0.0037		0.0037	
73.		NAIC 2 Working Capital Finance Investments .....		XXX			0.0000		0.0120		0.0120	
74.		Other Invested Assets - Schedule BA .....	725,842	XXX		725,842	0.0000		0.1300	94,359	0.1300	94,359
75.		Other Short-Term Invested Assets - Schedule DA .....		XXX			0.0000		0.1300		0.1300	
76.		Total All Other (Sum of Lines 72 + 73, 74 and 75) .....	725,842	XXX		725,842	XXX		XXX	94,359	XXX	94,359
77.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 71 and 76)	109,215,885			109,215,885	XXX	502,805	XXX	3,224,475	XXX	3,783,147

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).  
(b) Determined using the same factors and breakdowns used for directly owned real estate.

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

### ASSET VALUATION RESERVE (Continued)

## **BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS REPLICATIONS (SYNTHETIC) ASSETS**

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve
NONE								
0599999 - Total								



## SCHEDULE F

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE   NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written .....	710,497	XXX	614,061	XXX		XXX		XXX	43,445	XXX	47,304	XXX	5,687	XXX		XXX		XXX
2. Premiums earned .....	822,783	XXX	720,186	XXX		XXX		XXX	43,445	XXX	47,337	XXX	11,815	XXX		XXX		XXX
3. Incurred claims .....	1,544,580	187.7	1,354,404	188.1					116,278	267.6	14,293	30.2	67,662	572.7			(8,057)	
4. Cost containment expenses .....																		
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	1,544,580	187.7	1,354,404	188.1					116,278	267.6	14,293	30.2	67,662	572.7			(8,057)	
6. Increase in contract reserves .....	105,708	12.8	105,708	14.7														
7. Commissions (a) .....	(24,741,637)	(3,007.1)	(24,671,889)	(3,425.8)					(61,198)	(140.9)	1,709	3.6					(10,259)	
8. Other general insurance expenses .....	19,818,164	2,408.7	19,845,331	2,755.6					(47,723)	(109.8)	10,273	21.7	24	0.2			10,259	
9. Taxes, licenses and fees .....	4,870,567	592.0	4,870,577	676.3					3	0.0	(43)	(0.1)					30	
10. Total other expenses incurred .....	(52,906)	(6.4)	44,019	6.1					(108,918)	(250.7)	11,939	25.2	24	0.2			30	
11. Aggregate write-ins for deductions .....	(114,341)	(13.9)	(114,341)	(15.9)														
12. Gain from underwriting before dividends or refunds .....	(660,258)	(80.2)	(669,604)	(93.0)					36,085	83.1	21,105	44.6	(55,871)	(472.9)			8,027	
13. Dividends or refunds .....	15	0.0											15	0.1				
14. Gain from underwriting after dividends or refunds .....	(660,273)	(80.2)	(669,604)	(93.0)					36,085	83.1	21,105	44.6	(55,886)	(473.0)			8,027	
DETAILS OF WRITE-INS																		
1101. Change in Rate Stabilization .....	93,659	11.4	93,659	13.0														
1102. Change in Loss Recognition Reserve .....	(208,000)	(25.3)	(208,000)	(28.9)														
1103. ....																		
1198. Summary of remaining write-ins for Line 11 from overflow page .....																		
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	(114,341)	(13.9)	(114,341)	(15.9)														

(a) Includes \$                                      reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE  NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
<b>PART 2. - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums .....	68,064,714	68,064,714							
2. Advance premiums .....	(19,661)	(18,487)				(1,174)			
3. Reserve for rate credits .....									
4. Total premium reserves, current year .....	68,045,053	68,046,227				(1,174)			
5. Total premium reserves, prior year .....	51,124,090	51,125,230				(1,140)			
6. Increase in total premium reserves .....	16,920,963	16,920,997				(34)			
B. Contract Reserves:									
1. Additional reserves (a) .....	4,114,849	4,114,849							
2. Reserve for future contingent benefits .....									
3. Total contract reserves, current year .....	4,114,849	4,114,849							
4. Total contract reserves, prior year .....	4,009,141	4,009,141							
5. Increase in contract reserves .....	105,708	105,708							
C. Claim Reserves and Liabilities:									
1. Total current year .....	47,330,117	39,458,456			1,401,803	330,670	100,000	772	6,038,416
2. Total prior year .....	46,740,098	38,807,675			1,440,731	344,447	100,000	772	6,046,473
3. Increase .....	590,019	650,781			(38,928)	(13,777)			(8,057)

<b>PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES</b>									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year .....	954,561	703,623			155,206	28,070	67,662		
1.2 On claims incurred during current year .....									
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year .....	47,330,117	39,458,456			1,401,803	330,670	100,000	772	6,038,416
2.2 On claims incurred during current year .....									
3. Test:									
3.1 Lines 1.1 and 2.1 .....	48,284,678	40,162,079			1,557,009	358,740	167,662	772	6,038,416
3.2 Claim reserves and liabilities, December 31, prior year .....	46,740,098	38,807,675			1,440,731	344,447	100,000	772	6,046,473
3.3 Line 3.1 minus Line 3.2 .....	1,544,580	1,354,404			116,278	14,293	67,662		(8,057)

<b>PART 4. - REINSURANCE</b>									
A. Reinsurance Assumed:									
1. Premiums written .....	35	35							
2. Premiums earned .....	35	35							
3. Incurred claims .....	(134,489)	(134,489)							
4. Commissions .....									
B. Reinsurance Ceded:									
1. Premiums written .....	253,514,595	241,424,589		2,920	975,423	10,871,547	229,102		11,014
2. Premiums earned .....	246,767,030	234,556,181		2,903	975,355	10,992,475	229,102		11,014
3. Incurred claims .....	155,476,591	144,259,998		4,219	3,046,280	8,180,875	(22,442)		7,661
4. Commissions .....	68,816,326	67,894,510			104,714	776,047	30,796		10,259

(a) Includes \$ ..... premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims .....	117,859,471	15,318,821	23,378,418	156,556,710
2. Beginning Claim Reserves and Liabilities .....	30,156,631	1,952,765	69,703,204	101,812,600
3. Ending Claim Reserves and Liabilities .....	43,175,147	1,243,000	74,456,169	118,874,316
4. Claims Paid	104,840,955	16,028,586	18,625,453	139,494,994
B. Assumed Reinsurance:				
5. Incurred Claims.....	(134,489)			(134,489)
6. Beginning Claim Reserves and Liabilities .....	174,489			174,489
7. Ending Claim Reserves and Liabilities .....	40,000			40,000
8. Claims Paid				
C. Ceded Reinsurance:				
9. Incurred Claims.....	120,674,450	16,028,586	18,773,555	155,476,591
10. Beginning Claim Reserves and Liabilities .....	11,325,975		43,921,016	55,246,991
11. Ending Claim Reserves and Liabilities .....	27,293,959		44,290,240	71,584,199
12. Claims Paid	104,706,466	16,028,586	18,404,331	139,139,383
D. Net:				
13. Incurred Claims.....	(2,949,468)	(709,765)	4,604,863	945,630
14. Beginning Claim Reserves and Liabilities .....	19,005,145	1,952,765	25,782,188	46,740,098
15. Ending Claim Reserves and Liabilities .....	15,921,188	1,243,000	30,165,929	47,330,117
16. Claims Paid	134,489		221,122	355,611
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses .....	1,544,580			1,544,580
18. Beginning Reserves and Liabilities .....	46,740,098			46,740,098
19. Ending Reserves and Liabilities .....	47,330,117			47,330,117
20. Paid Claims and Cost Containment Expenses	954,561			954,561

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE S - PART 1 - SECTION 1**

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4  Name of Reinsured	5  Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8  Reserve	9  Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
92657	31-1000740	12/31/1996	Nationwide Life and Annuity Insurance Co	OH	AMCO/I			247,231,593		2,757,805,597	
92657	31-1000740	02/26/1999	Nationwide Life and Annuity Insurance Co	OH	CO/G	119,909,496	149,805,935				
92657	31-1000740	01/01/1994	Nationwide Life and Annuity Insurance Co	OH	MCO/I	953,845,184		5,562,241		47,020,294	
0299999. General Account - U.S. Affiliates - Other						1,073,754,680	149,805,935	252,793,834		2,804,825,891	
0399999. Total General Account - U.S. Affiliates						1,073,754,680	149,805,935	252,793,834		2,804,825,891	
0699999. Total General Account - Non-U.S. Affiliates											
0799999. Total General Account - Affiliates						1,073,754,680	149,805,935	252,793,834		2,804,825,891	
62308	06-0303370	01/01/1982	Connecticut General Life Insurance Co	CT	YRT/I		1,327				
60992	13-3690700	04/16/1993	First MetLife Investors Insurance Co	NY	ACO/I		1,633,654				
65676	35-0472300	02/01/1989	Lincoln National Life Insurance Co	IN	YRT/I		9,609	67,442			
82627	06-0839705	01/01/1989	Swiss Re Life and Health America Inc	NY	YRT/I		76,358	2,541			
70335	94-0971150	01/01/1986	West Coast Life Ins Co	CA	OTH/G	1,391,461	525,375	595			
70335	94-0971150	01/01/1986	West Coast Life Ins Co	CA	OTH/G	2,617,165	375,437	77,661			
0899999. General Account - U.S. Non-Affiliates						4,008,626	2,621,760	148,238			
1099999. Total General Account - Non-Affiliates						4,008,626	2,621,760	148,238			
1199999. Total General Account						1,077,763,305	152,427,695	252,942,072		2,804,825,891	
92657	31-1000740	01/01/1994	Nationwide Life and Annuity Insurance Co	OH	MCO/I					107,568,645	
1399999. Separate Accounts - U.S. Affiliates - Other										107,568,645	
1499999. Total Separate Accounts - U.S. Affiliates										107,568,645	
1799999. Total Separate Accounts - Non-U.S. Affiliates											
1899999. Total Separate Accounts - Affiliates										107,568,645	
2199999. Total Separate Accounts - Non-Affiliates											
2299999. Total Separate Accounts										107,568,645	
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)						1,077,763,305	152,427,695	252,942,072		2,912,394,535	
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)											
9999999 - Totals						1,077,763,305	152,427,695	252,942,072		2,912,394,535	

## SCHEDULE S - PART 1 - SECTION 2

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
0399999. Total Life and Annuity - U.S. Affiliates						
0699999. Total Life and Annuity - Non-U.S. Affiliates						
0799999. Total Life and Annuity - Affiliates						
60895	35-0145825	01/01/1977	American United Life Ins Co	IN		268,750
60895	35-0145825	01/01/1977	American United Life Ins Co	IN		50,954
68365	04-2729166	05/01/1999	AXA Re Life Insurance Company	DE	976,045	
62308	06-0303370	10/01/1998	Connecticut General Life Insurance Co	CT	1,909,409	
79782	86-0262046	02/23/1972	Electric Cooperative Life Ins Co	AZ		431
86258	13-2572994	10/21/2003	General Re Life Corporation	CT	70,540	70,819
88340	59-2859797	10/01/2004	Hannover Life Re	FL	221,462	
88340	59-2859797	10/01/2004	Hannover Life Re	FL	90,222	
65676	35-0472300	04/01/1998	Lincoln National Life	IN	680,591	46,128
65676	35-0472300	04/01/1998	Lincoln National Life Ins Company	IN	2,343,406	3,297,995
65676	35-0472300	03/01/1944	Lincoln National Life Insurance Co	IN	500,000	2,484
66346	58-0828824	01/01/2010	Munich American Reassurance Co	GA		99,866
66346	58-0828824	01/01/1998	Munich American Reassurance Co	GA	735,181	81,193
93572	43-1235868	04/01/2004	Reinsurance Group of America	MO	6,261,563	
93572	43-1235868	04/01/1992	Reinsurance Group of America	MO	2,454,525	1,167,866
93572	43-1235868	10/01/1980	Reinsurance Group of America	MO	832,533	
64688	75-6020048	07/01/1986	SCOR Global Life Americas Reinsurance Company	NY		469,000
64688	75-6020048	09/01/1989	SCOR Global Life Americas Reinsurance Company	NY	1,055,164	70,819
64688	75-6020048	07/01/1986	SCOR Global Life Americas Reinsurance Company	IA	535	
87572	23-2038295	10/01/2002	Scottish Re	NC	587,397	
87572	23-2038295	10/01/2002	Scottish Re	NC	1,588,103	71,264
68713	84-0499703	01/27/1996	Security Life of Denver	CO	245,136	46,128
68713	84-0499703	06/01/1997	Security Life of Denver Ins Co	CO	1,062,871	
68713	84-0499703	01/27/1996	Security Life of Denver Ins Co	CO		376,250
82627	06-0839705	01/19/2005	Swiss Re Life & Health America	NY	478,552	
82627	06-0839705	01/19/2005	Swiss Re Life and Health America	CT	118,830	
82627	06-0839705	01/19/2005	Swiss Re Life and Health America	CT		315,000
62596	31-0252460	01/01/1986	Union Fidelity Life Company	IL		3,063
0899999. Life and Annuity - U.S. Non-Affiliates					22,212,065	6,438,010
00000	AA-3190878	07/01/2002	Wilton Reinsurance Bermuda Ltd	BM	244,839	
0999999. Life and Annuity - Non-U.S. Non-Affiliates					244,839	
1099999. Total Life and Annuity - Non-Affiliates					22,456,904	6,438,010
1199999. Total Life and Annuity					22,456,904	6,438,010
1499999. Total Accident and Health - U.S. Affiliates						
1799999. Total Accident and Health - Non-U.S. Affiliates						
1899999. Total Accident and Health - Affiliates						
19801	94-1390273	07/01/2009	Argonaut Insurance Company	TX		57,030
70939	13-2611847	01/01/2007	Gerber Life Insurance Company	NY		15,193,246
71439	38-1843471	07/01/2003	Assurity Life Insurance Company	NE		124,175
62359	36-1824600	11/01/2002	Constitution Life Insurance Company	TX		815,741
61883	42-0884060	10/01/2002	Central United Life Insurance Company	TX		68,940
66346	58-0828824	01/01/2010	Munich American Reassurance Co	GA		7,113
20087	47-0355979	08/01/2013	National Indemnity Company	NE		4,484,725
68381	36-0883760	01/01/2010	Reliance Stand Life Ins Co	IL		738,028
82627	06-0839705	09/01/1989	Swiss Re Life and Health America Inc	NY	654,695	
63479	58-0869673	04/01/1992	United Teacher Associates Insurance Co	GA		27
1999999. Accident and Health - U.S. Non-Affiliates					654,695	21,489,025
00000	AA-1120055	03/01/2010	Lloyds #3623	ENG		210,173
00000	AA-1120103	04/01/2012	Lloyds #1967	ENG		126,105
00000	AA-1126033	01/01/2009	Lloyds Syndicate HIS #0033	ENG		210,173
00000	AA-1126457	01/01/2009	Lloyds Syndicate WTK #0457	ENG		70,058
00000	AA-1126510	01/01/2009	Lloyds Syndicate KLN #0510	ENG		210,173
00000	AA-1127183	01/01/2009	Lloyds Syndicate Number 1183 - Talbot	ENG		70,058
00000	AA-1127200	09/26/2011	Lloyds Syndicate Number 1200	ENG		42,035
00000	AA-1127206	06/01/2006	Lloyds Syndicate CAP #1206	ENG		35,029
00000	AA-1127861	01/01/2013	Lloyds Syndicate #1861	ENG		42,035
00000	AA-1128001	01/01/2009	Lloyds Syndicate Number 2001 - AMLIN Underwriting Ltd	ENG		98,080
00000	AA-1120104	12/01/2011	Lloyds #2012	ENG		42,033
00000	AA-1128488	01/01/2009	Lloyds Syndicate AGM #2488	ENG		70,058
00000	AA-1128987	01/01/2009	Lloyds Syndicate BRT #2987	ENG		262,716
00000	AA-1120075	01/01/2009	Lloyds Syndicate Number 4020 - ARK	ENG		210,173
00000	AA-1126004	01/01/2009	Lloyds Syndicate CNP #4444	ENG		35,029
00000	AA-1126006	01/01/2009	Lloyds Syndicate Number 4472 - Liberty	ENG		210,173
00000	AA-1126003	01/01/2009	Lloyds Syndicate TRV #5000	ENG		105,088
00000	AA-3194213	10/01/2012	Roundstone Insurance	BER		3,728,829
2099999. Accident and Health - Non-U.S. Non-Affiliates						5,778,018
2199999. Total Accident and Health - Non-Affiliates					654,695	27,267,043
2299999. Total Accident and Health					654,695	27,267,043
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					22,866,760	27,927,035
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					244,839	5,778,018
9999999 Totals - Life, Annuity and Accident and Health					23,111,599	33,705,053

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8	9		11	12		
							Current Year	Prior Year		Current Year	Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates													
0699999. Total General Account - Authorized Non-U.S. Affiliates													
0799999. Total General Account - Authorized Affiliates													
60488	25-0598210	10/01/1991	American General Life Ins Co	IL	ACO/I		25,741,360	26,875,149	638,650				
60895	35-0145825	01/01/1977	American United Life Ins Co	IN	CO/I	921,215,029	23,533,880	23,280,211	1,890,362				
60895	35-0145825	01/01/1977	American United Life Ins Co	IN	YRT/G			9,735	34,320				
60895	35-0145825	01/01/1977	American United Life Ins Co	IN	YRT/I	166,667	282	655,852	1,185,973				
61689	42-0175020	01/01/1992	Aviva Life and Annuity Company	IA	OTH/I	78,298,068	23,725,814	24,698,515	1,789,706				
68365	04-2729166	05/01/1999	AXA Re Life Insurance Company	DE	ACO/I			5,824,812					
62308	06-0303370	10/01/1998	Connecticut General Life Insurance Co	CT	ACO/I		5,558,958	11,840,482					
68276	48-1024691	12/31/1995	Employers Reassurance Corp	KS	CO/I	111,842,711	13,741,313	14,890,412	928,458				
68276	48-1024691	04/01/1996	Employers Reassurance Corp	KS	YRT/I	3,952,534	29,553	486,993	22,815				
86258	13-2572994	10/21/2003	General Re Life Corporation	CT	YRT/I	1,055,477,917	8,654,813	8,938,540	7,491,685				
97071	13-3126819	06/01/2012	Generali USA Life Reassurance	MO	YRT/I	953,462	143	68	336				
88340	59-2859797	06/01/2012	Hannover Life Re	FL	YRT/G	2,017,595,336	5,111,284	3,773,039	1,863,765				
88340	59-2859797	10/01/2004	Hannover Life Re	FL	YRT/I	1,178,117,571	3,550,278	2,530,104	1,223,740				
65838	01-0233346	05/01/1997	John Hancock Life Insurance Co	MI	OTH/I		4,504	4,261					
65676	35-0472300	04/01/1998	Lincoln National Life	IN	YRT/G	676,069,510	4,194,274	3,942,260	2,561,570				
65676	35-0472300	04/01/1998	Lincoln National Life Ins Company	IN	YRT/I	6,488,053,847	24,011,336	23,637,297	23,026,442				
65676	35-0472300	01/01/1982	Lincoln National Life Insurance Co	IN	ACO/G		37,048,866	39,368,684	263,297				
65676	35-0472300	03/01/1944	Lincoln National Life Insurance Co	IN	MCO/I	4,223,506		1,353	83,698			2,646,515	
65676	35-0472300	02/01/1984	Lincoln National Life Insurance Co	IN	CO/I	4,851,000	350,889	354,128	25,915				
66346	58-0828824	01/01/2010	Munich American Reassurance Co	GA	YRT/G				2,207,591				
66346	58-0828824	01/01/1998	Munich American Reassurance Co	GA	YRT/I	170,928,980	1,015,397	1,092,902	668,649				
88099	75-1608507	02/01/1987	Optimum Re Ins Co	TX	CO/I	4,946,200	54,842	54,842	18,141				
88099	75-1608507	01/01/1986	Optimum Re Ins Co	TX	YRT/I	1,534,540	26,452	26,452	26,808				
93572	43-1235868	04/01/2004	Reinsurance Group of America	MO	ACO/I			80,022					
93572	43-1235868	10/01/1980	Reinsurance Group of America	MO	CO/I	853,411,444	15,349,154	14,715,074	1,612,168				
93572	43-1235868	04/01/1992	Reinsurance Group of America	MO	YRT/I	5,902,496,740	21,838,745	21,228,413	24,112,393				
93572	43-1235868	10/01/1980	Reinsurance Group of America	MO	YRT/G	907,882,294	5,096,700	4,986,334	3,687,365				
64688	75-6020048	09/01/1981	Scor Global Life Americas Reinsurance Co	DE	CO/I	3,553,356,585	77,320,056	73,764,130	6,495,176				
64688	75-6020048	09/01/1989	Scor Global Life Americas Reinsurance Co	DE	YRT/G	25,080,000	301,570		159,050				
64688	75-6020048	04/01/2008	Scor Global Life Americas Reinsurance Co	DE	YRT/I	1,296,805,350	9,051,904	9,208,630	4,268,797				
87572	23-2038295	10/01/2002	Scottish Re	NC	ACO/I		39,696,065	43,199,704	1,698				
87572	23-2038295	10/01/2002	Scottish Re	NC	CO/I				441				
87572	23-2038295	10/01/2002	Scottish Re	NC	YRT/G	825,123,813	5,255,374	5,309,607	1,946,618				
87572	23-2038295	10/01/2002	Scottish Re	NC	YRT/I	1,150,140,777	10,098,302	10,721,229	6,462,492				
68675	48-0409770	07/01/2000	Security Benefits Life Insurance Co	KS	ACO/I		82,111,942	81,817,740	3,065,954				
68713	84-0499703	01/27/1996	Security Life of Denver	CO	YRT/G	547,673,180	3,498,004	3,230,665	1,950,810				
68713	84-0499703	06/01/1997	Security Life of Denver Ins Co	CO	YRT/I	2,020,438,629	26,188,754	25,457,154	8,847,744				
68713	84-0499703	01/27/1996	Security Life of Denver Ins Co	CO	CO/I	1,997,655,033	45,643,074	45,034,444	3,889,577				
82627	06-0839705	09/01/1989	Swiss Re Life and Health America Inc	NY	YRT/G	2,803,214,951	9,080,823	7,720,678	4,138,493				
82627	06-0839705	01/19/2005	Swiss Re Life & Health America	NY	ACO/G		3,100,647	7,471,679					
82627	06-0839705	01/19/2005	Swiss Re Life and Health America	CT	YRT/I	1,952,557,787	6,765,291	5,759,016	2,981,789				
82627	06-0839705	01/19/2005	Swiss Re Life and Health America	CT	CO/I	1,499,176,500	37,411,689	36,669,040	3,231,644				
82627	06-0839705	01/19/2005	Swiss Re Life and Health America	CT	OTH/G	85,402,475			84,168				
82627	06-0839705	01/01/1991	Swiss Re Life and Health America Inc	NY	ADB/G				6				
82627	06-0839705	06/15/1953	Swiss Re Life and Health America Inc	NY	MCO/I	50,000			702			29,550	
82627	06-0839705	08/01/2005	Swiss Re Life and Health America Inc	NY	ADB/I				41,600				
86231	39-0989781	05/01/1997	Transamerica Life Insurance Co	IA	OTH/I		4,504	4,261					
62596	31-0252460	01/01/1986	Union Fidelity Life Company	IL	OTH/G	314,000	5,672	6,632	6,871				
70335	94-0971150	01/01/1994	West Coast Life Ins Company	CA	AMCO/I							26,105,019	
70335	94-0971150	01/01/1994	West Coast Life Ins Company	CA	MCO/I							39,477,346	
70335	94-0971150	01/01/1994	West Coast Life Ins Company	CA	OTH/I	6,090,265	49,450	61,715	1,334,931				
0899999. General Account - Authorized U.S. Non-Affiliates							38,145,096,700	574,221,957	588,732,256	124,272,408		68,258,430	
1099999. Total General Account - Authorized Non-Affiliates							38,145,096,700	574,221,957	588,732,256	124,272,408		68,258,430	



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE S - PART 3 - SECTION 1**

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8	9		11	12		
							Current Year	Prior Year		Current Year	Prior Year		
1199999. Total General Account Authorized						38,145,096,700	574,221,957	588,732,256	124,272,408			68,258,430	
1499999. Total General Account - Unauthorized U.S. Affiliates													
1799999. Total General Account - Unauthorized Non-U.S. Affiliates													
1899999. Total General Account - Unauthorized Affiliates													
79782	86-0262046	02/23/1972	Electric Cooperative Life Ins Co	AZ	CO/I	451,323	314,971	337,383	8,810				
1999999. General Account - Unauthorized U.S. Non-Affiliates						451,323	314,971	337,383	8,810				
00000	AA-3190878	07/01/2002	Wilton Reinsurance Bermuda Ltd	BM	YRT/I	22,370,565	946,694	974,021	130,195				
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates						22,370,565	946,694	974,021	130,195				
2199999. Total General Account - Unauthorized Non-Affiliates						22,821,888	1,261,665	1,311,404	139,004				
2299999. Total General Account Unauthorized						22,821,888	1,261,665	1,311,404	139,004				
2599999. Total General Account - Certified U.S. Affiliates													
2899999. Total General Account - Certified Non-U.S. Affiliates													
2999999. Total General Account - Certified Affiliates													
3299999. Total General Account - Certified Non-Affiliates													
3399999. Total General Account Certified													
3499999. Total General Account Authorized, Unauthorized and Certified						38,167,918,588	575,483,622	590,043,661	124,411,412			68,258,430	
3799999. Total Separate Accounts - Authorized U.S. Affiliates													
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates													
4199999. Total Separate Accounts - Authorized Affiliates													
68675	48-0409770	07/01/2000	Security Benefits Life Insurance Co	KS	ACO/I				7,580,625			430,659,538	
4299999. Separate Accounts - Authorized U.S. Non-Affiliates									7,580,625			430,659,538	
4499999. Total Separate Accounts - Authorized Non-Affiliates									7,580,625			430,659,538	
4599999. Total Separate Accounts Authorized									7,580,625			430,659,538	
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates													
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates													
5299999. Total Separate Accounts - Unauthorized Affiliates													
5599999. Total Separate Accounts - Unauthorized Non-Affiliates													
5699999. Total Separate Accounts Unauthorized													
5999999. Total Separate Accounts - Certified U.S. Affiliates													
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates													
6399999. Total Separate Accounts - Certified Affiliates													
6699999. Total Separate Accounts - Certified Non-Affiliates													
6799999. Total Separate Accounts Certified													
6899999. Total Separate Accounts Authorized, Unauthorized and Certified									7,580,625			430,659,538	
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)						38,145,548,023	574,536,928	589,069,639	131,861,843			498,917,968	
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)						22,370,565	946,694	974,021	130,195				
9999999 - Totals						38,167,918,588	575,483,622	590,043,661	131,992,037			498,917,968	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Premiums	8 Unearned Premiums (Estimated)	9 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
23787	31-4177100	01/01/1996	Nationwide Mutual Insurance Company	OH	MO/G	202,538,743					72,290,252	
0299999. General Account - Authorized U.S. Affiliates - Other						202,538,743					72,290,252	
0399999. Total General Account - Authorized U.S. Affiliates						202,538,743					72,290,252	
0699999. Total General Account - Authorized Non-U.S. Affiliates												
0799999. Total General Account - Authorized Affiliates						202,538,743					72,290,252	
22667	95-2371728	08/01/2003	ACE American	PA	CO/G	41,877	23,989					
71439	38-1843471	07/01/2003	Assurity Life Insurance Compnay	NE	CO/I	1,033,832	138,414	8,710,255				
61883	42-0884060	10/01/2002	Central United Life Insurance Company	TX	CO/I	229,165	29,894	707,998				
62359	36-1824600	11/01/2002	Constitution Life Insurance Company	TX	CO/I	10,083,065	1,406,766	3,035,963				
70939	13-2611847	01/01/2007	Gerber Life Insurance Company	NY	OTH/G	20,969,924						
42374	74-2195939	09/24/2004	Houston Casualty Company	TX	OTH/G	312,147	177,057					
65676	35-0472300	02/01/1984	Lincoln National Life Insurance Co	IN	CO/I			350,889				
66346	58-0828824	01/01/2010	Munich American Reassurance Co	GA	YRT/G	337,954						
20087	47-0355979	08/01/2013	National Indemnity Company	NE	CO/G			2,908,802				
38636	13-3031176	04/01/2012	Partner Reinsurance Co of the US	NY	CO/G	139,590	79,962					
68209	62-0506281	07/01/1991	Provident Life & Casualty Insurance Company	TN	CO/I	825,458		26,634,260				
10219	23-1641984	01/01/2011	QBE Reinsurance	PA	CO/G	97,713	55,973					
68381	36-0883760	01/01/2010	Reliance Stand Life Ins Co	IL	YRT/G	1,371,636	2,927,068					
67105	41-0451140	01/01/2005	Reliastar Life Insurance Company	GA	CO/G	180,537						
82627	06-0839705	05/01/1987	Swiss Re Life and Health America Inc	NY	CO/G		6,833,051	23,100				
82627	06-0839705	09/01/1989	Swiss Re Life and Health America Inc	NY	YRT/G			539				
61425	36-0792925	05/01/1987	Trustmark Insurance Co (Mutual)	IL	CO/I	15,200						
62596	31-0252460	01/01/2009	Union Fidelity	PA	CO/I	2,933	(62)	62				
63479	58-0869673	04/01/1992	United Teacher Associates Insurance Co	GA	CO/I	471		289,108				
0899999. General Account - Authorized U.S. Non-Affiliates						35,641,502	11,672,112	42,660,976				
1099999. Total General Account - Authorized Non-Affiliates						35,641,502	11,672,112	42,660,976				
1199999. Total General Account Authorized						238,180,245	11,672,112	42,660,976			72,290,252	
1499999. Total General Account - Unauthorized U.S. Affiliates												
1799999. Total General Account - Unauthorized Non-U.S. Affiliates												
1899999. Total General Account - Unauthorized Affiliates												
00000	AA-1340125	08/01/2013	Hannover Rucksversicherung AG	GER	OTH/G	282,399	5,054					
00000	AA-1120103	04/01/2012	Lloyds #1967	ENG	CO/G	335,687	11,305					
00000	AA-1120104	12/01/2011	Lloyds #2012	ENG	CO/G	111,891	3,768					
00000	AA-1120055	03/01/2010	Lloyds #3623	ENG	CO/G	882,642	178,717					
00000	AA-1122000	01/01/2005	Lloyds of London (London Travel Services Binding Authority)	ENG	CO/G	1,624,835						
00000	AA-1127861	01/01/2013	Lloyds Syndicate #1861	ENG	CO/G	111,896	3,768					
00000	AA-1128488	01/01/2009	Lloyds Syndicate AGM #2488	ENG	CO/G	186,491	6,281					
00000	AA-1128987	01/01/2009	Lloyds Syndicate BRT #2987	ENG	CO/G	699,341	23,552					
00000	AA-1127206	06/01/2006	Lloyds Syndicate CAP #1206	ENG	CO/G	93,246	3,140					
00000	AA-1126004	01/01/2009	Lloyds Syndicate CNP #4444	ENG	CO/G	93,246	3,140					
00000	AA-1126033	01/01/2009	Lloyds Syndicate HIS #0033	ENG	CO/G	559,473	18,842					
00000	AA-1126510	01/01/2009	Lloyds Syndicate KLN #0510	ENG	CO/G	559,473	18,842					
00000	AA-1127183	01/01/2009	Lloyds Syndicate Number 1183 - Talbot	ENG	CO/G	186,491	6,281					
00000	AA-1127200	09/26/2011	Lloyds Syndicate Number 1200	ENG	CO/G	111,896	3,768					
00000	AA-1128001	01/01/2009	Lloyds Syndicate Number 2001 - AMLIN Underwriting Ltd	ENG	CO/G	261,086	8,793					
00000	AA-1120075	01/01/2009	Lloyds Syndicate Number 4020 - ARK	ENG	CO/G	559,473	18,842					
00000	AA-1126006	01/01/2009	Lloyds Syndicate Number 4472 - Liberty	ENG	CO/G	559,473	18,842					
00000	AA-1126003	01/01/2009	Lloyds Syndicate TRV #5000	ENG	CO/G	279,742	9,421					
00000	AA-1126457	01/01/2009	Lloyds Syndicate WTK #0457	ENG	CO/G	186,491	6,281					
00000	AA-3194213	10/01/2012	Roundstone Insurance	BER	OTH/G	7,759,747						
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates						15,445,019	348,637					
2199999. Total General Account - Unauthorized Non-Affiliates						15,445,019	348,637					
2299999. Total General Account Unauthorized						15,445,019	348,637					
2599999. Total General Account - Certified U.S. Affiliates												
2899999. Total General Account - Certified Non-U.S. Affiliates												
2999999. Total General Account - Certified Affiliates												

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE S - PART 3 - SECTION 2**

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4  Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Premiums	8 Unearned Premiums (Estimated)	9 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
3299999. Total General Account - Certified Non-Affiliates												
3399999. Total General Account Certified												
3499999. Total General Account Authorized, Unauthorized and Certified						253,625,264	12,020,749	42,660,976			72,290,252	
3799999. Total Separate Accounts - Authorized U.S. Affiliates												
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates												
4199999. Total Separate Accounts - Authorized Affiliates												
4499999. Total Separate Accounts - Authorized Non-Affiliates												
4599999. Total Separate Accounts Authorized												
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates												
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates												
5299999. Total Separate Accounts - Unauthorized Affiliates												
5599999. Total Separate Accounts - Unauthorized Non-Affiliates												
5699999. Total Separate Accounts Unauthorized												
5999999. Total Separate Accounts - Certified U.S. Affiliates												
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates												
6399999. Total Separate Accounts - Certified Affiliates												
6699999. Total Separate Accounts - Certified Non-Affiliates												
6799999. Total Separate Accounts Certified												
6899999. Total Separate Accounts Authorized, Unauthorized and Certified												
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)						238,180,245	11,672,112	42,660,976			72,290,252	
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)						15,445,019	348,637					
9999999 - Totals						253,625,264	12,020,749	42,660,976			72,290,252	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE   NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 4

Reinsurance Ceded to Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols.5+6+7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8
0399999. Total General Account - Life and Annuity U.S. Affiliates									XXX					
0699999. Total General Account - Life and Annuity Non-U.S. Affiliates									XXX					
0799999. Total General Account - Life and Annuity Affiliates									XXX					
...79782 ...	...86-0262046 ...	...02/23/1972 ...	Electric Cooperative Life Ins Co	314,971	1,961		316,932			1,791,879				316,932
0899999. General Account - Life and Annuity U.S. Non-Affiliates				314,971	1,961		316,932		XXX	1,791,879				316,932
...00000 ...	...AA-3190878 ...	...07/01/2002 ...	Wilton Reinsurance Bermuda Ltd	946,694	245,196		1,191,890	900,000						900,000
0999999. General Account - Life and Annuity Non-U.S. Non-Affiliates				946,694	245,196		1,191,890	900,000	XXX					900,000
1099999. Total General Account - Life and Annuity Non-Affiliates				1,261,665	247,157		1,508,822	900,000	XXX	1,791,879				1,216,932
1199999. Total General Account Life and Annuity				1,261,665	247,157		1,508,822	900,000	XXX	1,791,879				1,216,932
1499999. Total General Account - Accident and Health U.S. Affiliates									XXX					
1799999. Total General Account - Accident and Health Non-U.S. Affiliates									XXX					
1899999. Total General Account - Accident and Health Affiliates									XXX					
2199999. Total General Account - Accident and Health Non-Affiliates									XXX					
2299999. Total General Account Accident and Health									XXX					
2399999. Total General Account				1,261,665	247,157		1,508,822	900,000	XXX	1,791,879				1,216,932
2699999. Total Separate Accounts - U.S. Affiliates									XXX					
2999999. Total Separate Accounts - Non-U.S. Affiliates									XXX					
3099999. Total Separate Accounts - Affiliates									XXX					
3399999. Total Separate Accounts - Non-Affiliates									XXX					
3499999. Total Separate Accounts									XXX					
3599999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)				314,971	1,961		316,932		XXX	1,791,879				316,932
3699999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)				946,694	245,196		1,191,890	900,000	XXX					900,000
9999999 - Totals				1,261,665	247,157		1,508,822	900,000	XXX	1,791,879				1,216,932

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
	.....	1.....	11102501 .....	Wachovia Bank N.A. ....	.....900,000

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business  
(000 OMITTED)

	1 2013	2 2012	3 2011	4 2010	5 2009
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts .....	385,617	327,474	322,394	393,187	395,829
2. Commissions and reinsurance expense allowances .....	73,350	63,986	61,665	75,382	80,370
3. Contract claims .....	296,966	300,828	336,127	390,358	370,294
4. Surrender benefits and withdrawals for life contracts .....	3,571	3,444	2,977	397	2,403
5. Dividends to policyholders .....	643	1,621	1,886	3,626	643
6. Reserve adjustments on reinsurance ceded .....	14,006	(6,291)	(50,449)	8,626	19,392
7. Increase in aggregate reserve for life and accident and health contracts .....	(7,395)	(7,646)	(10,169)	(38,209)	(129,672)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	29,967	18,624	12,109	9,740	9,679
9. Aggregate reserves for life and accident and health contracts .....	630,165	635,560	643,207	652,044	695,399
10. Liability for deposit-type contracts .....	119	132	147	32	44,749
11. Contract claims unpaid .....	33,705	20,463	22,093	21,594	16,987
12. Amounts recoverable on reinsurance .....	23,112	22,266	8,728	23,455	16,977
13. Experience rating refunds due or unpaid .....	16,759	7,992	6,297	18,792	4,584
14. Policyholders' dividends (not included in Line 10) .....					308
15. Commissions and reinsurance expense allowances due .....	9,938	26,721	9,184	12,420	357
16. Unauthorized reinsurance offset .....	292	74	419	240	283
17. Offset for reinsurance with Certified Reinsurers .....			XXX	XXX	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F) .....					
19. Letters of credit (L) .....	900	900	900	900	900
20. Trust agreements (T) .....	1,792	1,789	1,786	1,783	1,776
21. Other (O) .....					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust .....			XXX	XXX	XXX
23. Funds deposited by and withheld from (F) .....			XXX	XXX	XXX
24. Letters of credit (L) .....			XXX	XXX	XXX
25. Trust agreements (T) .....			XXX	XXX	XXX
26. Other (O) .....			XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	35,516,152,671		35,516,152,671
2. Reinsurance (Line 16) .....	39,871,098	(39,871,098)	
3. Premiums and considerations (Line 15) .....	67,629,913	29,967,225	97,597,138
4. Net credit for ceded reinsurance .....	XXX	672,280,811	672,280,811
5. All other admitted assets (balance) .....	1,205,501,180		1,205,501,180
6. Total assets excluding Separate Accounts (Line 26) .....	36,829,154,862	662,376,938	37,491,531,800
7. Separate Account assets (Line 27) .....	83,846,426,556		83,846,426,556
8. Total assets (Line 28) .....	120,675,581,418	662,376,938	121,337,958,356
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	28,819,460,707	628,963,775	29,448,424,482
10. Liability for deposit-type contracts (Line 3) .....	2,079,169,474		2,079,169,474
11. Claim reserves (Line 4) .....	79,095,361	33,705,053	112,800,414
12. Policyholder dividends/reserves (Lines 5 through 7) .....	57,775,572		57,775,572
13. Premium & annuity considerations received in advance (Line 8) .....	3,764,085		3,764,085
14. Other contract liabilities (Line 9) .....	87,855,519		87,855,519
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....	291,890	(291,890)	
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....			
19. All other liabilities (balance) .....	2,151,790,978		2,151,790,978
20. Total liabilities excluding Separate Accounts (Line 26) .....	33,279,203,586	662,376,938	33,941,580,524
21. Separate Account liabilities (Line 27) .....	83,846,426,556		83,846,426,556
22. Total liabilities (Line 28) .....	117,125,630,142	662,376,938	117,788,007,080
23. Capital & surplus (Line 38) .....	3,549,951,275	XXX	3,549,951,275
24. Total liabilities, capital & surplus (Line 39) .....	120,675,581,417	662,376,938	121,337,958,355
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	628,963,775		
26. Claim reserves .....	33,705,053		
27. Policyholder dividends/reserves .....			
28. Premium & annuity considerations received in advance .....			
29. Liability for deposit-type contracts .....			
30. Other contract liabilities .....			
31. Reinsurance ceded assets .....	39,871,098		
32. Other ceded reinsurance recoverables .....			
33. Total ceded reinsurance recoverables .....	702,539,926		
34. Premiums and considerations .....	29,967,225		
35. Reinsurance in unauthorized companies .....	291,890		
36. Funds held under reinsurance treaties with unauthorized reinsurers .....			
37. Reinsurance with Certified Reinsurers .....			
38. Funds held under reinsurance treaties with Certified Reinsurers .....			
39. Other ceded reinsurance payables/offsets .....			
40. Total ceded reinsurance payable/offsets .....	30,259,115		
41. Total net credit for ceded reinsurance .....	672,280,811		

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

			Allocated by States and Territories				
			Direct Business Only				6
			1	2	3	4	
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	5
							Totals
1.	Alabama .....	AL	5,892,972	2,729,729			8,622,701
2.	Alaska .....	AK	1,216,953	764,976			1,981,929
3.	Arizona .....	AZ	23,572,956	9,493,939			33,066,895
4.	Arkansas .....	AR	2,064,952	4,535,220			6,600,171
5.	California .....	CA	139,648,466	63,645,308			203,293,774
6.	Colorado .....	CO	7,549,043	7,428,781			14,977,825
7.	Connecticut .....	CT	7,675,240	17,532,255			25,207,496
8.	Delaware .....	DE	160,280,346	5,356,693			165,637,039
9.	District of Columbia .....	DC	779,466	738,057			1,517,523
10.	Florida .....	FL	51,996,849	46,024,869			98,021,718
11.	Georgia .....	GA	37,512,401	8,996,843			46,509,244
12.	Hawaii .....	HI	1,635,046	3,707,355			5,342,401
13.	Idaho .....	ID	2,182,857	186,130			2,368,988
14.	Illinois .....	IL	194,404,038	16,242,385			210,646,424
15.	Indiana .....	IN	8,778,081	9,440,637			18,218,718
16.	Iowa .....	IA	6,806,386	3,089,793			9,896,179
17.	Kansas .....	KS	4,248,974	6,778,374			11,027,348
18.	Kentucky .....	KY	12,938,914	5,915,341			18,854,255
19.	Louisiana .....	LA	3,768,692	2,925,178			6,693,870
20.	Maine .....	ME	1,113,886	1,219,720			2,333,606
21.	Maryland .....	MD	25,629,108	17,333,468			42,962,576
22.	Massachusetts .....	MA	12,017,670	45,002,491			57,020,160
23.	Michigan .....	MI	29,322,449	15,551,330			44,873,779
24.	Minnesota .....	MN	47,391,456	2,941,849			50,333,305
25.	Mississippi .....	MS	3,386,142	964,107			4,350,250
26.	Missouri .....	MO	14,698,349	8,943,278			23,641,627
27.	Montana .....	MT	384,024	1,290,444			1,674,467
28.	Nebraska .....	NE	953,018	1,051,769			2,004,787
29.	Nevada .....	NV	1,825,756	1,108,177			2,933,933
30.	New Hampshire .....	NH	2,702,152	5,099,616			7,801,767
31.	New Jersey .....	NJ	48,533,973	18,987,657			67,521,631
32.	New Mexico .....	NM	662,902	1,381,471			2,044,372
33.	New York .....	NY	107,761,860	64,629,300			172,391,160
34.	North Carolina .....	NC	79,709,746	16,847,563			96,557,309
35.	North Dakota .....	ND	28,265,886	48,331			28,314,216
36.	Ohio .....	OH	60,277,773	32,584,864			980,352,667
37.	Oklahoma .....	OK	1,441,937	3,588,562			5,030,500
38.	Oregon .....	OR	1,650,606	6,157,561			7,808,167
39.	Pennsylvania .....	PA	76,145,415	54,513,380			130,658,795
40.	Rhode Island .....	RI	3,992,072	3,487,826			7,479,897
41.	South Carolina .....	SC	7,609,079	5,662,301			13,271,380
42.	South Dakota .....	SD	694,644	161,280			855,924
43.	Tennessee .....	TN	6,931,779	10,200,134			17,131,913
44.	Texas .....	TX	43,800,195	24,324,722			68,124,917
45.	Utah .....	UT	11,328,716	4,359,949			15,688,665
46.	Vermont .....	VT	1,678,055	1,047,753			2,725,807
47.	Virginia .....	VA	22,238,125	13,559,841			35,797,966
48.	Washington .....	WA	3,454,816	10,026,947			13,481,763
49.	West Virginia .....	WV	5,553,987	7,054,098			12,608,085
50.	Wisconsin .....	WI	4,648,885	5,582,340			10,231,225
51.	Wyoming .....	WY	1,875,333	136,049			2,011,382
52.	American Samoa .....	AS	58,334				58,334
53.	Guam .....	GU	1,170				1,170
54.	Puerto Rico .....	PR	465,236	673,296			1,138,532
55.	U.S. Virgin Islands .....	VI	123,827				123,827
56.	Northern Mariana Islands .....	MP					
57.	Canada .....	CAN	94,761				94,761
58.	Aggregate Other Alien .....	OT	1,008,384	14,214			1,022,598
59.	Total		1,332,384,136	601,067,549			887,490,030
							2,820,941,716



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y  
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0140	Nationwide		31-1486309				10 W. Nationwide, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				101 N. Twentieth St, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1733036				120 Acre Partners, LLC	DE	NIA	Nationwide Realty Investors, Ltd.	Ownership	95.000	Nationwide Mutual Insurance Company	1
0140	Nationwide		26-2451988	4288132			1492 Capital, LLC	OH	NIA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-1347603				180 E. Broad Partners, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	33.330	Nationwide Mutual Insurance Company	1
0140	Nationwide		31-1580283				400 West Nationwide Boulevard, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				425 West Nationwide Boulevard, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				44 Chestnut, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				775 Yard Street Restaurant, LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				775 Yard Street, LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				800 Bobcat Avenue, LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				805 Bobcat Avenue, LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				845 Yard Street, LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				850 Goodale Blvd., LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				895 W. Third Ave., LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				925 Burrell Avenue Acquisitions, LLC	OH	NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1680808				AD Investments, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	60.000	Nationwide Mutual Insurance Company	1
0140	Nationwide		31-1580283				ADTV, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		52-2227314				AGMC Reinsurance, Ltd.	TCA	IA	Nationwide Advantage Mortgage Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		42-1011300	4287229			ALLIED General Agency Company	IA	IA	AMCO Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		42-0958655				ALLIED Group, Inc.	IA	IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide						Allied Holdings (Delaware), Inc.	DE	IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide	10127	27-0114983	4288169			ALLIED Insurance Company of America	OH	IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
							ALLIED Property and Casualty Insurance Company	IA	IA	ALLIED Group, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide	45279	42-1201931	4287144			ALLIED Texas Agency, Inc.	TX	IA	AMCO Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		42-1527863	4287238			AMCO Insurance Company	IA	IA	ALLIED Group, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide	19100	42-6054959	4287153			American Marine Underwriters, Inc.	FL	IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		59-1031596	4288011			Anderson Meadows, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				Arena District CA I, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				Arena District Owners Association	OH	OTH	Other non-Nationwide	n/a		Other non-Nationwide	2
0140	Nationwide		90-0280710				Arena Theatres, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				Artessa at Quarry Village, LLC	TX	OTH	Other non-Nationwide	n/a		Other non-Nationwide	2
0140	Nationwide						BCCS Investment Fund LLC	DE	OTH	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1184438				Boulevard Inn Limited Liability Company	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	94.800	Nationwide Mutual Insurance Company	1
0140	Nationwide		31-1555487				Broad Street Retail, LLC	DE	NIA	Nationwide Realty Investors, Ltd.	Ownership	60.000	Nationwide Mutual Insurance Company	1
0140	Nationwide						Brooke School Investment Fund, LLC	DE	OTH	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide			3730540			CHP New Markets Investment Fund, LLC	OH	OTH	Nationwide Mutual Insurance Company	Limited partner /no control	50.000	other non-Nationwide	1
0140	Nationwide		20-1618232				CNRI-Cannonsport Condominium, LLC	OH	NIA	CNRI-Cannonsport, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-1618232				CNRI-Cannonsport, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide						Co-Investment Fund, L.P.	DE	OTH	Other non-Nationwide	n/a		Other non-Nationwide	2
0140	Nationwide		31-1579973				COLHOC Limited Partnership	OH	NIA	NRI Limited Partnership	Ownership	30.760	Other non-Nationwide	1
0140	Nationwide	29262	74-1061659	4288057			Colonial County Mutual Insurance Company	TX	OTH	Other non-Nationwide	contract		Other non-Nationwide	
							Continental/NRI North Shore Investments, LLC	OH	NIA	Continental/NRI North Shore Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		04-3750770				Continental/NRI North Shore Investments, LLC	OH	NIA	Continental/NRI North Shore Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-0366090				Continental/NRI North Shore Investments, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	50.500	Nationwide Mutual Insurance Company	1
0140	Nationwide		20-0142724				Cotton Mill Partners, LLC	VA	OTH	Nationwide Mutual Insurance Company	Limited partner /no control	2.000	other non-Nationwide	1
0140	Nationwide	18961	68-0066866	4288178			Crestbrook Insurance Company	OH	IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y  
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
...0140	Nationwide		31-1486309				Crewville, Ltd.	..OH	..NIA	Nationwide Realty Investors, Ltd.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..42587	42-1207150	4287162			Depositors Insurance Company	..IA	..IA	ALLIED Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		33-0096671	4287694			DVM Insurance Agency, Inc.	..CA	..NIA	Veterinary Pet Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		20-1945276				East of Madison, LLC	..DE	..NIA	120 Acre Partners, Ltd.	Ownership	..24.910	Nationwide Mutual Insurance Company	.....1
...0140	Nationwide		20-1945276				East of Madison, LLC	..DE	..NIA	ND La Quinta Partners, LLC	Ownership	..76.090	Nationwide Mutual Insurance Company	.....1
...0140	Nationwide						ELH Investment LLC	..DE	..OTH	Nationwide Mutual Insurance Company	Other		Nationwide Mutual Insurance Company	.....2
...0140	Nationwide	..13838	42-0618271				Farmland Mutual Insurance Company	..IA	..OTH	Other non-Nationwide	debt		Other non-Nationwide	.....2
...0140	Nationwide	..22209	75-6013587	4287676			Freedom Specialty Insurance Company (fka Atlantic Insurance Company)	..OH	..IA	Scottsdale Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		20-4939866				Grandview Yard Hotel Holdings, LLC	..OH	..NIA	NRI Equity Land Investments, LLC	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		20-4939866				Grandview Yard Hotel, LLC	..OH	..NIA	Grandview Yard Hotel Holdings, LLC	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		51-0241172				Harleysville Group, Inc.	..DE	..NIA	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..23582	41-0417250	4442260			Harleysville Insurance Company	..PA	..IA	Harleysville Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..33235	16-1075588	4442158			Harleysville Insurance Company of New Jersey	..NJ	..IA	Harleysville Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..10674	23-2864924	4442242			Harleysville Insurance Company of New York	..PA	..IA	Harleysville Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..14516	38-3198542	4442251			Harleysville Lake States Insurance Company	..MI	..IA	Harleysville Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..64327	23-1580983	4440659			Harleysville Life Insurance Company	..PA	..IA	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..40983	23-2612951	4442149			Harleysville Pennland Insurance Company	..PA	..IA	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..35896	23-2384978	4442288			Harleysville Preferred Insurance Company	..PA	..IA	Harleysville Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..26182	04-1989660	4442372			Harleysville Worcester Insurance Company	..PA	..IA	Harleysville Group, Inc.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		23-2403000	4442327			Harleysville, Ltd.	..PA	..NIA	Harleysville Preferred Insurance Company	Ownership	..49.500	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		23-2403000	4442327			Harleysville Worcester Insurance Company	..PA	..NIA	Harleysville Preferred Insurance Company	Ownership	..49.500	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		23-2403000	4442327			Harleysville, Ltd.	..PA	..NIA	Harleysville Group, Inc.	Ownership	..1.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		32-0051216				Hideaway Properties Corp.	..CA	..OTH	Nationwide Realty Investors, Ltd.	Ownership	..50.000	Nationwide Mutual Insurance Company	.....1
...0140	Nationwide		31-0871532	4288020			Insurance Intermediaries, Inc.	..OH	..IA	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		23-2882311				Insurance Management Resources, L.P.	..PA	..NIA	Harleysville Insurance Company	Ownership	..1.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		23-2882311				Insurance Management Resources, L.P.	..PA	..NIA	Harleysville Preferred Insurance Company	Ownership	..99.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		31-1486309				Jerome Village Company, LLC	..OH	..NIA	Nationwide Realty Investors, Ltd.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide						Jerome Village Master Property Owners Association	..OH	..OTH	Other non-Nationwide	Ownership		Other non-Nationwide	.....2
...0140	Nationwide		31-1486309				JV Developers, LLC	..OH	..OTH	Nationwide Realty Investors, Ltd.	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		46-2956640				Jerome Village Residential Property Owners Association, Inc.	..OH	..NIA	Other non-Nationwide	Ownership		Other non-Nationwide	.....2
...0140	Nationwide						Leaguers Investment Fund LLC	..DE	..OTH	Other non-Nationwide	Ownership		Other non-Nationwide	.....2
...0140	Nationwide		56-3789187	4286969			Life REO Holdings, LLC	..OH	..NIA	Nationwide Mutual Insurance Company	Other		Nationwide Mutual Insurance Company	.....2
...0140	Nationwide		74-1395229				Lone Star General Agency, Inc.	..TX	..IA	Nationwide Life Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide						Match School Investment Fund, LLC	..DE	..OTH	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide	..11991	38-0865250	4288187			National Casualty Company	..WI	..IA	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide						National Casualty Company of America, Ltd.	..GBR	..IA	Nationwide Mutual Insurance Company	Ownership	..100.000	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	..IA	..NIA	Nationwide Mutual Insurance Company	Ownership	..87.300	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	..IA	..NIA	AMCO Insurance Company	Ownership	..8.470	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	..IA	..NIA	ALLIED Property & Casualty Insurance Company	Ownership	..4.230	Nationwide Mutual Insurance Company	.....
...0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	..IA	..NIA	Depositors Insurance Company	Ownership		Nationwide Mutual Insurance Company	.....

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
..0140 .....	Nationwide .....	..26093 .....	48-0470690 .....	4288196 .....	.....	.....	Nationwide Affinity Insurance Company of America .....	..OH .....	..IA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	..28223 .....	42-1015537 .....	4288208 .....	.....	.....	Nationwide Agribusiness Insurance Company .....	..IA .....	..IA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	20-5976272 .....	.....	.....	.....	Nationwide Alternative Investments, LLC .....	..OH .....	..NIA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1578869 .....	4288075 .....	.....	.....	Nationwide Arena, LLC .....	..OH .....	..NIA .....	NRI Arena, Ltd. ....	Ownership.....	..90.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	20-8670712 .....	4288114 .....	.....	.....	Nationwide Asset Management, LLC .....	..OH .....	..NIA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	..10723 .....	95-0639970 .....	4288217 .....	.....	.....	Nationwide Assurance Company .....	..WI .....	..IA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1592130 .....	2729677 .....	.....	.....	Nationwide Bank .....	.....	..OTH .....	Nationwide Financial Services, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	52-1776258 .....	4286875 .....	.....	.....	Nationwide Better Health (Ohio), LLC .....	..OH .....	..NIA .....	Nationwide Better Health Holding Company, LLC .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	11-3766032 .....	4286428 .....	.....	.....	Nationwide Better Health Holding Company, LLC .....	..OH .....	..NIA .....	Nationwide Corporation .....	Ownership.....	..75.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	11-3766032 .....	4286428 .....	.....	.....	Nationwide Better Health Holding Company, LLC .....	..OH .....	..NIA .....	Nationwide Mutual Fire Insurance Company .....	Ownership.....	..25.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1036287 .....	4288123 .....	.....	.....	Nationwide Cash Management Company .....	..OH .....	..NIA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-4416546 .....	3828081 .....	.....	.....	Nationwide Corporation .....	..OH .....	..NIA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..95.200 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-4416546 .....	3828081 .....	.....	.....	Nationwide Corporation .....	..OH .....	..NIA .....	Nationwide Mutual Fire Insurance Company .....	Ownership.....	..4.800 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	04-3679407 .....	4286839 .....	.....	.....	Nationwide Emerging Managers, LLC .....	..DE .....	..NIA .....	NWD Investment Management, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	05-0630007 .....	4288048 .....	.....	.....	Nationwide Exclusive Agent Risk Purchasing Group, LLC .....	..OH .....	..NIA .....	Insurance Intermediaries, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1667326 .....	4286932 .....	.....	.....	Nationwide Financial Assignment Company .....	..OH .....	..NIA .....	Nationwide Life Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	23-2412039 .....	4287087 .....	.....	.....	Nationwide Financial General Agency, Inc. ....	..PA .....	..NIA .....	NFS Distributors, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1316276 .....	4287069 .....	.....	.....	Nationwide Financial Institution Distributors Agency, Inc. ....	..DE .....	..NIA .....	NFS Distributors, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-6554353 .....	4286978 .....	.....	.....	Nationwide Financial Services Capital Trust .....	..DE .....	..NIA .....	Nationwide Financial Services, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1486870 .....	3828063 .....	.....	.....	Nationwide Financial Services, Inc. ....	..DE .....	..UDP .....	Nationwide Corporation .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	52-6969857 .....	4286996 .....	.....	.....	Nationwide Fund Advisors .....	..DE .....	..NIA .....	Nationwide Financial Services, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1748721 .....	42877050 .....	.....	.....	Nationwide Fund Distributors LLC .....	..DE .....	..NIA .....	NFS Distributors, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-0900518 .....	4287041 .....	.....	.....	Nationwide Fund Management LLC .....	..DE .....	..NIA .....	NFS Distributors, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	..23760 .....	31-4425763 .....	4287957 .....	.....	.....	Nationwide General Insurance Company .....	..OH .....	..IA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1570938 .....	4286398 .....	.....	.....	Nationwide Global Holdings, Inc. ....	..OH .....	..NIA .....	Nationwide Corporation .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	04-3732385 .....	4286857 .....	.....	.....	Nationwide Global Ventures, Inc. ....	..DE .....	..NIA .....	Nationwide Asset Management Holdings, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1399201 .....	.....	.....	.....	Nationwide Indemnity Company .....	..OH .....	..IA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	..25453 .....	95-2130882 .....	4287180 .....	.....	.....	Nationwide Insurance Company of America .....	..WI .....	..IA .....	ALLIED Group, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	..10948 .....	31-1613686 .....	4287966 .....	.....	.....	Nationwide Insurance Company of Florida .....	..OH .....	..IA .....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-6022301 .....	.....	.....	.....	Nationwide Insurance Foundation .....	..OH .....	..OTH .....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	..2 .....
..0140 .....	Nationwide .....	.....	41-2206199 .....	4286950 .....	.....	.....	Nationwide Investment Advisors, LLC .....	..OH .....	..NIA .....	Nationwide Life Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	73-0988442 .....	4286923 .....	.....	.....	Nationwide Investment Services Corporation .....	..OK .....	..NIA .....	Nationwide Life Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	31-1000740 .....	.....	.....	.....	Nationwide Life and Annuity Insurance Company .....	..OH .....	..IA .....	Nationwide Life Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	..66869 .....	31-4156830 .....	.....	.....	.....	Nationwide Life Insurance Company .....	..OH .....	..RE .....	Nationwide Financial Services, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
..0140 .....	Nationwide .....	.....	13-4212969 .....	.....	.....	.....	Nationwide Life Tax Credit Partners 2002-A, LLC .....	..OH .....	..NIA .....	Nationwide Life Insurance Company .....	Other.....	.....	Nationwide Mutual Insurance Company .....	..2 .....
..0140 .....	Nationwide .....	.....	01-0749754 .....	.....	.....	.....	Nationwide Life Tax Credit Partners 2002-B, LLC .....	..OH .....	..NIA .....	Nationwide Life Insurance Company .....	Other.....	.....	Nationwide Mutual Insurance Company .....	..2 .....
..0140 .....	Nationwide .....	.....	03-0498148 .....	3262573 .....	.....	.....	Nationwide Life Tax Credit Partners 2002-C, LLC .....	..OH .....	..NIA .....	Nationwide Life Insurance Company .....	Other.....	.....	Nationwide Mutual Insurance Company .....	..2 .....

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14  Ultimate Controlling Entity(ies)/Person(s)	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi- ciliary Loca- tion	Relation- ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)				*
...0140 ...	Nationwide .....		54-2113175 .....				Nationwide Life Tax Credit Partners 2003-A, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		58-2672725 .....				Nationwide Life Tax Credit Partners 2003-B, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-0357951 .....	3811001 .....			Nationwide Life Tax Credit Partners 2003-C, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-0382144 .....				Nationwide Life Tax Credit Partners 2004-A, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-0745944 .....				Nationwide Life Tax Credit Partners 2004-B, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-0745965 .....				Nationwide Life Tax Credit Partners 2004-C, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-1128408 .....				Nationwide Life Tax Credit Partners 2004-D, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-1128472 .....				Nationwide Life Tax Credit Partners 2004-E, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-1918935 .....	3318117 .....			Nationwide Life Tax Credit Partners 2004-F, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-2303694 .....				Nationwide Life Tax Credit Partners 2005-A, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-2303602 .....				Nationwide Life Tax Credit Partners 2005-B, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-2450960 .....				Nationwide Life Tax Credit Partners 2005-C, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-2451052 .....				Nationwide Life Tax Credit Partners 2005-D, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		20-2774223 .....				Nationwide Life Tax Credit Partners 2005-E, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		21-1288836 .....				Nationwide Life Tax Credit Partners 2007-A, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		26-3427373 .....				Nationwide Life Tax Credit Partners 2009-A, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		26-3427435 .....				Nationwide Life Tax Credit Partners 2009-B, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		26-3427479 .....				Nationwide Life Tax Credit Partners 2009-C, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		26-3427525 .....				Nationwide Life Tax Credit Partners 2009-D, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		26-4737055 .....				Nationwide Life Tax Credit Partners 2009-E, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		26-4737157 .....				Nationwide Life Tax Credit Partners 2009-F, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		46-1952215 .....				Nationwide Life Tax Credit Partners 2013-A, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		46-1971926 .....				Nationwide Life Tax Credit Partners 2013-B, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		27-1362364 .....				Nationwide Life Tax Credit Partners 2009-I, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....			3779811 .....			Nationwide Life Tax Credit Partners No. 1, LLC .....	..OH.....	..NIA.....	Nationwide Life Insurance Company .....	Other.....		Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....	..42110 .....	75-1780981 .....	4287984 .....			Nationwide Lloyds .....	..TX.....	..IA.....	n/a .....	contract .....		Nationwide Mutual Insurance Company .....	..2 .....

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
...0140 ...	Nationwide .....						Nationwide Mutual Capital I, LLC .....	DE	NIA.....	Nationwide Mutual Capital, LLC .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		75-3191025 .....				Nationwide Mutual Capital, LLC .....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..23779 .....	82-0549218 .....	3828090 .....			Nationwide Mutual Fire Insurance Company .....	OH	OTH.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	.....
...0140 ...	Nationwide .....	..23787 .....	31-4177100 .....	3828072 .....			Nationwide Mutual Insurance Company .....	OH	UIP.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	.....
...0140 ...	Nationwide .....		34-2012765 .....	4288084 .....			Nationwide Private Equity Fund, LLC .....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..37877 .....	31-0970750 .....	4287993 .....			Nationwide Property and Casualty Insurance Company .....	OH	IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....	4288105 .....			Nationwide Realty Investors, Ltd. ....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..96.700 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....	4288105 .....			Nationwide Realty Investors, Ltd. ....	OH	NIA.....	Nationwide Indemnity Company .....	Ownership.....	..3.300 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				Nationwide Realty Management, LLC .....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....			4288066 .....			Nationwide Realty Services, Ltd. ....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		06-0987812 .....	4287117 .....			Nationwide Retirement Solutions Insurance Agency, Inc. ....	MA	IA.....	Nationwide Retirement Solutions, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		73-0948330 .....	4287096 .....			Nationwide Retirement Solutions, Inc. ....	DE	NIA.....	NFS Distributors, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		86-0924069 .....	4287108 .....			Nationwide Retirement Solutions, Inc. of Arizona .....	AZ	NIA.....	Nationwide Retirement Solutions, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1331479 .....	4287126 .....			Nationwide Retirement Solutions, Inc. of Ohio .....	OH	NIA.....	Nationwide Retirement Solutions, Inc. ....	contract .....	.....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		74-2200854 .....	4287135 .....			Nationwide Retirement Solutions, Inc. of Texas .....	TX	NIA.....	Nationwide Retirement Solutions, Inc. ....	contract .....	.....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		42-1373380 .....	4287210 .....			Nationwide Sales Solutions, Inc. ....	IA	NIA.....	ALLIED Group, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		36-2434406 .....	4287078 .....			Nationwide Securities, LLC .....	OH	NIA.....	NFS Distributors, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-4177100 .....	4288093 .....			Nationwide Services Company, LLC .....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		27-0743545 .....				Nationwide Tax Credit Partners 2009-G, LLC .....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Other.....	.....	Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		27-0768791 .....				Nationwide Tax Credit Partners 2009-H, LLC .....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Other.....	.....	Nationwide Mutual Insurance Company .....	..2 .....
...0140 ...	Nationwide .....		27-1362364 .....				Nationwide Tax Credit Partners 2009-I, LLC .....	OH	NIA.....	Nationwide Life Insurance Company .....	Other.....	.....	Other non-Nationwide .....	..2 .....
...0140 ...	Nationwide .....		46-1952215 .....				Nationwide Tax Credit Partners 2013-A, LLC .....	OH	NIA.....	Nationwide Life Insurance Company .....	Other.....	.....	Other non-Nationwide .....	..2 .....
...0140 ...	Nationwide .....		11-3651828 .....				ND La Quinta Partners, LLC .....	DE	NIA.....	Nationwide Life Insurance Company .....	Other.....	.....	Other non-Nationwide .....	..2 .....
...0140 ...	Nationwide .....			4286866 .....			Nationwide Realty Investors, Ltd. ....	DE	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..95.000 .....	Nationwide Mutual Insurance Company .....	..1 .....
...0140 ...	Nationwide .....			4286866 .....			Newhouse Capital Partners II, LLC .....	DE	NIA.....	Nationwide Global Ventures, Inc. ....	Ownership.....	..80.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....			4286679 .....			Newhouse Capital Partners II, LLC .....	DE	NIA.....	Nationwide Global Ventures, Inc. ....	Ownership.....	..99.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....			4286679 .....			Newhouse Capital Partners, LLC .....	DE	NIA.....	NWD Investment Management, Inc. ....	Ownership.....	..19.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....			4286679 .....			Newhouse Capital Partners, LLC .....	DE	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..70.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....			4286679 .....			Nationwide Mutual Fire Insurance Company .....	DE	NIA.....	Nationwide Mutual Fire Insurance Company .....	Ownership.....	..10.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1630871 .....	4287032 .....			Newhouse Capital Partners, LLC .....	DE	NIA.....	Nationwide Financial Services, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		14-1892640 .....				NFS Distributors, Inc. ....	DE	NIA.....	Nationwide Financial Services, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		14-1892640 .....				NHT XII Tax Credit Fund, LLC .....	DC	NIA.....	Nationwide Life Insurance Company .....	Ownership.....	..49.990 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		14-1892640 .....				NHT XII Tax Credit Fund, LLC .....	DC	NIA.....	Nationwide Life Insurance Company .....	Ownership.....	..49.990 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		14-1892640 .....				NHT XII Tax Credit Fund, LLC .....	DC	NIA.....	Nationwide Assurance Company .....	Ownership.....	..25.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		14-1892640 .....				NHT XII Tax Credit Fund, LLC .....	DC	NIA.....	Nationwide Assurance Company .....	Ownership.....	..25.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....						NHT XII Tax Credit Fund, LLC .....	DC	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..25.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....						NNOV8, LLC .....	OH	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		26-0351004 .....				North Bank Condominium Home Owners Association .....	OH	OTH.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	..2 .....
...0140 ...	Nationwide .....		20-4939866 .....				North of Third, LLC .....	OH	NIA.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	..2 .....
...0140 ...	Nationwide .....		26-4083207 .....				NRI Equity Land Investments, LLC .....	OH	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		26-4083354 .....				Nationwide Realty Investors, Ltd. ....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..50.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				Nationwide Realty Investors, Ltd. ....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..50.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				Northstar Commercial Development, LLC .....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..50.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				Northstar Residential Development, LLC .....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..50.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				NRI 12325 Copper Way, LLC .....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				NRI 220 Schrock, LLC .....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....		31-1486309 .....				NRI Arena, LLC .....	OH	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y  
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
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0140	Nationwide		31-1486309				NRI Brooksedge, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI Builders, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI Communities/Charlotte, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI Communities/Harris Blvd., LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI Cramer Creek, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		20-4939866				NRI Equity Land Investments, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	80.000	Nationwide Mutual Insurance Company	
0140	Nationwide		26-0212217				NRI Equity Tampa, LLC	OH	OTH	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI Maxtown, LLC	OH	OTH	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		30-4939866				NRI Office Ventures, Ltd	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI-Rivulon, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				NRI Telecom, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
							Nationwide Property and Casualty Company							
0140	Nationwide		45-3123274				NTCIF-2011 Georgia State Investor, LLC	OH	NIA		Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		90-0729552				NTCIF-2011, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		27-4700627				NTCP 2011-A, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-0747898				NTCP 2011-B, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-0741029	4464703			NTCP 2012-A, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3309896				NTCP 2013-C, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-4104813				NTCP 2013-D, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-4111078				NTCP 2014-A, LLC	OH	NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3654078				NW-Amesbury, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		36-4702264				NW-Arvada, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-2943666				NW-Bandera, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-5159092				NW-Bayshore, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-2451156				NW-Bee Cave, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-0999932				NW-Bencap, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3707480				NW-Brooklyn, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3968244				NW-Camelback, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-2724980				NW-Cameron, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3674167				NW-Cedar Springs, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3994437				NW-Central Station, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		26-0901660				NW-ONC Coppell, LLC	DE	NIA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		27-2764819				NW-Commerce Center, LLC	DE	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		32-0359208				NW-Corvallis, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 205 Vine, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 225 Nationwide, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 230 West, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 240 Nationwide, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 250 Brodbelt, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 265 Neil, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 275 Marconi, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 295 McConnell, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 300 Neil, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 300 Spring, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 355 McConnell, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 425 Nationwide, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD 500 Nationwide, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Arena Crossing, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Arena District I, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Arena District II, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Arena District MM, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y  
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0140	Nationwide		31-1580283				NWD Arena District PW, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Arena District V, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		04-3679396	4286848			NWD Asset Management Holdings, Inc.	DE	NIA	NWD Investment Management, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Athletic Club, LLC	OH	NIA	NWD Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1636299	4286594			NWD Investment Management, Inc.	DE	NIA	Nationwide Corporation	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1580283				NWD Investments, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	80.000	Nationwide Mutual Insurance Company	
0140	Nationwide		90-0732898				NW-Dulles, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3267884				NW-Franklin Mills, LLC	OH	NIA	Life Reo Holdings, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-2647960				NW-Grapevine, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-2997049				NW-Howell Mill, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-4330384				NW-Hudnall, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-5408178				NW-Kentwood Towne Center, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-5314607				NW-Lovers Lane, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-2457568				NW-Montrose, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-4630497				NW-Mueller II, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		27-4749848				NW-Northridge, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-1089165				NW-Oakley Station, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-3888719				NW-Park 288, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-5388656				NW-Park Memorial, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		27-4749937				NW-Park Village, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-2469044				NW-Portales, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		26-1903919				NW-REI, LLC	DE	NIA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		45-5159117				NW-South Park, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		35-2427470				NW-Southline, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		27-4749587				NW-Taylor Farmer Jack, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-1100378				NW-Triangle, LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		46-1077615				NW-West Ave., LLC	OH	NIA	NW-REI, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-0947092				OCH Company, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-0947092				Ohio Center Hotel Company, Ltd.	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	56.250	Nationwide Mutual Insurance Company	
0140	Nationwide		26-0263012				Old Track Street Owners Association	OH	OTH	Other non-Nationwide	n/a		Other non-Nationwide	2
0140	Nationwide	13999	27-1712056	4286914			Olentangy Reinsurance, LLC	VT	IA	Nationwide Life and Annuity Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide						OYS Fund, LLC	DE	OTH	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide						Park 288 Industrial, LLC	TX	OTH	Nationwide Mutual Insurance Company	Investor member / no control	95.000	other non-Nationwide	2
0140	Nationwide		31-1486309				Perimeter A, Ltd	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1677602				Pizzuti Properties, LLC	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	65.000	Nationwide Mutual Insurance Company	
0140	Nationwide		31-1486309				Polaris A, Ltd.	OH	NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		39-1907217	4287201			Premier Agency, Inc.	IA	NIA	ALLIED Group, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	
4664	Pure	12873	20-8287105				Privilege Underwriters Reciprocal Exchange	FL	IA	Other non-Nationwide	n/a		Other non-Nationwide	2
0140	Pure			4288150			Privilege Underwriters, Inc.	FL	IA	Other non-Nationwide	n/a		Other non-Nationwide	2
4664	Pure	13204	26-3109178	4288226			Pure Insurance Company	FL	IA	Other non-Nationwide	n/a		Other non-Nationwide	2
4664	Pure			4288235			Pure Risk Management, LLC	FL	IA	Other non-Nationwide	n/a		Other non-Nationwide	2
4664	Nationwide		75-2938844	4287005			Registered Investment Advisors Services, Inc.	TX	NIA	Nationwide Financial Services, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide		82-0549218				Retention Alternatives, Ltd.	BMJ	IA	Nationwide Mutual Fire Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	
0140	Nationwide						Riverview Diversified Opportunities Fund, LLC	DE	OTH	Nationwide Mutual Insurance Company	Ownership		Nationwide Mutual Insurance Company	1
0140	Nationwide						Riverview Diversified Opportunities Fund, LLC	DE	OTH	Nationwide Mutual Fire Insurance Company	Ownership		Nationwide Mutual Insurance Company	1

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

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...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Riverview Diversified Opportunities Fund, LLC	..DE .....	..OTH.....	Nationwide Life Insurance Company .....	Ownership.....	.....	Nationwide Mutual Insurance Company .....	.....1 .....
...0140 ...	Nationwide .....	.....	22-3655264	4286530	.....	.....	Riverview International Group, Inc.	..DE .....	..NIA.....	NWD Investment Management, Inc. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Riverview Multi Series Fund, LL - Class Event	..DE .....	..OTH.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Riverview Multi Series Fund, LL - Class N	..DE .....	..OTH.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Riverview Polyphony Fund, LLC	..DE .....	..OTH.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..15580 .....	31-1117969	4288002	.....	.....	Scottsdale Indemnity Company	..OH .....	..IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..41297 .....	31-1024978	.....	.....	.....	Scottsdale Insurance Company	..OH .....	..IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Scottsdale Surplus Lines Insurance Company	.....	.....	.....	.....	.....	.....	.....
...0140 ...	Nationwide .....	..10672 .....	86-0835870	4287649	.....	.....	Streets of Toringdon, LLC	..AZ .....	..IA.....	Scottsdale Insurance Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	31-1486309	.....	.....	.....	The Hideaway Club	..CA .....	..OTH.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	91-2158214	.....	.....	.....	The Hideaway Owners Association	..CA .....	..OTH.....	Other non-Nationwide	n/a	.....	Other non-Nationwide	.....2 .....
...0140 ...	Nationwide .....	.....	86-1094799	.....	.....	.....	The Madison Club	..CA .....	..OTH.....	Other non-Nationwide	n/a	.....	Other non-Nationwide	.....2 .....
...0140 ...	Nationwide .....	.....	20-3541511	.....	.....	.....	The Madison Club Owners Association	..CA .....	..OTH.....	Other non-Nationwide	n/a	.....	Other non-Nationwide	.....2 .....
...0140 ...	Nationwide .....	.....	20-3541507	.....	.....	.....	The Waterfront Partners, LLC	..OH .....	..NIA.....	Other non-Nationwide	n/a	.....	Other non-Nationwide	.....2 .....
...0140 ...	Nationwide .....	.....	31-1610040	.....	.....	.....	THI Holdings (Delaware), Inc.	..DE .....	..NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	..50.000 .....	Nationwide Mutual Insurance Company .....	.....1 .....
...0140 ...	Nationwide .....	.....	52-2031677	.....	.....	.....	Titan Auto Insurance of New Mexico, Inc.	..NM .....	..IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	74-2825853	4287863	.....	.....	Titan Indemnity Company	..TX .....	..IA.....	Whitehall Holdings, Inc.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..13242 .....	74-2286759	4287797	.....	.....	Titan Insurance Company	..MI .....	..IA.....	THI Holdings (Delaware), Inc.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..36269 .....	86-0619597	4287845	.....	.....	Titan Insurance Services, Inc.	..TX .....	..NIA.....	Titan Indemnity Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	75-1284530	4287890	.....	.....	V.P.I. Services, Inc.	..CA .....	..NIA.....	Whitehall Holdings, Inc.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	33-0160222	.....	.....	.....	Veterinary Pet Insurance Company	..CA .....	..NIA.....	Veterinary Pet Insurance Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..42285 .....	95-3750113	4287685	.....	.....	Victoria Fire & Casualty Insurance	..CA .....	..IA.....	Scottsdale Insurance Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..10644 .....	34-1785903	4287911	.....	.....	Victoria Automobile Insurance Company	..OH .....	..IA.....	Victoria Fire & Casualty Insurance	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..42889 .....	34-1394913	4287827	.....	.....	Victoria Fire & Casualty Company	..OH .....	..IA.....	THI Holdings (Delaware), Inc.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Victoria National Insurance Company	..OH .....	..IA.....	Victoria Fire & Casualty Insurance	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..10778 .....	34-1842604	4287920	.....	.....	Victoria Select Insurance Company	..OH .....	..IA.....	Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	34-1777972	4287939	.....	.....	Victoria Specialty Insurance Company	..OH .....	..IA.....	Victoria Fire & Casualty Insurance	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..10777 .....	34-1842602	4287948	.....	.....	Western Heritage Insurance Company	..OH .....	..IA.....	Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	..37150 .....	86-0561941	4287667	.....	.....	Westport Capital Partners II	..AZ .....	..IA.....	Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	Whitehall Holdings, Inc.	.....	.....	Scottsdale Insurance Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	74-2767942	4287818	.....	.....	WI of Florida, Inc.	..CT .....	..OTH.....	Nationwide Mutual Insurance Company	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	59-3471667	4287872	.....	.....	Wilson Road Developers, LLC	..TX .....	..NIA.....	Nationwide Defined Benefit Master Trust	Investor member / no control	..71.000 .....	other non-Nationwide	.....2 .....
...0140 ...	Nationwide .....	.....	31-1486309	.....	.....	.....	Zais Zephyr A-4, LLC	..FL .....	..NIA.....	THI Holdings (Delaware), Inc.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	.....	..OH .....	..NIA.....	Whitehall Holdings, Inc.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	.....	..OH .....	..NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	..100.000 .....	Nationwide Mutual Insurance Company .....	.....
...0140 ...	Nationwide .....	.....	.....	.....	.....	.....	.....	..DE .....	..OTH.....	Nationwide Life Insurance Company	limited member / no control	..60.000 .....	other non-Nationwide	.....2 .....

Asterisk	Explanation
1 .....	For the purposes of this schedule, Nationwide presumed control of these entities because they are owned by at least 10% and are not wholly-owned by a Nationwide entity. ....
2 .....	Other ownership indicates a non-ownership circumstance by a Nationwide entity. ....



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	26-2451988	1492 Capital, LLC	(980,193)	23,583,996							22,603,803	
00000	42-0958655	Allied Group, Inc	67,000,000	(37,000,000)							30,000,000	
		Allied Holding (Delaware) Inc.		(103,247,901)							(103,247,901)	
10127	27-0114983	Allied Insurance Company Of America		2,000,000					*		2,000,000	
42579	42-1201931	Allied Prop & Cas Ins Co							*			945,609,309
19100	42-6054959	Amco Insurance Company	(72,500,000)					(301,150,768)	*		(373,650,768)	1,559,649,420
		BCCS Investment Fund LLC		514,480							514,480	
29262	74-1061659	Colonial County Mutual Insurance Co										192,190,291
18961	68-0066866	Crestbrook Insurance Company	(10,000,000)	400,000					*		(9,600,000)	3,561,831
42587	42-1207150	Depositors Insurance Company							*			635,331,478
		ELH Investment LLC		653,750							653,750	
13838	42-0618271	Farmland Mutual Insurance Company							*			(2,401,322)
22209	75-6013587	Freedom Specialty Insurance Company										103,145,408
23582	41-0417250	Harleysville Insurance Company	(2,500,000)						*		(2,500,000)	246,482,041
10674	23-2864924	Haleysville Insurance Company Of New York										
			(2,500,000)						*		(2,500,000)	331,292,132
00000	51-0241172	Harleysville Group Inc.	59,011,757	103,247,901							162,259,658	
42900	23-2253669	Harleysville Insurance Company Of New Jersey	(14,000,000)						*		(14,000,000)	294,437,636
14516	38-3198542	Harleysville Lake States Insurance Company		(5,500,000)					*		(5,500,000)	189,176,653
00000	23-2403000	Harleysville Limited	(1,175,667)						*		(1,175,667)	
40983	23-2612951	Harleysville Pennland Insurance Company	(15,374,634)	(381,001,741)					*		(396,376,375)	
35696	23-2384978	Harleysville Preferred Insurance Company	(14,918,045)						*		(14,918,045)	447,153,716
00000	51-0259283	Harleysville Services Inc.		(575,427)					*		(575,427)	
26182	04-1989660	Harleysville Worcester Insurance Company	(18,418,045)						*		(18,418,045)	546,451,763
	31-0871532	Insurance Intermediaries Inc	(10,000,000)								(10,000,000)	
		Leaguers Investment Fund LLC		932,400							932,400	
		Match School Investment Fund, LLC		750							750	
	20-5976272	Nationwide Alternative Investments, LLC	(52,760,044)	8,805,378							(43,954,666)	
11991	38-0865250	National Casualty Company										1,164,012,822
26093	48-0470690	Nationwide Affinity Insurance Company Of America							*			747,169,189
28223	42-1015537	Nationwide Agribusiness Insurance Company							*			876,266,904
												25,002,237
10723	95-0639970	Nationwide Assurance Company										
00000	11-3766032	Nationwide Better Health, Inc	(14,000,000)								(14,000,000)	
00000	31-4416546	Nationwide Corporation	(64,294,948)								(64,294,948)	
23760	31-4425763	Nationwide General Insurance Company							*			378,356,885
10070	31-1399201	Nationwide Indemnity Company	(70,000,000)								(70,000,000)	(460,143,592)
25453	95-2130882	Nationwide Insurance Company Of America						(169,177,223)			(169,177,223)	882,998,408
10948	31-1613686	Nationwide Insurance Company Of Florida										266,183
92657	31-1000740	Nationwide Life And Annuity Insurance Company	4,000,000	150,000,000							154,000,000	1,275,867,363

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
66869	31-4156830	Nationwide Life Insurance Company	5,375	(150,000,000)							(149,994,625)	(149,805,935)
	26-3427373	Nationwide Life Tax Credit Partners 2009-A, LLC		1,000							1,000	
	46-1971926	Nationwide Life Tax Credit Partners 2013-B, LLC		1,000							1,000	
42110	75-1780981	Nationwide Lloyds										47,058,583
		Nationwide Mutual Capital, LLC	(12,646)	225,900							213,254	
23779	31-4177110	Nationwide Mutual Fire Ins Company	5,338,238						*		5,338,238	(467,204,846)
23787	31-4177100	Nationwide Mutual Ins Company	624,604,811	171,971,724				807,410,051	*		1,603,986,586	(12,538,953,804)
	34-2012765	Nationwide Private Equity Fund, LLC	(303,764,246)	27,709,358							(276,054,888)	
37877	31-0970750	Nationwide Property And Casualty Ins Company						(337,082,060)	*		(337,082,060)	1,334,683,028
00000	31-1486309	Nationwide Realty Investors, Ltd		20,111,172							20,111,172	
	42-1373380	Nationwide Sales Solutions Inc		37,000,000							37,000,000	
	31-4177100	Nationwide Services Co, LLC	(15,646,624)								(15,646,624)	
	46-1952215	Nationwide Tax Credit Partners 2013-A, LLC		1,000							1,000	
	14-1892640	Nht Xii Tax Credit Fund, LLC		5,375							5,375	
		NNOV8 LLC		15,000,000							15,000,000	
	46-3309896	NTCP 2013-C, LLC		1,000							1,000	
	26-1903919	NW-Rei, LLC	(39,615,632)	74,158,885							34,543,253	
13999	27-1712056	Olentangy Reinsurance,LLC	(4,000,000)								(4,000,000)	(1,126,061,428)
		Oys Fund, LLC		35,500,000							35,500,000	
		Riverview Diversified Opportunities Fund, LLC	(287,329)								(287,329)	
		Riverview Multi Series Fund, LI - Class Event	(206,753)								(206,753)	
15580	31-1117969	Scottsdale Indemnity Company										389,401,228
41297	31-1024978	Scottsdale Insurance Company							*			1,267,120,553
10672	86-0835870	Scottsdale Surplus Lines Insurance Company										16,437,159
00000	52-2031677	THI Holdings Inc	(27,500,000)	23,500,000							(4,000,000)	
13242	74-2286759	Titan Indemnity Insurance Company		(17,500,000)							(17,500,000)	159,693,636
36269	86-0619597	Titan Insurance Company										32,860,866
10778	34-1842604	Victoria National Insurance Company							*			9,039
10644	34-1785903	Victoria Auto Insurance Company							*			36,090,392
42889	34-1394913	Victoria Fire & Casualty Insurance Company		(6,000,000)					*		(6,000,000)	187,192,045
10108	34-1777972	Victoria Select Insurance Company							*			70,344,331
10777	34-1842602	Victoria Specialty Insurance Company							*			41,444,764
42285	95-3750113	Veterinary Pet Ins Co		(3,500,000)							(3,500,000)	
	33-0160222	V.P.I Services,Inc.		3,500,000							3,500,000	
37150	86-0561941	Western Heritage Insurance Company										317,813,634

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
		Zais Zephyr A-4, LLC	(5,375)								(5,375)	
9999999	Control Totals								XXX			

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Responses
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? .....	YES
4. Will an actuarial opinion be filed by March 1? .....	YES
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1? .....	YES
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? .....	YES
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1? .....	YES
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
JUNE FILING	
9. Will an audited financial report be filed by June 1? .....	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES
AUGUST FILING	
11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? .....	YES

The following supplemental reports are required to be filed as part of your annual statement filing. 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	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile 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? .....	YES
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
34.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? .....	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? .....	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
37.	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
38.	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
39.	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

APRIL FILING

40.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	YES
41.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1? .....	YES
42.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
43.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	YES
44.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1? .....	YES
45.	Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1? .....	YES
46.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	YES
47.	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? .....	YES

AUGUST FILING

48.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES
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Explanations:

12.
14.
20.
22.
23.
27.
29.
30.
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36.
37.
38.
39.
42.

Bar Codes:	
12.	SIS Stockholder Information Supplement [Document Identifier 420]



14.	Trusted Surplus Statement [Document Identifier 490]
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20.	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
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22.	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
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23.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
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27.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
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29.	Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII [Document Identifier 436]
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30.	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII [Document Identifier 437]
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33.	Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]
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34.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]
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36.	Medicare Part D Coverage Supplement [Document Identifier 365]
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37.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
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38.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
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ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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



42. Credit Insurance Experience Exhibit [Document Identifier 230]



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

		Current Year			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
2504.	Prepaid pension costs .....	76,019,871	73,153,755	2,866,116	2,372,162
2597.	Summary of remaining write-ins for Line 25 from overflow page	76,019,871	73,153,755	2,866,116	2,372,162

Additional Write-ins for Liabilities Line 25

		1	2
		Current Year	Prior Year
2504.	Reserve for litigation and contingencies .....	36,673,440	22,213,113
2505.	Reserve for rate stabilizations .....	21,556,630	24,120,467
2597.	Summary of remaining write-ins for Line 25 from overflow page	58,230,070	46,333,580



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Alabama.....  
NAIC Group Code 0140..... NAIC Company Code 66869 .....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220 .....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12	13			16	17	
										Amount	Percent of Premiums Earned	Amount	Percent of Premiums Earned				
YES	1522	P	NO	0034000	08/12/1982		05/11/2001	03/01/1995	Medicare Supplement	4,993	659	13.2	1				
YES	2121AL	A	NO	0034000	06/08/1992	11/06/2002	05/11/2001	12/01/2002	Medicare Supplement								
YES	2122AL	B	NO	0034000	06/08/1992	11/06/2002	05/11/2001	12/01/2002	Medicare Supplement	6,211	905	14.6	2				
YES	2123AL	F	NO	0034000	06/08/1992	11/06/2002	05/11/2001	12/01/2002	Medicare Supplement	43,967	21,245	48.3	10				
YES	2129-1	C	NO	0034000	08/03/1999	11/06/2002	05/11/2001	12/01/2002	Medicare Supplement	4,007	806	20.1	1				
0199999. Total Experience on Individual Policies										59,179	23,615	39.9	14				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details  
.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....





SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Arkansas.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1  Compliance with OBRA	2  Policy Form Number	3  Standardized Medicare Supplement Benefit Plan	4  Medicare Select	5  Plan Characteristics	6  Date Approved	7  Date Approval Withdrawn	8  Date Last Amended	9  Date Closed	10  Policy Marketing Trade Name	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12  Amount	13  Percent of Premiums Earned			16  Amount	17  Percent of Premiums Earned	
YES.....	1522.....	P.....	NO.....	0034000.....	08/31/1982.....		04/30/2001.....	12/01/1989.....	Medicare Supplement.....	3,968.....	2,007.....	50.6.....	1.....				
0199999. Total Experience on Individual Policies										3,968	2,007	50.6	1				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: ,  
2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: ,  
3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Connecticut.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit.....  
Title..... Telephone Number.....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	2121CT94.....	A.....	NO.....	.0034060.....	.07/28/1992.....	.11/01/2002.....	.08/01/2001.....	.12/01/2001.....	Medicare Supplement.....	.70,542.....	.48,096.....	.68.2.....	.41.....	.....	.....	.....	.....
YES.....	2122CT94.....	B.....	NO.....	.0034060.....	.07/28/1992.....	.11/01/2002.....	.08/01/2001.....	.12/01/2001.....	Medicare Supplement.....	.124,504.....	.73,066.....	.58.7.....	.38.....	.....	.....	.....	.....
YES.....	2123CT94.....	F.....	NO.....	.0034000.....	.07/28/1992.....	.11/01/2002.....	.08/01/2001.....	.12/01/2001.....	Medicare Supplement.....	.255,189.....	.111,303.....	.43.6.....	.55.....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies.....										450,235.....	232,465.....	51.6.....	134.....	.....	.....	.....	.....

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Delaware.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1  Compliance with OBRA	2  Policy Form Number	3  Standardized Medicare Supplement Benefit Plan	4  Medicare Select	5  Plan Character- istics	6  Date Approved	7  Date Approval Withdrawn	8  Date Last Amended	9  Date Closed	10  Policy Marketing Trade Name	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12  Amount	13 Percent of Premiums Earned			16  Amount	17 Percent of Premiums Earned	
YES.....	1522.....	P.....	NO.....	0034000.....	09/13/1982.....		05/16/2001.....	01/01/1991.....	Medicare Supplement.....	7,306.....	10,267.....	140.5.....	2.....				
0199999. Total Experience on Individual Policies										7,306.....	10,267.....	140.5.....	2.....				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Florida.....  
NAIC Group Code 0140..... NAIC Company Code 66869 .....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220 .....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1524.....	P.....	NO.....	0034000.....	12/16/1982.....		05/10/2001.....	12/01/1991.....	Medicare Supplement.....	137,992.....	204,059.....	147.9.....	74.....						
YES.....	2121FL.....	A.....	NO.....	0034000.....	03/12/1992.....	12/03/2002.....	05/10/2001.....	12/01/2002.....	Medicare Supplement.....	16,176.....	12,714.....	78.6.....	11.....						
YES.....	2122FL.....	B.....	NO.....	0034000.....	03/12/1992.....	12/03/2002.....	05/10/2001.....	12/01/2002.....	Medicare Supplement.....	157,142.....	171,820.....	109.3.....	76.....						
YES.....	2123FL.....	F.....	NO.....	0034000.....	03/12/1992.....	12/03/2002.....	05/10/2001.....	12/01/2002.....	Medicare Supplement.....	1,007,330.....	777,941.....	77.2.....	388.....						
0199999. Total Experience on Individual Policies										1,318,639	1,166,534	88.5	549						

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address:

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address:

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Georgia.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	1522.....	P.....	NO.....	0034000.....	11/17/1982.....		05/31/2001.....	07/01/1989.....	Medicare Supplement.....	7,832.....	1,590.....	20.3.....	3.....				
YES.....	1924.....	P.....	NO.....	0034000.....	09/19/1989.....		05/31/2001.....	07/01/1992.....	Medicare Supplement.....	27,692.....	19,907.....	71.9.....	10.....				
YES.....	2121GA.....	A.....	NO.....	0034000.....	08/28/1992.....	11/01/2002.....	05/31/2001.....	12/01/2002.....	Medicare Supplement.....	1,598.....	261.....	16.4.....	1.....				
YES.....	2122GA.....	B.....	NO.....	0034000.....	08/28/1992.....	11/01/2002.....	05/31/2001.....	12/01/2002.....	Medicare Supplement.....	8,892.....	10,034.....	112.9.....	3.....				
YES.....	2123GA.....	F.....	NO.....	0034000.....	08/28/1992.....	11/01/2002.....	05/31/2001.....	12/01/2002.....	Medicare Supplement.....	310,622.....	156,909.....	50.5.....	90.....				
0199999. Total Experience on Individual Policies										356,635	188,702	52.9	107				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details  
.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Illinois.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1  Compliance with OBRA	2  Policy Form Number	3  Standardized Medicare Supplement Benefit Plan	4  Medicare Select	5  Plan Characteristics	6  Date Approved	7  Date Approval Withdrawn	8  Date Last Amended	9  Date Closed	10  Policy Marketing Trade Name	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12  Amount	13 Percent of Premiums Earned			16  Amount	17 Percent of Premiums Earned	
YES	1522	P	NO	0034000	11/20/1982		06/26/2001	12/01/1989	Medicare Supplement		(271)						
0199999. Total Experience on Individual Policies											(271)						

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address: ,

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address: ,

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Indiana.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1522.....	P.....	NO.....	0034000.....	09/21/1982.....		05/21/2001.....	12/01/1991.....	Medicare Supplement.....	33,743.....	10,427.....	30.9.....	9.....						
YES.....	2121IN.....	A.....	NO.....	0034000.....	01/09/1995.....	11/04/2002.....	05/21/2001.....	12/01/2002.....	Medicare Supplement.....	2,815.....	333.....	11.8.....	2.....						
YES.....	2122IN.....	B.....	NO.....	0034000.....	01/09/1995.....	11/04/2002.....	05/21/2001.....	12/01/2002.....	Medicare Supplement.....	5,819.....	4,241.....	72.9.....	2.....						
YES.....	2123IN.....	F.....	NO.....	0034000.....	01/09/1995.....	11/04/2002.....	05/21/2001.....	12/01/2002.....	Medicare Supplement.....	15,345.....	10,627.....	69.3.....	3.....						
0199999. Total Experience on Individual Policies										57,723	25,628	44.4	16						

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address:

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address:

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".

360.KY



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Kentucky.....  
NAIC Group Code 0140..... NAIC Company Code 66869 .....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220 .....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12	13			16	17	
										Amount	Percent of Premiums Earned	Amount	Percent of Premiums Earned				
YES	1522	P	NO	0034000	09/27/1982		05/14/2001	12/01/1991	Medicare Supplement	21,750	21,726	99.9	6				
YES	2121KY	A	NO	0034060	06/28/1994	11/04/2002	05/14/2001	12/01/2002	Medicare Supplement	1,962	156	7.9	1				
YES	2122KY	B	NO	0034060	06/28/1994	11/04/2002	05/14/2001	12/01/2002	Medicare Supplement	9,972	2,930	29.4	4				
YES	2123KY	F	NO	0034060	06/28/1994	11/04/2002	05/14/2001	12/01/2002	Medicare Supplement	47,178	26,387	55.9	13				
YES	2129-1	C	NO	0034060	09/27/1999	11/04/2002	05/14/2001	12/01/2002	Medicare Supplement								
0199999. Total Experience on Individual Policies										80,862	51,199	63.3	24				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....





SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Maryland.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	2121MD.....	A.....	NO.....	.0034000.....	08/27/1992.....	12/09/2002.....	01/25/2002.....	12/01/2002.....	Medicare Supplement.....	10,351.....	5,268.....	50.9.....	6.....	.....	.....	.....	.....
YES.....	2122MD.....	B.....	NO.....	.0034000.....	08/27/1992.....	12/09/2002.....	01/25/2002.....	12/01/2002.....	Medicare Supplement.....	60,738.....	37,779.....	62.2.....	31.....	.....	.....	.....	.....
YES.....	2123MD.....	F.....	NO.....	.0034000.....	08/27/1992.....	12/09/2002.....	01/25/2002.....	12/01/2002.....	Medicare Supplement.....	920,648.....	535,881.....	58.2.....	242.....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										991,737.....	578,927.....	58.4.....	279.....	.....	.....	.....	.....

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details  
.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Minnesota.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1  Compliance with OBRA	2  Policy Form Number	3  Standardized Medicare Supplement Benefit Plan	4  Medicare Select	5  Plan Characteristics	6  Date Approved	7  Date Approval Withdrawn	8  Date Last Amended	9  Date Closed	10  Policy Marketing Trade Name	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12  Amount	13 Percent of Premiums Earned			16  Amount	17 Percent of Premiums Earned	
YES.....	MS-1 0990.....	0.....	NO.....	0000007.....				12/31/1993.....	Medicare Supplement.....	20,888.....	19,336.....	92.6.....	7.....				
0199999. Total Experience on Individual Policies										20,888.....	19,336.....	92.6.....	7.....				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Mississippi.....  
NAIC Group Code 0140 ..... NAIC Company Code 66869 .....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220 .....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	1522 .....	P.....	NO.....	.0034000 .....	.08/24/1982 .....	.....	.04/27/2001 .....	.06/01/1992 .....	Medicare Supplement .....	31,396 .....	5,142 .....	16.4 .....	7 .....	.....	.....	.....	.....
YES.....	2122 .....	B.....	NO.....	.0034000 .....	.06/22/1992 .....	.11/18/2002 .....	.04/27/2001 .....	.12/01/2002 .....	Medicare Supplement .....	3,248 .....	15,542 .....	478.4 .....	1 .....	.....	.....	.....	.....
YES.....	2123 .....	F.....	NO.....	.0034000 .....	.06/22/1992 .....	.11/18/2002 .....	.04/27/2001 .....	.12/01/2002 .....	Medicare Supplement .....	89,369 .....	36,352 .....	40.7 .....	18 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										124,014	57,036	46.0	26				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address: ,

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address: ,

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF North Carolina.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	1522.....	P.....	NO.....	.0034000.....	.09/13/1982.....	.....	.04/24/2001.....	.12/01/1991.....	Medicare Supplement.....	162,694.....	117,642.....	72.3.....	54.....	.....	.....	.....	.....
YES.....	2121NC.....	A.....	NO.....	.0034000.....	.06/16/1992.....	.11/05/2002.....	.04/24/2001.....	.12/01/2002.....	Medicare Supplement.....	28,624.....	16,197.....	56.6.....	12.....	.....	.....	.....	.....
YES.....	2122NC.....	B.....	NO.....	.0034000.....	.06/16/1992.....	.11/05/2002.....	.04/24/2001.....	.12/01/2002.....	Medicare Supplement.....	34,923.....	17,078.....	48.9.....	11.....	.....	.....	.....	.....
YES.....	2123NC.....	F.....	NO.....	.0034000.....	.06/16/1992.....	.11/05/2002.....	.04/24/2001.....	.12/01/2002.....	Medicare Supplement.....	690,369.....	621,437.....	90.0.....	244.....	.....	.....	.....	.....
YES.....	2124NC.....	J.....	NO.....	.0034000.....	.06/16/1992.....	.11/05/2002.....	.04/24/2001.....	.12/01/2002.....	Medicare Supplement.....	40,205.....	11,814.....	29.4.....	7.....	.....	.....	.....	.....
YES.....	2129NC.....	C.....	NO.....	.0034060.....	.07/05/2000.....	.11/05/2002.....	.04/24/2001.....	.12/01/2002.....	Medicare Supplement.....	14,154.....	5,666.....	40.0.....	3.....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										970,969	789,834	81.3	331				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address: ,

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address: ,

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Ohio.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit.....  
Title..... Telephone Number.....

1  Compliance with OBRA	2  Policy Form Number	3  Standardized Medicare Supplement Benefit Plan	4  Medicare Select	5  Plan Character- istics	6  Date Approved	7  Date Approval Withdrawn	8  Date Last Amended	9  Date Closed	10  Policy Marketing Trade Name	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12  Amount	13  Percent of Premiums Earned			16  Amount	17  Percent of Premiums Earned	
YES.....	1522.....	P.....	NO.....	0034000.....	07/15/1982.....	11/01/2001.....	05/15/2001.....	04/01/1992.....	Medicare Supplement.....	251,822.....	115,319.....	45.8.....	68.....				
YES.....	2121.....	A.....	NO.....	0034000.....	03/20/1992.....	11/01/2001.....	05/15/2001.....	12/01/2002.....	Medicare Supplement.....	20,774.....	7,778.....	37.4.....	11.....				
YES.....	2122.....	B.....	NO.....	0034000.....	03/20/1992.....	11/01/2001.....	05/15/2001.....	12/01/2002.....	Medicare Supplement.....	200,924.....	159,077.....	79.2.....	85.....				
YES.....	2123.....	F.....	NO.....	0034000.....	03/20/1992.....	11/01/2001.....	05/15/2001.....	12/01/2002.....	Medicare Supplement.....	1,546,644.....	1,000,291.....	64.7.....	472.....				
0199999. Total Experience on Individual Policies										2,020,164	1,282,465	63.5	636				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address:

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address:

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Oregon.....  
NAIC Group Code 0140 ..... NAIC Company Code 66869 .....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220 .....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12	13			16	17	
											Amount	Percent of Premiums Earned			Amount	Percent of Premiums Earned	
YES	1522	P	NO	0034000	02/05/1986	11/01/2001	06/01/2001	01/01/1989	Medicare Supplement	16	(45)	(277.3)					
0199999. Total Experience on Individual Policies										16	(45)	(277.3)					

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Pennsylvania.....  
NAIC Group Code 0140..... NAIC Company Code 66869 .....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220 .....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11	Incurred Claims		14	15	Incurred Claims		18
										Premiums Earned	12	13	Number of Covered Lives	Premiums Earned	16	17	Number of Covered Lives
											Amount	Percent of Premiums Earned			Amount	Percent of Premiums Earned	
YES	1522	P	NO	0034000	11/30/1982		05/07/2001	08/01/1989	Medicare Supplement	81,686	57,549	70.5	21				
YES	1926	P	NO	0034000	08/03/1989		05/07/2001	07/01/1990	Medicare Supplement	98,675	97,115	98.4	27				
YES	2121PA	A	NO	0034060	09/04/1992	11/20/2002	05/07/2001	12/01/2002	Medicare Supplement	42,092	23,919	56.8	24				
YES	2122PA	B	NO	0034060	09/04/1992	11/20/2002	05/07/2001	12/01/2002	Medicare Supplement	186,611	106,334	57.0	77				
YES	2129	C	NO	0034060	09/04/1992	11/20/2002	05/07/2001	12/01/2002	Medicare Supplement	1,130,181	837,694	74.1	365				
0199999. Total Experience on Individual Policies										1,539,245	1,122,611	72.9	514				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details  
.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF South Carolina.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11  Premiums Earned	Incurred Claims		14  Number of Covered Lives	15  Premiums Earned	Incurred Claims		18  Number of Covered Lives
											12	13			16	17	
										Amount	Percent of Premiums Earned	Amount	Percent of Premiums Earned				
YES	1522	A	NO	0034000	10/06/1982		04/24/2001	04/01/1992	Medicare Supplement	73,866	48,142	65.2	25				
YES	2121SC	B	NO	0034000	02/05/1993	11/05/2002	04/24/2001	12/01/2002	Medicare Supplement		(231)						
YES	2122SC	F	NO	0034000	02/05/1993	11/05/2002	04/24/2001	12/01/2002	Medicare Supplement	16,928	4,688	27.7	7				
YES	2123SC	C	NO	0034000	02/05/1993	11/05/2002	04/24/2001	12/01/2002	Medicare Supplement	220,185	118,597	53.9	63				
YES	2129SC	P	NO	0034000	07/24/2000	11/05/2002	04/24/2001	12/01/2002	Medicare Supplement								
0199999. Total Experience on Individual Policies										310,979	171,197	55.1	95				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details  
.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....





SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Tennessee.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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																		Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
YES.....	1522.....	P.....	NO.....	0034000.....	09/01/1982.....	.....	05/31/2001.....	06/01/1992.....	Medicare Supplement.....	29,852.....	6,512.....	21.8.....	8.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address:

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address:

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Texas.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit .....  
Title ..... Telephone Number .....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11 Premiums Earned	Incurred Claims		14 Number of Covered Lives	15 Premiums Earned	Incurred Claims		18 Number of Covered Lives
											12	13			16	17	
										Amount	Percent of Premiums Earned	Amount	Percent of Premiums Earned				
YES.....	2121TX.....	A.....	NO.....	0034060	06/02/1994	11/13/2002	06/15/2001	12/01/2002	Medicare Supplement	10,820	3,322	30.7	4				
YES.....	2123TX.....	F.....	NO.....	0034000	06/02/1994	11/13/2002	06/15/2001	12/01/2002	Medicare Supplement	52,697	43,374	82.3	9				
0199999. Total Experience on Individual Policies										63,517	46,696	73.5	13				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address:

2.2 Contact Person and Phone Number:
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address:

3.2 Contact Person and Phone Number:
4. Explain any policies identified above as policy type "O".



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF Virginia.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit.....  
Title..... Telephone Number.....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	11	Incurred Claims		14	15	Incurred Claims		18
										Premiums Earned	12	13	Number of Covered Lives	Premiums Earned	16	17	Number of Covered Lives
											Amount	Percent of Premiums Earned			Amount	Percent of Premiums Earned	
YES	1522	P	NO	0034000	09/27/1982		05/11/2001	02/01/1989	Medicare Supplement	35,039	14,335	40.9	10				
YES	1925	P	NO	0034000	02/02/1989		05/11/2001	07/01/1992	Medicare Supplement	78,078	31,411	40.2	21				
YES	2121VA	A	NO	0034000	07/30/1992	11/21/2002	05/11/2001	12/01/2002	Medicare Supplement	6,518	5,114	78.5	4				
YES	2122VA	B	NO	0034000	07/30/1992	11/21/2002	05/11/2001	12/01/2002	Medicare Supplement	57,130	40,169	70.3	29				
YES	2123VA	F	NO	0034000	07/30/1992	11/21/2002	05/11/2001	12/01/2002	Medicare Supplement	765,931	624,072	81.5	222				
0199999. Total Experience on Individual Policies										942,696	715,101	75.9	286				

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details  
.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

FOR THE STATE OF West Virginia.....  
NAIC Group Code 0140..... NAIC Company Code 66869.....  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220.....  
Person Completing This Exhibit.....  
Title..... Telephone Number.....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 2010				Policies Issued in 2011; 2012; 2013			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives
YES.....	1523.....	P.....	NO.....	0034000.....	09/22/1982.....	.....	05/30/2001.....	12/01/1991.....	Medicare Supplement.....	138,636.....	65,446.....	47.2.....	37.....	.....	.....	.....	.....
YES.....	2121WV.....	A.....	NO.....	0034000.....	02/27/1992.....	11/07/2002.....	05/30/2001.....	12/01/2002.....	Medicare Supplement.....	3,065.....	306.....	10.0.....	1.....	.....	.....	.....	.....
YES.....	2122WV.....	B.....	NO.....	0034000.....	02/27/1992.....	11/07/2002.....	05/30/2001.....	12/01/2002.....	Medicare Supplement.....	42,797.....	19,341.....	45.2.....	17.....	.....	.....	.....	.....
YES.....	2123WV.....	F.....	NO.....	0034000.....	02/27/1992.....	11/07/2002.....	05/30/2001.....	12/01/2002.....	Medicare Supplement.....	514,426.....	256,980.....	50.0.....	131.....	.....	.....	.....	.....
YES.....	2129WV.....	C.....	NO.....	0034000.....	08/02/1999.....	11/07/2002.....	05/30/2001.....	12/01/2002.....	Medicare Supplement.....	268.....	1,544.....	576.9.....	.....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										699,191	343,616	49.1	186	.....	.....	.....	.....

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.  
2.1 Address: , .....  
2.2 Contact Person and Phone Number: .....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).  
3.1 Address: , .....  
3.2 Contact Person and Phone Number: .....
4. Explain any policies identified above as policy type "O". .....



SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE O SUPPLEMENT**

For The Year Ended December 31, 2013  
(To Be Filed by March 1)

Of The Nationwide Life Insurance Company  
ADDRESS (City, State and Zip Code) Columbus , OH 43215-2220  
NAIC Group Code 0140 NAIC Company Code 66869 Employer's Identification Number (FEIN) 31-4156830

**SUPPLEMENTAL SCHEDULE O - PART 1**

**Development of Incurred Losses**  
**(\$000 OMITTED)**

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred		Net Amount Paid Policyholders				
		1 2009	2 2010	3 2011	4 2012	5 2013(a)
1.	Prior	748	53	17	(24)	135
2.	2009	586	422	30	14	3
3.	2010	XXX	371	435	38	8
4.	2011	XXX	XXX	223	236	25
5.	2012	XXX	XXX	XXX	205	205
6.	2013	XXX	XXX	XXX	XXX	270

**Section B - Other Accident and Health**

1.	Prior	239	213	142	137	93
2.	2009	53	69	18	15	14
3.	2010	XXX	69	51	16	14
4.	2011	XXX	XXX	50	70	15
5.	2012	XXX	XXX	XXX	65	57
6.	2013	XXX	XXX	XXX	XXX	54

**Section C - Credit Accident and Health**

1.	Prior					
2.	2009					
3.	2010	XXX				
4.	2011	XXX	XX			
5.	2012	XXX	XXX	XXX		
6.	2013	XXX	XXX	XXX	XXX	

**Section D -**

1.	Prior					
2.	2009					
3.	2010	XXX				
4.	2011	XXX	XX			
5.	2012	XXX	XXX	XXX		
6.	2013	XXX	XXX	XXX	XXX	

**Section E -**

1.	Prior					
2.	2009					
3.	2010	XXX				
4.	2011	XXX	XX			
5.	2012	XXX	XXX	XXX		
6.	2013	XXX	XXX	XXX	XXX	

**Section F -**

1.	Prior					
2.	2009					
3.	2010	XXX				
4.	2011	XXX	XX			
5.	2012	XXX	XXX	XXX		
6.	2013	XXX	XXX	XXX	XXX	

**Section G -**

1.	Prior					
2.	2009					
3.	2010	XXX				
4.	2011	XXX	XX			
5.	2012	XXX	XXX	XXX		
6.	2013	XXX	XXX	XXX	XXX	

(a) See paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

Supplement Schedule O - Part 2 Section A  
**N O N E**

Supplement Schedule O - Part 2 Section B  
**N O N E**

Supplement Schedule O - Part 2 Section C  
**N O N E**

Supplement Schedule O - Part 2 Section D  
**N O N E**

Supplement Schedule O - Part 2 Section E  
**N O N E**

Supplement Schedule O - Part 2 Section F  
**N O N E**

Supplement Schedule O - Part 2 Section G  
**N O N E**

SUPPLEMENT FOR THE YEAR 2013 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses  
(\$000 OMITTED)

Section A - Group Accident and Health

Years in Which Losses Were Incurred		Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
		1 2009	2 2010	3 2011	4 2012	5 2013
1.	2009 .....	1,368	736	32	XXX	XXX
2.	2010 .....	XXX	1,151	647	38	XXX
3.	2011 .....	XXX	XXX	998	460	27
4.	2012 .....	XXX	XXX	XXX	1,038	496
5.	2013 .....	XXX	XXX	XXX	XXX	1,092

Section B - Other Accident and Health

1.	2009 .....	286	193	133	XXX	XXX
2.	2010 .....	XXX	302	179	126	XXX
3.	2011 .....	XXX	XXX	287	225	122
4.	2012 .....	XXX	XXX	XXX	264	209
5.	2013 .....	XXX	XXX	XXX	XXX	251

Section C - Credit Accident and Health

1.	2009 .....				XXX	XXX
2.	2010 .....	XXX				XXX
3.	2011 .....	XXX	XXX			
4.	2012 .....	XXX	XXX	XXX		
5.	2013 .....	XXX	XXX	XXX	XXX	

NONE

Section D -

1.	2009 .....				XXX	XXX
2.	2010 .....	XXX				XXX
3.	2011 .....	XXX	XXX			
4.	2012 .....	XXX	XXX	XXX		
5.	2013 .....	XXX	XXX	XXX	XXX	

NONE

Section E -

1.	2009 .....				XXX	XXX
2.	2010 .....	XXX				XXX
3.	2011 .....	XXX	XXX			
4.	2012 .....	XXX	XXX	XXX		
5.	2013 .....	XXX	XXX	XXX	XXX	

NONE

Section F -

1.	2009 .....				XXX	XXX
2.	2010 .....	XXX				XXX
3.	2011 .....	XXX	XXX			
4.	2012 .....	XXX	XXX	XXX		
5.	2013 .....	XXX	XXX	XXX	XXX	

NONE

Section G -

1.	2009 .....				XXX	XXX
2.	2010 .....	XXX				XXX
3.	2011 .....	XXX	XXX			
4.	2012 .....	XXX	XXX	XXX		
5.	2013 .....	XXX	XXX	XXX	XXX	

NONE

SCHEDULE O SUPPLEMENT  
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses  
(\$000 OMITTED)

Section A - Group Accident and Health

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. 2009 .....	1,368	736	32	14	3
2. 2010 .....	XXX	1,151	647	38	9
3. 2011 .....	XXX	XXX	998	460	27
4. 2012 .....	XXX	XXX	XXX	1,038	496
5. 2013	XXX	XXX	XXX	XXX	1,092

Section B - Other Accident and Health

1. 2009 .....	286	193	133	125	121
2. 2010 .....	XXX	302	179	126	121
3. 2011 .....	XXX	XXX	287	225	122
4. 2012 .....	XXX	XXX	XXX	264	209
5. 2013	XXX	XXX	XXX	XXX	251

Section C - Credit Accident and Health

1. 2009 .....					
2. 2010 .....	XXX				
3. 2011 .....	XXX				
4. 2012 .....	XXX	XXX	XXX		
5. 2013	XXX	XXX	XXX	XXX	

Section D -

1. 2009 .....					
2. 2010 .....	XXX				
3. 2011 .....	XXX				
4. 2012 .....	XXX	XXX	XXX		
5. 2013	XXX	XXX	XXX	XXX	

Section E -

1. 2009 .....					
2. 2010 .....	XXX				
3. 2011 .....	XXX				
4. 2012 .....	XXX	XXX	XXX		
5. 2013	XXX	XXX	XXX	XXX	

Section F -

1. 2009 .....					
2. 2010 .....	XXX				
3. 2011 .....	XXX				
4. 2012 .....	XXX	XXX	XXX		
5. 2013	XXX	XXX	XXX	XXX	

Section G -

1. 2009 .....					
2. 2010 .....	XXX				
3. 2011 .....	XXX				
4. 2012 .....	XXX	XXX	XXX		
5. 2013	XXX	XXX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business		1 Methodology	2 Amount
1. Industrial Life .....			
2. Ordinary Life .....	Other .....		40,477
3. Individual Annuity .....			
4. Supplementary Contracts .....			
5. Credit Life .....			
6. Group Life .....	Other .....		6,371
7. Group Annuities .....	Other .....		28
8. Group Accident and Health .....	Standard Factor & Development .....		36,483
9. Credit Accident and Health .....			
10. Other Accident and Health .....	Standard Factor & Development .....		1,397
11. Total			84,756



ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year .....	7
Analysis of Operations By Lines of Business .....	6
Asset Valuation Reserve Default Component .....	30
Asset Valuation Reserve Equity .....	32
Asset Valuation Reserve Replications (Synthetic) Assets .....	35
Asset Valuation Reserve .....	29
Assets .....	2
Cash Flow .....	5
Exhibit 1 - Part 1 - Premiums and Annuity Considerations for Life and Accident and Health Contracts .....	9
Exhibit 1 - Part 2 - Dividends and Coupons Applied, Reinsurance Commissions and Expense .....	10
Exhibit 2 - General Expenses .....	11
Exhibit 3 - Taxes, Licenses and Fees (Excluding Federal Income Taxes) .....	11
Exhibit 4 - Dividends or Refunds .....	11
Exhibit 5 - Aggregate Reserve for Life Contracts .....	12
Exhibit 5 - Interrogatories .....	13
Exhibit 5A - Changes in Bases of Valuation During The Year .....	13
Exhibit 6 - Aggregate Reserves for Accident and Health Contracts .....	14
Exhibit 7 - Deposit-Type Contracts .....	15
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 1 .....	16
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 2 .....	17
Exhibit of Capital Gains (Losses) .....	8
Exhibit of Life Insurance .....	25
Exhibit of Net Investment Income .....	8
Exhibit of Nonadmitted Assets .....	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values .....	27
Five-Year Historical Data .....	22
Form for Calculating the Interest Maintenance Reserve (IMR) .....	28
General Interrogatories .....	20
Jurat Page .....	1
Liabilities, Surplus and Other Funds .....	3
Life Insurance (State Page) .....	24
Notes To Financial Statements .....	19
Overflow Page For Write-ins .....	55
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

ANNUAL STATEMENT BLANK (Continued)

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 - Verification .....	SI14
Schedule DL - Part 1 .....	E24
Schedule DL - Part 2 .....	E25
Schedule E - Part 1 - Cash .....	E26
Schedule E - Part 2 - Cash Equivalents .....	E27
Schedule E - Part 3 - Special Deposits .....	E28
Schedule E - Verification Between Years .....	SI15
Schedule F .....	36
Schedule H - Accident and Health Exhibit - Part 1 .....	37
Schedule H - Part 2, Part 3 and Part 4 .....	38
Schedule H - Part 5 - Health Claims .....	39
Schedule S - Part 1 - Section 1 .....	40
Schedule S - Part 1 - Section 2 .....	41
Schedule S - Part 2 .....	42
Schedule S - Part 3 - Section 1 .....	43
Schedule S - Part 3 - Section 2 .....	44
Schedule S - Part 4 .....	45
Schedule S - Part 5 .....	46
Schedule S - Part 6.....	47
Schedule S - Part 7.....	48
Schedule T - Part 2 Interstate Compact .....	50
Schedule T - Premiums and Annuity Considerations .....	49
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group .....	51
Schedule Y - Part 1A - Detail of Insurance Holding Company System .....	52
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates .....	53
Summary Investment Schedule .....	SI01
Summary of Operations .....	4
Supplemental Exhibits and Schedules Interrogatories .....	54