



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

ANNUAL STATEMENT  
FOR THE YEAR ENDED DECEMBER 31, 2022  
OF THE CONDITION AND AFFAIRS OF THE  
NATIONWIDE LIFE INSURANCE COMPANY

NAIC Group Code 0140 0140 NAIC Company Code 66869 Employer's ID Number 31-4156830  
(Current) (Prior)  
Organized under the Laws of OHIO, State of Domicile or Port of Entry OH  
Country of Domicile United States of America  
Licensed as business type: Life, Accident and Health [ X ] Fraternal Benefit Societies [ ]  
Incorporated/Organized 03/21/1929 Commenced Business 01/10/1931  
Statutory Home Office ONE WEST NATIONWIDE BLVD. COLUMBUS, OH, US 43215-2220  
(Street and Number) (City or Town, State, Country and Zip Code)  
Main Administrative Office ONE WEST NATIONWIDE BLVD.  
(Street and Number)  
COLUMBUS, OH, US 43215-2220 614-249-1545  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)  
Mail Address ONE WEST NATIONWIDE BLVD., 1-14-301 COLUMBUS, OH, US 43215-2220  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)  
Primary Location of Books and Records ONE WEST NATIONWIDE BLVD., 1-14-301  
(Street and Number)  
COLUMBUS, OH, US 43215-2220 614-249-1545  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)  
Internet Website Address WWW.NATIONWIDE.COM  
Statutory Statement Contact ANDREA D. IACOBONI 614-249-1545  
(Name) (Area Code) (Telephone Number)  
FINRPT@NATIONWIDE.COM 866-315-1430  
(E-mail Address) (FAX Number)

OFFICERS  
PRESIDENT & COO JOHN LAUGHLIN CARTER SVP & TREASURER DAVID PATRICK LAPAUL  
SVP & SECRETARY DENISE LYNN SKINGLE  
OTHER  
PAMELA ANN BIESECKER, SVP-HEAD OF TAXATION VINITA JANE CLEMENTS #, EVP-CHIEF HRO JAMES ROBERT FOWLER, EVP-CHIEF TECH OFFC  
TIMOTHY GERARD FROMMEYER, EVP MARK SHANNON HOWARD #, EVP-CLO RAMON JONES #, EVP-CMO  
MICHAEL WILLIAM MAHAFFEY #, EVP-CHIEF STRAT AMY TAYLOR SHORE #, EVP-CHIEF CUSTOMER  
OFFC OFFC  
DIRECTORS OR TRUSTEES  
JOHN LAUGHLIN CARTER TIMOTHY GERARD FROMMEYER STEVEN ANDREW GINNAN  
ERIC SHAWN HENDERSON HOLLY RENEE SNYDER KIRT ALAN WALKER

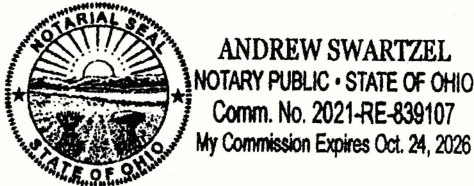
State of OHIO SS  
County of FRANKLIN

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.

John Laughlin Carter Denise Lynn Skingle David Patrick Lapaul  
JOHN LAUGHLIN CARTER DENISE LYNN SKINGLE DAVID PATRICK LAPAUL  
PRESIDENT & COO SVP & SECRETARY SVP & TREASURER

Subscribed and sworn to before me this 13<sup>th</sup> day of February 2023  
Andrew Swartzel

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





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2022

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 .....	6,813,779		5,749,274		12,563,053
2. Annuity considerations .....	76,391,179		75,953,232		152,344,412
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	83,204,958		81,702,506		164,907,465
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	47,271				47,271
6.2 Applied to pay renewal premiums .....	41,493				41,493
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	114,683				114,683
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	203,447				203,447
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) .....	203,447				203,447
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,893,043		639,941		7,532,985
10. Matured endowments .....					
11. Annuity benefits .....	16,272,915		11,813,794		28,086,709
12. Surrender values and withdrawals for life contracts ..	60,101,587		105,848,258		165,949,845
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	108,696				108,696
15. Totals .....	83,376,242		118,301,994		201,678,235
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	14	674,864							14	674,864
17. Incurred during current year Settled during current year:	66	6,883,109				610,045			66	7,493,155
18.1 By payment in full .....	73	7,252,517				610,045			73	7,862,562
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	73	7,252,517				610,045			73	7,862,562
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	73	7,252,517				610,045			73	7,862,562
19. Unpaid Dec. 31, current year (16+17-18.6) .....	7	305,456							7	305,456
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	4,850	704,925,907	(a)		12	27,478,372			4,862	732,404,279
21. Issued during year .....	1	500,000			556	15,465,359			557	15,965,359
22. Other changes to in force (Net) .....	(345)	(87,423,003)			(550)	(8,378,830)			(895)	(95,801,833)
23. In force December 31 of current year .....	4,506	618,002,904	(a)		18	34,564,901			4,524	652,567,805

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	7,873,709	7,875,652		4,661,678	4,406,828
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	21,981	21,981		13,565	13,565
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) .....	21,981	21,981		13,565	13,565
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,895,690	7,897,634		4,675,243	4,420,393

(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 1,557



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2022

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 .....	191,994		7,581		199,575
2. Annuity considerations .....	8,266,041		1,997,956		10,263,997
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	8,458,035		2,005,536		10,463,571
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	3,806				3,806
6.2 Applied to pay renewal premiums .....	3,053				3,053
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	7,610				7,610
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	14,469				14,469
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) .....	14,469				14,469
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	236,267		57		236,324
10. Matured endowments .....					
11. Annuity benefits .....	2,756,905		406,977		3,163,882
12. Surrender values and withdrawals for life contracts ..	19,184,272		2,598,434		21,782,706
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	2				2
15. Totals .....	22,177,447		3,005,468		25,182,915
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	1								1	
17. Incurred during current year .....	8	236,267							8	236,267
Settled during current year:										
18.1 By payment in full .....	9	236,267							9	236,267
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	9	236,267							9	236,267
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	9	236,267							9	236,267
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	283	61,419,970	(a)		1	715,427			284	62,135,397
21. Issued during year .....	2	1,000,000			85	1,770,000			87	2,770,000
22. Other changes to in force (Net) .....	(36)	(31,876,106)			(84)	274,574			(120)	(31,601,532)
23. In force December 31 of current year .....	249	30,543,864	(a)		2	2,760,001			251	33,303,865

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	168,384	169,537		1,423,343	810,575
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	168,384	169,537		1,423,343	810,575

(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 134



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2022

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 .....	12,141,496		25,574,587		37,716,083
2. Annuity considerations .....	131,260,516		422,711,850		553,972,365
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	143,402,012		448,286,437		591,688,448
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	102,458				102,458
6.2 Applied to pay renewal premiums .....	112,140				112,140
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	107,569				107,569
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	322,167				322,167
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) .....	322,167				322,167
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	5,279,084		98,763		5,377,847
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	30,581,930		14,548,319		45,130,249
12. Surrender values and withdrawals for life contracts ..	145,731,628		360,523,079		506,254,707
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	25,873				25,873
15. Totals .....	181,619,515		375,170,161		556,789,676
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	10	137,348							10	137,348
17. Incurred during current year .....	91	5,140,404				66,337			91	5,206,741
Settled during current year:										
18.1 By payment in full .....	91	4,358,256				66,337			91	4,424,593
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	91	4,358,256				66,337			91	4,424,593
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	91	4,358,256				66,337			91	4,424,593
19. Unpaid Dec. 31, current year (16+17-18.6) .....	10	919,496							10	919,496
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	3,724	986,988,601	(a)		1,012	1,808,248,249			4,736	2,795,236,850
21. Issued during year .....	20	25,136,455			2,284	90,930,444			2,304	116,066,899
22. Other changes to in force (Net) .....	(195)	(91,075,866)			(2,209)	(532,261,286)			(2,404)	(623,337,152)
23. In force December 31 of current year .....	3,549	921,049,190	(a)		1,087	1,366,917,407			4,636	2,287,966,597

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	7,772,107	7,842,065		6,649,193	4,648,171
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	281	281			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	923	923			
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) .....	923	923			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	7,773,310	7,843,268		6,649,193	4,648,171

(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 2,447



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	2,305,070		2,197,011		4,502,081
2. Annuity considerations .....	24,465,542		22,799,910		47,265,452
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	26,770,612		24,996,921		51,767,533
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	23,917				23,917
6.2 Applied to pay renewal premiums .....	8,553				8,553
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	50,830				50,830
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	83,299				83,299
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) .....	83,299				83,299
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,797,324		8,714		1,806,037
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	7,446,806		3,390,351		10,837,157
12. Surrender values and withdrawals for life contracts ..	28,556,207		47,432,736		75,988,943
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	23,824				23,824
15. Totals .....	37,825,161		50,831,800		88,656,962
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	4	40,611				(1)			4	40,610
17. Incurred during current year Settled during current year:	33	1,781,615				8,621			33	1,790,236
18.1 By payment in full .....	37	1,822,227				8,621			37	1,830,848
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	37	1,822,227				8,621			37	1,830,848
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	37	1,822,227				8,621			37	1,830,848
19. Unpaid Dec. 31, current year (16+17-18.6) .....		(1)				(1)				(2)
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,867	263,031,706	(a)		104	80,686,644			1,971	343,718,350
21. Issued during year .....					341	10,366,134			341	10,366,134
22. Other changes to in force (Net) .....	(130)	(16,574,763)			(340)	436,751,497			(470)	420,176,734
23. In force December 31 of current year .....	1,737	246,456,943	(a)		105	527,804,275			1,842	774,261,218

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,778,664	2,741,411		2,127,002	2,285,830
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	(4,742)	(4,742)		1,800	1,800
25.3 Non-renewable for stated reasons only (b) .....	1,672	1,672		97,250	97,250
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	(3,070)	(3,070)		99,051	99,051
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,775,594	2,738,341		2,226,053	2,384,881

(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 470



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2022

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 .....	31,659,148		159,112,404		190,771,552
2. Annuity considerations .....	459,326,870		830,145,416		1,289,472,286
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	490,986,018		989,257,820		1,480,243,839
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	540,942				540,942
6.2 Applied to pay renewal premiums .....	692,844				692,844
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	957,515				957,515
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,191,301				2,191,301
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) .....	2,191,301				2,191,301
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	45,664,792		11,589,560		57,254,352
10. Matured endowments .....	4,024				4,024
11. Annuity benefits .....	120,394,242		52,905,918		173,300,160
12. Surrender values and withdrawals for life contracts ..	600,232,543		1,702,774,568		2,303,007,111
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	90,934				90,934
15. Totals .....	766,386,535		1,767,270,046		2,533,656,581
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	55	5,439,207			(2)	1,051,430			53	6,490,637
17. Incurred during current year .....	229	45,633,946			18	11,207,058			247	56,841,004
Settled during current year:										
18.1 By payment in full .....	269	47,270,682			20	11,985,242			289	59,255,924
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	269	47,270,682			20	11,985,242			289	59,255,924
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	269	47,270,682			20	11,985,242			289	59,255,924
19. Unpaid Dec. 31, current year (16+17-18.6) .....	15	3,802,471			(4)	273,246			11	4,075,716
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	15,951	5,310,912,377	(a)		3,383	3,826,234,178			19,334	9,137,146,555
21. Issued during year .....	71	26,661,025			7,591	321,712,312			7,662	348,373,337
22. Other changes to in force (Net) .....	(960)	(463,732,960)			(7,725)	(717,504,896)			(8,685)	(1,181,237,856)
23. In force December 31 of current year .....	15,062	4,873,840,442	(a)		3,249	3,430,441,594			18,311	8,304,282,036

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	22,668,373	22,783,227		18,131,826	18,069,391
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	(302)	(302)		2,250	2,250
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	8,009	8,009		9,946	9,946
25.3 Non-renewable for stated reasons only (b) .....	1,451	1,451			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,460	9,460		9,946	9,946
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	22,677,530	22,792,384		18,144,023	18,081,587

(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 5,344



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2022

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 .....	8,078,774		31,927,689		40,006,464
2. Annuity considerations .....	115,441,648		121,050,338		236,491,986
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	123,520,422		152,978,028		276,498,450
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	73,126				73,126
6.2 Applied to pay renewal premiums .....	81,106				81,106
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	109,385				109,385
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	263,617				263,617
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) .....	263,617				263,617
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,537,560		447,516		4,985,075
10. Matured endowments .....	1,869				1,869
11. Annuity benefits .....	26,407,088		12,740,262		39,147,350
12. Surrender values and withdrawals for life contracts ..	84,752,843		97,568,797		182,321,640
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	2,876				2,876
15. Totals .....	115,702,235		110,756,575		226,458,810
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	4	260,076			6				10	260,076
17. Incurred during current year Settled during current year:	71	4,537,560			4	437,157			75	4,974,717
18.1 By payment in full .....	72	4,681,350			4	55,343			76	4,736,694
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	72	4,681,350			4	55,343			76	4,736,694
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	72	4,681,350			4	55,343			76	4,736,694
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	116,285			6	381,814			9	498,099
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	3,400	687,859,828	(a)		625	803,860,385			4,025	1,491,720,213
21. Issued during year .....	2	500,000			1,496	69,630,022			1,498	70,130,022
22. Other changes to in force (Net) .....	(165)	(43,474,620)			(1,435)	(65,191,343)			(1,600)	(108,665,964)
23. In force December 31 of current year .....	3,237	644,885,208	(a)		686	808,299,064			3,923	1,453,184,271

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	10,113,627	10,214,279		9,164,474	8,440,781
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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	9
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	9
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	10,113,627	10,214,279		9,164,484	8,440,791

(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 740



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2022

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 .....	5,238,125		54,650,988		59,889,113
2. Annuity considerations .....	173,835,508		98,492,312		272,327,820
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	179,073,633		153,143,301		332,216,933
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	131,683				131,683
6.2 Applied to pay renewal premiums .....	137,481				137,481
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	214,630				214,630
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	483,793				483,793
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) .....	483,793				483,793
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,805,520		22,246		3,827,766
10. Matured endowments .....					
11. Annuity benefits .....	32,282,081		5,039,761		37,321,842
12. Surrender values and withdrawals for life contracts ..	114,739,932		101,981,853		216,721,785
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	28,657				28,657
15. Totals .....	150,856,189		107,043,861		257,900,050
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	17	317,425			1	1,000			18	318,425
17. Incurred during current year .....	119	3,800,520				23,880			119	3,824,400
Settled during current year:										
18.1 By payment in full .....	125	3,825,181			1	24,880			126	3,850,061
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	125	3,825,181			1	24,880			126	3,850,061
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	125	3,825,181			1	24,880			126	3,850,061
19. Unpaid Dec. 31, current year (16+17-18.6) .....	11	292,764							11	292,764
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	7,171	838,988,192	(a)		11	33,986,304			7,182	872,974,496
21. Issued during year .....	5	6,500,000			145	10,427,309			150	16,927,309
22. Other changes to in force (Net) .....	(441)	(58,426,643)			(147)	(4,108,228)			(588)	(62,534,871)
23. In force December 31 of current year .....	6,735	787,061,549	(a)		9	40,305,385			6,744	827,366,934

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	13,528,594	13,550,919		7,696,306	7,993,306
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	79,103	79,103		76,625	76,625
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) .....	79,103	79,103		76,625	76,625
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	13,607,697	13,630,022		7,772,931	8,069,931

(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 285





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	10,628,243		496,946,415		507,574,659
2. Annuity considerations .....	21,247,175		11,583,559		32,830,734
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	31,875,418		508,529,974		540,405,392
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	122,907		16		122,923
6.2 Applied to pay renewal premiums .....	102,551				102,551
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	322,997				322,997
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	548,455		16		548,471
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) .....	548,455		16		548,471
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	16,936,849		121,707,604		138,644,454
10. Matured endowments .....	15,847				15,847
11. Annuity benefits .....	10,172,099		835,797		11,007,896
12. Surrender values and withdrawals for life contracts ..	33,628,265		30,446,004		64,074,268
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	23,472				23,472
15. Totals .....	60,776,532		152,989,406		213,765,938
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	23	(69,519)			(20)	1,727,294			3	1,657,775
17. Incurred during current year .....	154	16,936,849			1	121,714,477			155	138,651,327
Settled during current year:										
18.1 By payment in full .....	165	16,613,131			1	121,863,055			166	138,476,186
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	165	16,613,131			1	121,863,055			166	138,476,186
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	165	16,613,131			1	121,863,055			166	138,476,186
19. Unpaid Dec. 31, current year (16+17-18.6) .....	12	254,200			(20)	1,578,716			(8)	1,832,916
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	10,026	2,133,083,101	(a)		11,062	18,589,721,713			21,088	20,722,804,814
21. Issued during year .....					2,690	6,437,386,964			2,690	6,437,386,964
22. Other changes to in force (Net) .....	(415)	(168,503,358)			(225)	(798,250,442)			(640)	(966,753,800)
23. In force December 31 of current year .....	9,611	1,964,579,743	(a)		13,527	24,228,858,235			23,138	26,193,437,978

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,616,057	1,628,086		933,190	193,055
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,748	2,748		3,175	3,175
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) .....	2,748	2,748		3,175	3,175
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,618,805	1,630,834		936,365	196,230

(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 214



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2022

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 .....	248,605		489,371		737,975
2. Annuity considerations .....	10,246,882		5,558,095		15,804,977
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	10,495,486		6,047,466		16,542,952
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	9,806				9,806
6.2 Applied to pay renewal premiums .....	15,887				15,887
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	20,148				20,148
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	45,842				45,842
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) .....	45,842				45,842
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,144,897		8,203		3,153,100
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	1,652,644		300,454		1,953,098
12. Surrender values and withdrawals for life contracts ..	8,244,875		2,338,020		10,582,895
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	293				293
15. Totals .....	13,043,709		2,646,678		15,690,387
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	5	18,946			25	2,527			30	21,473
17. Incurred during current year Settled during current year:	9	3,144,897				8,213			9	3,153,110
18.1 By payment in full .....	7	3,132,713			1	10,740			8	3,143,452
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	7	3,132,713			1	10,740			8	3,143,452
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	7	3,132,713			1	10,740			8	3,143,452
19. Unpaid Dec. 31, current year (16+17-18.6) .....	7	31,131			24				31	31,131
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	769	211,039,232	(a)		10	9,050,659			779	220,089,891
21. Issued during year .....					128	5,214,650			128	5,214,650
22. Other changes to in force (Net) .....	(34)	(17,598,738)			(120)	15,667,016			(154)	(1,931,722)
23. In force December 31 of current year .....	735	193,440,494	(a)		18	29,932,325			753	223,372,819

(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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,362,072	1,450,198		1,300,120	1,277,077
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	64	64		(75)	(75)
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) .....	64	64		(75)	(75)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,362,136	1,450,262		1,300,046	1,277,003

(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 89



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2022

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 .....	30,987,523		162,629,116		193,616,638
2. Annuity considerations .....	543,135,198		784,792,697		1,327,927,895
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	574,122,720		947,421,813		1,521,544,533
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	524,103		40		524,143
6.2 Applied to pay renewal premiums .....	484,711				484,711
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	876,513				876,513
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,885,328		40		1,885,368
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) .....	1,885,328		40		1,885,368
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	37,126,386		9,371,274		46,497,660
10. Matured endowments .....	28,311				28,311
11. Annuity benefits .....	126,486,833		107,876,613		234,363,446
12. Surrender values and withdrawals for life contracts ..	500,931,582		830,730,138		1,331,661,719
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	279,405				279,405
15. Totals .....	664,852,516		947,978,025		1,612,830,540
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	90	4,598,357			(6)	20,183			84	4,618,540
17. Incurred during current year .....	549	37,075,653			7	9,164,504			556	46,240,157
Settled during current year:										
18.1 By payment in full .....	578	37,898,712			8	8,844,681			586	46,743,393
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	578	37,898,712			8	8,844,681			586	46,743,393
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	578	37,898,712			8	8,844,681			586	46,743,393
19. Unpaid Dec. 31, current year (16+17-18.6) .....	61	3,775,298			(7)	340,007			54	4,115,305
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	23,561	3,628,524,371	(a)		3,111	3,262,033,971			26,672	6,890,558,342
21. Issued during year .....	173	33,425,000			1,845	151,284,606			2,018	184,709,606
22. Other changes to in force (Net) .....	(1,012)	(79,221,677)			(1,709)	(277,113,368)			(2,721)	(356,335,045)
23. In force December 31 of current year .....	22,722	3,582,727,694	(a)		3,247	3,136,205,210			25,969	6,718,932,903

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	18,068,673	18,219,511		10,551,090	10,170,533
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	280,522	280,522		286,275	286,275
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) .....	280,522	280,522		286,275	286,275
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	18,349,195	18,500,033		10,837,365	10,456,808

(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 4,079



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2022

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 .....	14,609,735		53,031,044		67,640,779
2. Annuity considerations .....	125,156,073		71,290,609		196,446,681
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	139,765,808		124,321,652		264,087,460
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	163,829				163,829
6.2 Applied to pay renewal premiums .....	139,090				139,090
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	321,873				321,873
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	624,792				624,792
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) .....	624,792				624,792
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,898,773		340,849		7,239,622
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	27,321,708		10,638,500		37,960,208
12. Surrender values and withdrawals for life contracts ..	134,039,847		106,029,244		240,069,090
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	45,321				45,321
15. Totals .....	168,306,649		117,008,593		285,315,242
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	26	906,370			12	8,672			38	915,042
17. Incurred during current year .....	122	6,896,773			10	312,410			132	7,209,183
Settled during current year:										
18.1 By payment in full .....	141	7,414,190			13	321,083			154	7,735,272
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	141	7,414,190			13	321,083			154	7,735,272
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	141	7,414,190			13	321,083			154	7,735,272
19. Unpaid Dec. 31, current year (16+17-18.6) .....	7	388,954			9	(1)			16	388,953
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	8,897	1,445,119,431	(a)		494	628,403,106			9,391	2,073,522,537
21. Issued during year .....	32	25,904,996			1,975	65,287,607			2,007	91,192,603
22. Other changes to in force (Net) .....	(499)	(160,647,559)			(1,936)	(98,467,236)			(2,435)	(259,114,795)
23. In force December 31 of current year .....	8,430	1,310,376,868	(a)		533	595,223,477			8,963	1,905,600,345

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	16,776,691	16,772,065		9,159,100	7,728,833
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	74,426	74,426		40,608	40,608
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) .....	74,426	74,426		40,608	40,608
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	16,851,117	16,846,491		9,199,709	7,769,441

(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 3,280



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2022

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 .....	1,006,520		2,022,270		3,028,789
2. Annuity considerations .....	37,458,739		6,172,303		43,631,042
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	38,465,259		8,194,572		46,659,831
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	11,293				11,293
6.2 Applied to pay renewal premiums .....	9,637				9,637
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	19,032				19,032
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	39,962				39,962
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) .....	39,962				39,962
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,544,515		(18)		1,544,497
10. Matured endowments .....					
11. Annuity benefits .....	9,301,347		1,569,327		10,870,673
12. Surrender values and withdrawals for life contracts ..	53,013,949		12,329,410		65,343,359
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	2				2
15. Totals .....	63,859,813		13,898,719		77,758,532
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	3	1,035,905							3	1,035,905
17. Incurred during current year .....	9	1,544,515							9	1,544,515
Settled during current year:										
18.1 By payment in full .....	9	1,207,423							9	1,207,423
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	9	1,207,423							9	1,207,423
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	9	1,207,423							9	1,207,423
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	1,372,996							3	1,372,996
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	911	276,407,985	(a)		131	42,187,531			1,042	318,595,516
21. Issued during year .....					38	10,595,000			38	10,595,000
22. Other changes to in force (Net) .....	(36)	(31,137,172)			(19)	(3,721,740)			(55)	(34,858,912)
23. In force December 31 of current year .....	875	245,270,813	(a)		150	49,060,791			1,025	294,331,604

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	23,184	27,789		81	(6,888)
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	23,184	27,789		81	(6,888)

(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 12



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	1,042,772		46,025		1,088,798
2. Annuity considerations .....	19,814,506		24,828,591		44,643,097
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	20,857,278		24,874,616		45,731,894
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	13,783				13,783
6.2 Applied to pay renewal premiums .....	8,890				8,890
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	21,798				21,798
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	44,471				44,471
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) .....	44,471				44,471
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,009,425		23,983		3,033,408
10. Matured endowments .....					
11. Annuity benefits .....	3,937,974		9,040,708		12,978,682
12. Surrender values and withdrawals for life contracts ..	19,665,328		29,884,374		49,549,702
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1				1
15. Totals .....	26,612,728		38,949,065		65,561,793
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:	6	3,009,425			1	8,427			7	3,017,852
18.1 By payment in full .....	6	3,009,425			1	8,427			7	3,017,852
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	6	3,009,425			1	8,427			7	3,017,852
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	6	3,009,425			1	8,427			7	3,017,852
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	586	158,215,540	(a)		21	22,469,670			607	180,685,210
21. Issued during year .....					536	21,675,772			536	21,675,772
22. Other changes to in force (Net) .....	(36)	(12,025,637)			(517)	41,796,156			(553)	29,770,519
23. In force December 31 of current year .....	550	146,189,903	(a)		40	85,941,598			590	232,131,501

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,975,336	3,981,603		2,305,305	2,451,164
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	3,975,336	3,981,603		2,305,305	2,451,164

(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 286



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	12,269,295		113,904,352		126,173,647
2. Annuity considerations .....	193,992,338		258,505,704		452,498,042
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	206,261,633		372,410,057		578,671,689
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	129,959				129,959
6.2 Applied to pay renewal premiums .....	115,637				115,637
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	232,734				232,734
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	478,330				478,330
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) .....	478,330				478,330
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	12,875,374		4,591,044		17,466,417
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	50,656,885		21,961,278		72,618,163
12. Surrender values and withdrawals for life contracts ..	188,655,972		330,990,605		519,646,577
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	14,049				14,049
15. Totals .....	252,203,279		357,542,926		609,746,205
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	29	1,560,139			3	107,061			32	1,667,200
17. Incurred during current year .....	155	12,701,014			9	4,528,401			164	17,229,415
Settled during current year:										
18.1 By payment in full .....	179	13,815,824			15	4,303,464			194	18,119,287
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	179	13,815,824			15	4,303,464			194	18,119,287
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	179	13,815,824			15	4,303,464			194	18,119,287
19. Unpaid Dec. 31, current year (16+17-18.6) .....	5	445,329			(3)	331,999			2	777,327
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	8,550	1,922,557,362	(a)		3,696	3,678,646,035			12,246	5,601,203,397
21. Issued during year .....	21	17,727,134			1,958	1,227,595,793			1,979	1,245,322,927
22. Other changes to in force (Net) .....	(537)	(141,672,110)			(1,365)	(404,364,053)			(1,902)	(546,036,163)
23. In force December 31 of current year .....	8,034	1,798,612,386	(a)		4,289	4,501,877,775			12,323	6,300,490,161

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	22,788,480	23,759,669		15,305,327	14,256,607
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	5,823	5,823		(980)	(980)
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) .....	5,823	5,823		(980)	(980)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	22,794,304	23,765,492		15,304,347	14,255,626

(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 2,581



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2022

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 .....	3,978,012		48,521,453		52,499,465
2. Annuity considerations .....	139,865,158		85,577,505		225,442,662
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	143,843,170		134,098,958		277,942,128
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	71,243		68		71,311
6.2 Applied to pay renewal premiums .....	98,663				98,663
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	141,055				141,055
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	310,961		68		311,029
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) .....	310,961		68		311,029
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,561,402		4,621,647		9,183,049
10. Matured endowments .....	2,500				2,500
11. Annuity benefits .....	27,179,452		7,556,430		34,735,882
12. Surrender values and withdrawals for life contracts ..	125,064,081		80,472,715		205,536,796
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	15,005				15,005
15. Totals .....	156,822,439		92,650,793		249,473,232
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	19	122,583			3	1			22	122,584
17. Incurred during current year Settled during current year:	109	4,561,402			2	4,621,387			111	9,182,788
18.1 By payment in full .....	123	3,337,217			2	3,821,049			125	7,158,266
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	123	3,337,217			2	3,821,049			125	7,158,266
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	123	3,337,217			2	3,821,049			125	7,158,266
19. Unpaid Dec. 31, current year (16+17-18.6) .....	5	1,346,767			3	800,339			8	2,147,106
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	4,993	467,273,881	(a)		377	1,259,738,405			5,370	1,727,012,286
21. Issued during year .....	3	2,862,558			1,097	32,558,242			1,100	35,420,800
22. Other changes to in force (Net) .....	(274)	(19,825,238)			(1,063)	746,569,424			(1,337)	726,744,185
23. In force December 31 of current year .....	4,722	450,311,201	(a)		411	2,038,866,071			5,133	2,489,177,271

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	20,779,435	21,120,455		13,371,364	12,139,936
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	19,415	19,415		13,982	13,982
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) .....	19,415	19,415		13,982	13,982
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	20,798,849	21,139,870		13,385,346	12,153,918

(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 1,165





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2022

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 .....	6,002,171		37,958,842		43,961,013
2. Annuity considerations .....	40,266,273		61,827,204		102,093,476
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	46,268,444		99,786,045		146,054,489
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	39,984				39,984
6.2 Applied to pay renewal premiums .....	74,334				74,334
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	118,739		28		118,767
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	233,057		28		233,085
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) .....	233,057		28		233,085
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,208,156		5,748,579		6,956,735
10. Matured endowments .....	4,344				4,344
11. Annuity benefits .....	8,533,256		3,889,361		12,422,618
12. Surrender values and withdrawals for life contracts ..	25,406,281		80,690,474		106,096,755
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	3,266				3,266
15. Totals .....	35,155,303		90,328,414		125,483,717
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	6	119,463			(3)				3	119,463
17. Incurred during current year .....	22	1,208,156			7	5,747,780			29	6,955,936
Settled during current year:										
18.1 By payment in full .....	26	1,289,770			7	5,747,780			33	7,037,550
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	26	1,289,770			7	5,747,780			33	7,037,550
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	26	1,289,770			7	5,747,780			33	7,037,550
19. Unpaid Dec. 31, current year (16+17-18.6) .....	2	37,849			(3)				(1)	37,849
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,544	405,202,840	(a)		1,248	3,223,918,665			2,792	3,629,121,505
21. Issued during year .....					304	28,589,118			304	28,589,118
22. Other changes to in force (Net) .....	(81)	(16,823,738)			(306)	(875,208,165)			(387)	(892,031,904)
23. In force December 31 of current year .....	1,463	388,379,102	(a)		1,246	2,377,299,618			2,709	2,765,678,719

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,264,228	2,284,491		1,126,287	981,462
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,264,228	2,284,491		1,126,287	981,462

(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 841



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2022

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 .....	2,141,096		9,285,700		11,426,795
2. Annuity considerations .....	61,173,929		21,863,152		83,037,081
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	63,315,024		31,148,852		94,463,876
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	25,245				25,245
6.2 Applied to pay renewal premiums .....	39,315				39,315
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	66,510				66,510
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	131,071				131,071
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) .....	131,071				131,071
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,616,394		57		2,616,451
10. Matured endowments .....					
11. Annuity benefits .....	19,314,393		1,544,964		20,859,357
12. Surrender values and withdrawals for life contracts ..	70,748,038		39,123,892		109,871,930
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	8,147				8,147
15. Totals .....	92,686,972		40,668,913		133,355,885
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	6	(4,121)			3	1			9	(4,120)
17. Incurred during current year .....	19	2,591,144				138			19	2,591,282
Settled during current year:										
18.1 By payment in full .....	25	2,567,080				138			25	2,567,218
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	25	2,567,080				138			25	2,567,218
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	25	2,567,080				138			25	2,567,218
19. Unpaid Dec. 31, current year (16+17-18.6) .....		19,943			3	1			3	19,944
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,628	329,701,199	(a)		17	26,936,113			1,645	356,637,312
21. Issued during year .....	1	10,000			541	17,471,083			542	17,481,083
22. Other changes to in force (Net) .....	(134)	(36,568,537)			(523)	(6,920,794)			(657)	(43,489,331)
23. In force December 31 of current year .....	1,495	293,142,662	(a)		35	37,486,402			1,530	330,629,064

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,031,328	1,736,618		1,835,898	(157,053)
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	48	48			
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) .....	48	48			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,031,376	1,736,666		1,835,898	(157,053)

(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 354



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2022

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 .....	2,998,247		9,176,255		12,174,501
2. Annuity considerations .....	67,088,585		19,315,941		86,404,527
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	70,086,832		28,492,196		98,579,028
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	125,328				125,328
6.2 Applied to pay renewal premiums .....	129,214				129,214
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	249,701				249,701
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	504,243				504,243
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) .....	504,243				504,243
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	4,866,274		554,464		5,420,738
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	12,748,575		3,034,535		15,783,111
12. Surrender values and withdrawals for life contracts ..	63,245,010		146,627,539		209,872,549
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	93,779				93,779
15. Totals .....	80,954,638		150,216,538		231,171,176
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	11	119,867							11	119,867
17. Incurred during current year .....	122	4,866,274				768			122	4,867,042
Settled during current year:										
18.1 By payment in full .....	128	4,660,754				768			128	4,661,523
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	128	4,660,754				768			128	4,661,523
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	128	4,660,754				768			128	4,661,523
19. Unpaid Dec. 31, current year (16+17-18.6) .....	5	325,386							5	325,386
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	5,326	504,266,454	(a)		42	3,862,943,151			5,368	4,367,209,605
21. Issued during year .....					712	20,896,660			712	20,896,660
22. Other changes to in force (Net) .....	(334)	(49,878,615)			(702)	(3,808,845,678)			(1,036)	(3,858,724,293)
23. In force December 31 of current year .....	4,992	454,387,839	(a)		52	74,994,133			5,044	529,381,972

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,845,131	3,880,624		7,538,270	4,849,915
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	20,126	20,126		6,984	6,984
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) .....	20,126	20,126		6,984	6,984
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,865,257	3,900,750		7,545,253	4,856,899

(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 942



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	3,781,515		3,475,223		7,256,739
2. Annuity considerations .....	57,568,545		51,614,891		109,183,436
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	61,350,060		55,090,114		116,440,175
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	32,158				32,158
6.2 Applied to pay renewal premiums .....	94,548				94,548
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	95,192				95,192
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	221,899				221,899
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) .....	221,899				221,899
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	169,245		878,368		1,047,613
10. Matured endowments .....					
11. Annuity benefits .....	9,848,459		7,086,625		16,935,084
12. Surrender values and withdrawals for life contracts ..	68,098,957		69,175,502		137,274,458
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	5,712				5,712
15. Totals .....	78,122,372		77,140,495		155,262,867
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....					1	295,900			1	295,900
17. Incurred during current year Settled during current year:	13	169,245			1	864,168			14	1,033,413
18.1 By payment in full .....	13	159,245			1	1,160,069			14	1,319,314
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	13	159,245			1	1,160,069			14	1,319,314
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	13	159,245			1	1,160,069			14	1,319,314
19. Unpaid Dec. 31, current year (16+17-18.6) .....		10,000			1	(1)			1	9,999
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,049	242,263,867	(a)		58	108,695,611			1,107	350,959,478
21. Issued during year .....	6	1,682,105			812	22,571,410			818	24,253,515
22. Other changes to in force (Net) .....	(60)	(12,285,741)			(798)	(22,648,575)			(858)	(34,934,316)
23. In force December 31 of current year .....	995	231,660,232	(a)		72	108,618,446			1,067	340,278,677

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,164,539	1,456,061		738,823	621,546
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	1,164,539	1,456,061		738,823	621,546

(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 944



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	661,574		1,707,645		2,369,220
2. Annuity considerations .....	24,421,385		16,030,927		40,452,312
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	25,082,959		17,738,572		42,821,532
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	58,328				58,328
6.2 Applied to pay renewal premiums .....	42,344				42,344
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	78,525				78,525
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	179,197				179,197
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) .....	179,197				179,197
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,034,509		950		1,035,460
10. Matured endowments .....	1,636				1,636
11. Annuity benefits .....	5,494,711		595,352		6,090,063
12. Surrender values and withdrawals for life contracts ..	26,900,613		11,970,732		38,871,346
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	5,364				5,364
15. Totals .....	33,436,834		12,567,034		46,003,868
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	4	19,280							4	19,280
17. Incurred during current year .....	42	1,034,509				877			42	1,035,387
Settled during current year:										
18.1 By payment in full .....	46	751,741				877			46	752,618
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	46	751,741				877			46	752,618
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	46	751,741				877			46	752,618
19. Unpaid Dec. 31, current year (16+17-18.6) .....		302,048								302,048
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,493	127,554,999	(a)			2,438,981			1,493	129,993,980
21. Issued during year .....	1	500,000			43	1,908,000			44	2,408,000
22. Other changes to in force (Net) .....	(104)	(16,576,797)			(43)	21,506,535			(147)	4,929,738
23. In force December 31 of current year .....	1,390	111,478,202	(a)			25,853,516			1,390	137,331,718

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	837,227	875,165		649,990	544,501
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	837,227	875,165		649,990	544,501

(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 148



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	15,691,021		6,884,642		22,575,663
2. Annuity considerations .....	94,786,943		169,521,097		264,308,040
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	110,477,965		176,405,738		286,883,703
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	233,974				233,974
6.2 Applied to pay renewal premiums .....	215,783				215,783
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	512,472				512,472
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	962,230				962,230
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) .....	962,230				962,230
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	11,413,641		17,976		11,431,617
10. Matured endowments .....	50,900				50,900
11. Annuity benefits .....	24,474,424		19,773,555		44,247,979
12. Surrender values and withdrawals for life contracts ..	112,715,030		142,557,277		255,272,307
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	128,717				128,717
15. Totals .....	148,782,712		162,348,808		311,131,520
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	63	3,804,487							63	3,804,487
17. Incurred during current year .....	437	11,403,641			3	24,378			440	11,428,019
Settled during current year:										
18.1 By payment in full .....	471	13,548,550			3	24,378			474	13,572,928
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	471	13,548,550			3	24,378			474	13,572,928
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	471	13,548,550			3	24,378			474	13,572,928
19. Unpaid Dec. 31, current year (16+17-18.6) .....	29	1,659,578							29	1,659,578
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	20,498	1,790,997,467	(a)		249	401,626,930			20,747	2,192,624,397
21. Issued during year .....	2	201,000			502	19,290,525			504	19,491,525
22. Other changes to in force (Net) .....	(1,325)	(169,814,583)			(491)	(69,088,690)			(1,816)	(238,903,273)
23. In force December 31 of current year .....	19,175	1,621,383,884	(a)		260	351,828,766			19,435	1,973,212,649

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	8,592,161	8,774,651		3,536,754	3,573,703
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	198,018	198,018		168,693	168,693
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) .....	198,018	198,018		168,693	168,693
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	8,790,180	8,972,669		3,705,446	3,742,395

(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 797



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2022

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 .....	9,863,749		32,418,348		42,282,097
2. Annuity considerations .....	197,665,956		208,326,976		405,992,932
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	207,529,705		240,745,324		448,275,029
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	183,311				183,311
6.2 Applied to pay renewal premiums .....	252,259				252,259
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	271,262				271,262
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	706,832				706,832
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) .....	706,832				706,832
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	8,677,721		539,559		9,217,279
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	58,958,977		13,673,999		72,632,976
12. Surrender values and withdrawals for life contracts ..	193,163,838		153,850,033		347,013,871
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	19,174				19,174
15. Totals .....	260,820,710		168,063,590		428,884,300
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	11	13,771,879				193,426			11	13,965,305
17. Incurred during current year .....	122	8,663,006			3	542,357			125	9,205,363
Settled during current year:										
18.1 By payment in full .....	126	22,006,838			3	412,781			129	22,419,619
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	126	22,006,838			3	412,781			129	22,419,619
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	126	22,006,838			3	412,781			129	22,419,619
19. Unpaid Dec. 31, current year (16+17-18.6) .....	7	428,047				323,002			7	751,049
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	5,506	989,071,520	(a)		1,411	4,373,917,826			6,917	5,362,989,346
21. Issued during year .....	14	17,300,000			199	10,695,982			213	27,995,982
22. Other changes to in force (Net) .....	(278)	(70,361,274)			(205)	(392,945,928)			(483)	(463,307,202)
23. In force December 31 of current year .....	5,242	936,010,246	(a)		1,405	3,991,667,880			6,647	4,927,678,126

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	9,512,579	9,742,135		10,539,075	10,059,913
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	7,315	7,315		2,311	2,311
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	58	58			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	7,372	7,372		2,311	2,311
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	9,519,951	9,749,508		10,541,386	10,062,224

(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 320



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2022

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 .....	12,364,624		7,783,316		20,147,940
2. Annuity considerations .....	200,426,954		109,452,814		309,879,769
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	212,791,578		117,236,130		330,027,709
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	87,710				87,710
6.2 Applied to pay renewal premiums .....	65,543				65,543
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	159,031		36		159,067
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	312,284		36		312,320
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) .....	312,284		36		312,320
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	8,625,514		(18,638)		8,606,876
10. Matured endowments .....	6,717				6,717
11. Annuity benefits .....	43,818,258		20,613,468		64,431,726
12. Surrender values and withdrawals for life contracts ..	148,441,725		178,823,515		327,265,240
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	27,761				27,761
15. Totals .....	200,919,976		199,418,345		400,338,321
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	18	260,108			2	1			20	260,109
17. Incurred during current year .....	122	8,591,251			1	50,147			123	8,641,398
Settled during current year:										
18.1 By payment in full .....	137	8,712,982			1	48,154			138	8,761,136
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	137	8,712,982			1	48,154			138	8,761,136
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	137	8,712,982			1	48,154			138	8,761,136
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	138,377			2	1,994			5	140,371
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	8,065	1,930,592,446	(a)		178	272,294,024			8,243	2,202,886,470
21. Issued during year .....	2	1,091,226			876	30,474,375			878	31,565,601
22. Other changes to in force (Net) .....	(486)	(127,801,886)			(838)	(32,669,597)			(1,324)	(160,471,483)
23. In force December 31 of current year .....	7,581	1,803,881,786	(a)		216	270,098,802			7,797	2,073,980,588

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	10,171,253	10,185,574		4,334,734	3,484,080
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	6,391	6,391		(3,376)	(3,376)
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) .....	6,391	6,391		(3,376)	(3,376)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	10,177,644	10,191,966		4,331,358	3,480,704

(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 1,172





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	6,746,962		178,584,095		185,331,057
2. Annuity considerations .....	93,945,289		59,847,076		153,792,364
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	100,692,250		238,431,171		339,123,421
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	146,723				146,723
6.2 Applied to pay renewal premiums .....	192,335				192,335
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	190,354				190,354
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	529,412				529,412
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) .....	529,412				529,412
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	9,373,763		4,914,507		14,288,270
10. Matured endowments .....					
11. Annuity benefits .....	16,188,900		15,549,649		31,738,548
12. Surrender values and withdrawals for life contracts ..	99,815,396		94,510,347		194,325,743
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4				4
15. Totals .....	125,378,063		114,974,503		240,352,566
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	20	546,474			1	33,435			21	579,909
17. Incurred during current year Settled during current year:	63	9,362,847			4	4,917,664			67	14,280,512
18.1 By payment in full .....	72	8,484,586			4	4,945,336			76	13,429,922
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	72	8,484,586			4	4,945,336			76	13,429,922
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	72	8,484,586			4	4,945,336			76	13,429,922
19. Unpaid Dec. 31, current year (16+17-18.6) .....	11	1,424,735			1	5,763			12	1,430,499
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	4,727	1,223,497,697	(a)		1,454	2,030,143,047			6,181	3,253,640,744
21. Issued during year .....					569	226,091,924			569	226,091,924
22. Other changes to in force (Net) .....	(181)	(203,700,990)			(375)	(45,076,875)			(556)	(248,777,865)
23. In force December 31 of current year .....	4,546	1,019,796,707	(a)		1,648	2,211,158,096			6,194	3,230,954,803

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,243,680	1,265,910		187,311	13,086
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	6,180	6,180		1,904	1,904
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) .....	6,180	6,180		1,904	1,904
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,249,861	1,272,090		189,215	14,989

(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 687



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	2,398,217		1,433,247		3,831,464
2. Annuity considerations .....	53,268,535		9,739,943		63,008,478
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	55,666,751		11,173,190		66,839,941
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	26,664				26,664
6.2 Applied to pay renewal premiums .....	11,588				11,588
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	68,991				68,991
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	107,243				107,243
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) .....	107,243				107,243
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,509,063		50,676		2,559,739
10. Matured endowments .....					
11. Annuity benefits .....	5,009,619		870,093		5,879,712
12. Surrender values and withdrawals for life contracts ..	21,915,569		9,733,398		31,648,966
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	44,157				44,157
15. Totals .....	29,478,408		10,654,167		40,132,575
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	5	170,294			2	2,500			7	172,794
17. Incurred during current year Settled during current year:	40	2,490,063			6	23,307			46	2,513,370
18.1 By payment in full .....	41	2,604,431			7	25,807			48	2,630,238
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	41	2,604,431			7	25,807			48	2,630,238
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	41	2,604,431			7	25,807			48	2,630,238
19. Unpaid Dec. 31, current year (16+17-18.6) .....	4	55,926			1				5	55,926
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,290	314,434,821	(a)		9	18,217,832			2,299	332,652,653
21. Issued during year .....	2	350,015			917	21,645,018			919	21,995,033
22. Other changes to in force (Net) .....	(139)	(39,341,557)			(904)	15,276,696			(1,043)	(24,064,861)
23. In force December 31 of current year .....	2,153	275,443,279	(a)		22	55,139,546			2,175	330,582,825

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,562,476	2,572,250		1,835,229	2,024,883
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	29,312	29,312		8,155	8,155
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) .....	29,312	29,312		8,155	8,155
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,591,788	2,601,562		1,843,383	2,033,037

(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 985



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2022

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 .....	1,677,218		39,629,919		41,307,137
2. Annuity considerations .....	59,819,383		56,281,503		116,100,886
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	61,496,600		95,911,422		157,408,022
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	58,230				58,230
6.2 Applied to pay renewal premiums .....	44,706				44,706
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	105,118				105,118
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	208,055				208,055
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) .....	208,055				208,055
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,803,864		1,379,594		5,183,457
10. Matured endowments .....	3,000				3,000
11. Annuity benefits .....	17,927,640		6,410,203		24,337,843
12. Surrender values and withdrawals for life contracts ..	69,803,290		135,421,894		205,225,185
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	24,151				24,151
15. Totals .....	91,561,945		143,211,691		234,773,636
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	4	25,211			3	3,926			7	29,137
17. Incurred during current year .....	43	3,799,364			2	1,366,733			45	5,166,096
Settled during current year:										
18.1 By payment in full .....	46	3,806,067			3	1,370,660			49	5,176,727
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	46	3,806,067			3	1,370,660			49	5,176,727
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	46	3,806,067			3	1,370,660			49	5,176,727
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	18,507			2	(1)			3	18,506
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	2,517	692,453,796	(a)		246	339,302,478			2,763	1,031,756,274
21. Issued during year .....					1,173	43,805,208			1,173	43,805,208
22. Other changes to in force (Net) .....	(132)	(90,377,325)			(1,157)	(115,851,276)			(1,289)	(206,228,601)
23. In force December 31 of current year .....	2,385	602,076,471	(a)		262	267,256,410			2,647	869,332,881

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	5,073,268	5,120,489		3,448,028	2,731,130
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,065	2,065		110	110
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) .....	2,065	2,065		110	110
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	5,075,333	5,122,554		3,448,138	2,731,239

(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 1,549



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	872,408		(16,829)		855,580
2. Annuity considerations .....	15,074,278		9,078,153		24,152,432
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	15,946,687		9,061,325		25,008,011
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	6,440				6,440
6.2 Applied to pay renewal premiums .....	15,899				15,899
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	23,256				23,256
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	45,595				45,595
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) .....	45,595				45,595
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	176,651		(125)		176,526
10. Matured endowments .....					
11. Annuity benefits .....	3,189,588		1,281,532		4,471,120
12. Surrender values and withdrawals for life contracts ..	7,596,952		7,942,649		15,539,601
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4,894				4,894
15. Totals .....	10,968,086		9,224,056		20,192,142
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	1				(1)					
17. Incurred during current year Settled during current year:	4	166,651				432			4	167,083
18.1 By payment in full .....	5	147,071				432			5	147,503
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	5	147,071				432			5	147,503
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	5	147,071				432			5	147,503
19. Unpaid Dec. 31, current year (16+17-18.6) .....		19,580			(1)				(1)	19,580
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	479	93,346,610	(a)			1,684,971			479	95,031,581
21. Issued during year .....					46	1,320,000			46	1,320,000
22. Other changes to in force (Net) .....	(19)	(4,189,059)			(46)	(1,403,508)			(65)	(5,592,567)
23. In force December 31 of current year .....	460	89,157,551	(a)			1,601,463			460	90,759,014

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	238,257	240,856		156,272	52,154
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,267	2,267		722	722
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) .....	2,267	2,267		722	722
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	240,524	243,123		156,994	52,877

(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 75



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	865,642		1,229,363		2,095,005
2. Annuity considerations .....	27,459,938		19,332,614		46,792,552
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	28,325,580		20,561,977		48,887,557
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	11,350				11,350
6.2 Applied to pay renewal premiums .....	16,372				16,372
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	26,449				26,449
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	54,171				54,171
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) .....	54,171				54,171
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	511,991		(857)		511,134
10. Matured endowments .....					
11. Annuity benefits .....	7,361,124		1,883,325		9,244,450
12. Surrender values and withdrawals for life contracts ..	21,145,893		24,179,602		45,325,495
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1,406				1,406
15. Totals .....	29,020,414		26,062,071		55,082,484
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	3	14,101			1				4	14,101
17. Incurred during current year Settled during current year:	15	511,991				820			15	512,811
18.1 By payment in full .....	17	525,651				820			17	526,471
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	17	525,651				820			17	526,471
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	17	525,651				820			17	526,471
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	441			1				2	441
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	603	117,168,830	(a)		117	119,737,447			720	236,906,277
21. Issued during year .....	21	10,174,202			138	6,451,159			159	16,625,361
22. Other changes to in force (Net) .....	(56)	(9,657,241)			(135)	(36,054,017)			(191)	(45,711,258)
23. In force December 31 of current year .....	568	117,685,791	(a)		120	90,134,589			688	207,820,380

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,816,290	2,819,017		1,304,793	477,110
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,816,290	2,819,017		1,304,793	477,110

(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 415



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2022

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 .....	1,785,448		3,185,853		4,971,301
2. Annuity considerations .....	32,225,399		35,016,761		67,242,160
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	34,010,846		38,202,614		72,213,461
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	27,252				27,252
6.2 Applied to pay renewal premiums .....	20,767				20,767
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	29,026				29,026
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	77,045				77,045
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) .....	77,045				77,045
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,231,003		5,093		2,236,096
10. Matured endowments .....					
11. Annuity benefits .....	8,012,758		2,832,564		10,845,322
12. Surrender values and withdrawals for life contracts ..	40,784,804		26,952,435		67,737,239
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	8,047				8,047
15. Totals .....	51,036,612		29,790,092		80,826,704
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	3	65,660							3	65,660
17. Incurred during current year .....	19	2,221,003			4	5,585			23	2,226,588
Settled during current year:										
18.1 By payment in full .....	21	2,212,694			4	5,585			25	2,218,279
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	21	2,212,694			4	5,585			25	2,218,279
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	21	2,212,694			4	5,585			25	2,218,279
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	73,969							1	73,969
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	946	200,937,363	(a)		4	19,228,011			950	220,165,374
21. Issued during year .....					291	8,600,340			291	8,600,340
22. Other changes to in force (Net) .....	(40)	(8,951,798)			(291)	194,911,311			(331)	185,959,513
23. In force December 31 of current year .....	906	191,985,565	(a)		4	222,739,662			910	414,725,227

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,116,287	2,122,702		1,453,094	443,187
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	21	21			
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) .....	21	21			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,116,308	2,122,723		1,453,094	443,187

(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 540



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2022

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 .....	1,678,040		1,893,475		3,571,516
2. Annuity considerations .....	41,232,202		32,020,831		73,253,033
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	42,910,243		33,914,306		76,824,549
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	50,439				50,439
6.2 Applied to pay renewal premiums .....	36,855				36,855
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	63,679				63,679
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	150,974				150,974
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) .....	150,974				150,974
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,652,663		(1,799)		2,650,863
10. Matured endowments .....					
11. Annuity benefits .....	8,188,861		1,256,514		9,445,375
12. Surrender values and withdrawals for life contracts ..	36,275,983		19,697,877		55,973,860
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	4,127				4,127
15. Totals .....	47,121,633		20,952,591		68,074,225
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	2	20,990							2	20,990
17. Incurred during current year .....	28	2,652,663							28	2,652,663
Settled during current year:										
18.1 By payment in full .....	29	2,665,891							29	2,665,891
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	29	2,665,891							29	2,665,891
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	29	2,665,891							29	2,665,891
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	7,761							1	7,761
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,159	306,788,928	(a)		4	9,147,178			2,163	315,936,106
21. Issued during year .....	1	169,174			22	2,172,000			23	2,341,174
22. Other changes to in force (Net) .....	(125)	(29,469,816)			(22)	82,110,567			(147)	52,640,751
23. In force December 31 of current year .....	2,035	277,488,286	(a)		4	93,429,745			2,039	370,918,031

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,467,781	2,467,677		2,266,096	2,417,227
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,424	2,424		462	462
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) .....	2,424	2,424		462	462
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,470,205	2,470,101		2,266,558	2,417,689

(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 21



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2022

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 .....	19,592,499		689,733,027		709,325,526
2. Annuity considerations .....	247,138,536		161,871,302		409,009,838
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	266,731,035		851,604,329		1,118,335,364
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	572,059				572,059
6.2 Applied to pay renewal premiums .....	680,918				680,918
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	843,559				843,559
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,096,537				2,096,537
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) .....	2,096,537				2,096,537
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	27,459,101		5,012,658		32,471,759
10. Matured endowments .....	4,149				4,149
11. Annuity benefits .....	49,049,426		26,181,067		75,230,492
12. Surrender values and withdrawals for life contracts ..	215,218,285		169,430,614		384,648,899
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	103,915				103,915
15. Totals .....	291,834,875		200,624,339		492,459,214
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	50	1,807,926			1	5,327			51	1,813,253
17. Incurred during current year Settled during current year:	267	27,432,893			10	5,034,307			277	32,467,200
18.1 By payment in full .....	309	26,470,191			11	5,034,491			320	31,504,682
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	309	26,470,191			11	5,034,491			320	31,504,682
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	309	26,470,191			11	5,034,491			320	31,504,682
19. Unpaid Dec. 31, current year (16+17-18.6) .....	8	2,770,628				5,143			8	2,775,771
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	14,651	3,078,562,785	(a)		416	485,381,909			15,067	3,563,944,694
21. Issued during year .....	21	24,551,564			1,734	2,020,540,607			1,755	2,045,092,171
22. Other changes to in force (Net) .....	(704)	(175,318,261)			(568)	(146,871,041)			(1,272)	(322,189,302)
23. In force December 31 of current year .....	13,968	2,927,796,088	(a)		1,582	2,359,051,475			15,550	5,286,847,563

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	16,084,177	16,939,017		9,218,361	7,982,074
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	13,546	13,546		4,516	4,516
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	127	127			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	13,673	13,673		4,516	4,516
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	16,097,849	16,952,689		9,222,877	7,986,590

(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 1,127





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2022

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 .....	371,761		5,380		377,140
2. Annuity considerations .....	13,183,960		14,727,106		27,911,066
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	13,555,720		14,732,486		28,288,206
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	16,529				16,529
6.2 Applied to pay renewal premiums .....	15,786				15,786
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	31,807				31,807
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	64,122				64,122
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) .....	64,122				64,122
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	151,867		2,438		154,305
10. Matured endowments .....					
11. Annuity benefits .....	6,041,297		1,300,762		7,342,059
12. Surrender values and withdrawals for life contracts ..	21,159,730		14,293,784		35,453,513
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1				1
15. Totals .....	27,352,894		15,596,984		42,949,878
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	3	41,399							3	41,399
17. Incurred during current year Settled during current year:	16	151,867			1	3,132			17	154,999
18.1 By payment in full .....	19	193,265			1	3,132			20	196,397
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	19	193,265			1	3,132			20	196,397
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	19	193,265			1	3,132			20	196,397
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	661	73,562,429	(a)			4,165,165			661	77,727,594
21. Issued during year .....					210	5,908,082			210	5,908,082
22. Other changes to in force (Net) .....	(44)	(8,195,128)			(207)	195,080,428			(251)	186,885,300
23. In force December 31 of current year .....	617	65,367,301	(a)		3	205,153,675			620	270,520,976

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,506,719	2,533,696		973,652	533,572
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,506,719	2,533,696		973,652	533,572

(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 342



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	202,894,352		199,402,540		402,296,892
2. Annuity considerations .....	815,560,696		372,100,121		1,187,660,817
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	1,018,455,048		571,502,661		1,589,957,709
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	719,051		17		719,067
6.2 Applied to pay renewal premiums .....	935,277				935,277
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,781,850				1,781,850
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	3,436,178		17		3,436,195
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) .....	3,436,178		17		3,436,195
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	58,774,083		13,474,915		72,248,998
10. Matured endowments .....	123,068				123,068
11. Annuity benefits .....	146,623,310		49,993,904		196,617,214
12. Surrender values and withdrawals for life contracts ..	734,719,614		247,663,131		982,382,745
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	460,930		24,379		485,308
15. Totals .....	940,701,004		311,156,329		1,251,857,333
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	119	14,677,494			(7)	1,869			112	14,679,363
17. Incurred during current year Settled during current year:	810	57,452,426			27	13,474,640			837	70,927,065
18.1 By payment in full .....	840	62,852,116			28	13,087,510			868	75,939,626
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	840	62,852,116			28	13,087,510			868	75,939,626
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	840	62,852,116			28	13,087,510			868	75,939,626
19. Unpaid Dec. 31, current year (16+17-18.6) .....	89	9,277,804			(8)	388,999			81	9,666,803
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	71,000	19,510,054,294	(a)		1,187	829,958,313			72,187	20,340,012,607
21. Issued during year .....	2,550	1,267,962,349			886	48,127,007			3,436	1,316,089,356
22. Other changes to in force (Net) .....	(4,654)	(1,397,730,183)			(920)	(258,245,388)			(5,574)	(1,655,975,571)
23. In force December 31 of current year .....	68,896	19,380,286,460	(a)		1,153	619,839,932			70,049	20,000,126,392

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	10,698,628	10,824,845		12,946,080	11,531,618
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	361,542	361,542		2,748,579	2,748,579
25.2 Guaranteed renewable (b) .....	41,697	41,697		16,163	16,163
25.3 Non-renewable for stated reasons only (b) .....	(892)	(892)		(16,895)	
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	402,346	402,346		2,747,847	2,764,742
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	11,100,974	11,227,191		15,693,926	14,296,360

(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 727



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2022

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 .....	26,216,428		100,319,582		126,536,010
2. Annuity considerations .....	182,637,519		47,969,370		230,606,889
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	208,853,947		148,288,952		357,142,899
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	387,586				387,586
6.2 Applied to pay renewal premiums .....	331,791				331,791
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	769,498		20		769,518
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,488,875		20		1,488,895
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) .....	1,488,875		20		1,488,895
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	25,470,519		5,740,970		31,211,489
10. Matured endowments .....	20,432				20,432
11. Annuity benefits .....	36,390,054		9,845,470		46,235,525
12. Surrender values and withdrawals for life contracts ..	166,881,526		79,921,302		246,802,827
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	345,222				345,222
15. Totals .....	229,107,753		95,507,742		324,615,495
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	64	2,714,547			11	3,903			75	2,718,450
17. Incurred during current year .....	684	25,468,120			5	5,682,141			689	31,150,261
Settled during current year:										
18.1 By payment in full .....	686	25,721,050			5	5,682,141			691	31,403,192
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	686	25,721,050			5	5,682,141			691	31,403,192
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	686	25,721,050			5	5,682,141			691	31,403,192
19. Unpaid Dec. 31, current year (16+17-18.6) .....	62	2,461,616			11	3,903			73	2,465,519
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	33,618	4,019,229,997	(a)		3,559	2,562,930,142			37,177	6,582,160,139
21. Issued during year .....	3	1,085,571			1,517	150,697,120			1,520	151,782,691
22. Other changes to in force (Net) .....	(2,041)	(362,302,811)			(1,475)	(360,804,484)			(3,516)	(723,107,295)
23. In force December 31 of current year .....	31,580	3,658,012,757	(a)		3,601	2,352,822,778			35,181	6,010,835,535

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	12,762,125	12,698,920		8,228,104	6,654,075
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	(134)	(134)			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	2,118	2,118			
25.2 Guaranteed renewable (b) .....	215,319	215,319		100,393	100,393
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) .....	217,437	217,437		100,393	100,393
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	12,979,429	12,916,224		8,328,497	6,754,468

(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 3,427



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	19,987,260		1,849,282		21,836,543
2. Annuity considerations .....	8,648,262		16,407,302		25,055,563
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	28,635,522		18,256,584		46,892,106
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	859				859
6.2 Applied to pay renewal premiums .....	5,833				5,833
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	4,018				4,018
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	10,710				10,710
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) .....	10,710				10,710
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,224,820		139		1,224,959
10. Matured endowments .....					
11. Annuity benefits .....	2,228,481		2,353,391		4,581,872
12. Surrender values and withdrawals for life contracts ..	12,021,130		14,715,523		26,736,652
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	15,474,431		17,069,053		32,543,484
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	4	1,254,727			1				5	1,254,727
17. Incurred during current year Settled during current year:	2	1,224,820							2	1,224,820
18.1 By payment in full .....	3	1,102,692							3	1,102,692
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	3	1,102,692							3	1,102,692
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	3	1,102,692							3	1,102,692
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	1,376,855			1				4	1,376,855
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	1,810	1,086,137,489	(a)		20	21,986,347			1,830	1,108,123,836
21. Issued during year .....					37	956,000			37	956,000
22. Other changes to in force (Net) .....	(34)	(21,577,462)			(35)	10,344,610			(69)	(11,232,853)
23. In force December 31 of current year .....	1,776	1,064,560,027	(a)		22	33,286,957			1,798	1,097,846,983

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	829,452	832,093		284,610	96,324
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	829,452	832,093		284,610	96,324

(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 43



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2022

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 .....	20,216,949		46,630,376		66,847,325
2. Annuity considerations .....	252,854,841		179,540,997		432,395,838
3. Deposit-type contract funds .....	10,272,116,331	XXX		XXX	10,272,116,331
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	10,545,188,121		226,171,374		10,771,359,494
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	408,195				408,195
6.2 Applied to pay renewal premiums .....	266,561				266,561
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	844,134				844,134
6.4 Other .....	25,108,002		300		25,108,302
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	26,626,892		300		26,627,192
Annuities:					
7.1 Paid in cash or left on deposit .....	(3,371)				(3,371)
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	(3,371)				(3,371)
8. Grand Totals (Lines 6.5 plus 7.4) .....	26,623,521		300		26,623,821
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	57,104,267		21,591,740		78,696,007
10. Matured endowments .....	53,977				53,977
11. Annuity benefits .....	70,690,364		137,369,843		208,060,207
12. Surrender values and withdrawals for life contracts ..	336,135,227		151,755,405		487,890,632
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	261,449				261,449
15. Totals .....	464,245,283		310,716,988		774,962,271
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	189	15,403,975			(1)	154,550			188	15,558,525
17. Incurred during current year Settled during current year:	1,311	57,341,162				5,511,567			1,311	62,852,729
18.1 By payment in full .....	1,369	59,054,441				5,618,099			1,369	64,672,540
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1,369	59,054,441				5,618,099			1,369	64,672,540
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1,369	59,054,441				5,618,099			1,369	64,672,540
19. Unpaid Dec. 31, current year (16+17-18.6) .....	131	13,690,696			(1)	48,018			130	13,738,714
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	56,038	7,017,438,307	(a)		1,265	6,040,293,647			57,303	13,057,731,954
21. Issued during year .....	13	2,755,113			4,150	251,165,266			4,163	253,920,379
22. Other changes to in force (Net) .....	(3,417)	(616,171,125)			(2,431)	933,189,424			(5,848)	317,018,299
23. In force December 31 of current year .....	52,634	6,404,022,295	(a)		2,984	7,224,648,337			55,618	13,628,670,632

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	32,655,713	33,145,229	35,109	22,960,337	20,567,338
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....		(13)			12
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....		176			(84,530)
25.2 Guaranteed renewable (b) .....	399,920	486,877		387,451	330,673
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....	(241)	(241)			(194)
25.6 Totals (sum of Lines 25.1 to 25.5) .....	399,679	486,812		387,451	245,949
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	33,055,393	33,632,029	35,109	23,347,787	20,813,298

(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 3,346



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	1,048,075		366,056		1,414,131
2. Annuity considerations .....	47,781,253		60,848,599		108,629,852
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	48,829,328		61,214,655		110,043,983
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	17,951				17,951
6.2 Applied to pay renewal premiums .....	19,978				19,978
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	43,312				43,312
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	81,241				81,241
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) .....	81,241				81,241
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,085,262		92,018		1,177,280
10. Matured endowments .....					
11. Annuity benefits .....	8,477,547		9,899,568		18,377,116
12. Surrender values and withdrawals for life contracts ..	52,751,188		55,359,942		108,111,130
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	387				387
15. Totals .....	62,314,383		65,351,529		127,665,912
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	3	223,859			3	32,021			6	255,880
17. Incurred during current year Settled during current year:	13	1,085,262			3	88,855			16	1,174,116
18.1 By payment in full .....	15	1,269,120			5	120,876			20	1,389,996
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	15	1,269,120			5	120,876			20	1,389,996
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	15	1,269,120			5	120,876			20	1,389,996
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	40,000			1				2	40,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	858	116,678,348	(a)		26	19,934,556			884	136,612,904
21. Issued during year .....					758	25,196,253			758	25,196,253
22. Other changes to in force (Net) .....	(42)	(11,337,834)			(729)	(14,289,820)			(771)	(25,627,654)
23. In force December 31 of current year .....	816	105,340,514	(a)		55	30,840,989			871	136,181,503

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	3,326,972	3,313,253		833,578	737,716
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,686	2,686		2,848	2,848
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) .....	2,686	2,686		2,848	2,848
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,329,658	3,315,939		836,425	740,563

(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 1,156



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2022

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 .....	6,611,346		2,154,132		8,765,478
2. Annuity considerations .....	53,687,467		45,763,576		99,451,043
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	60,298,813		47,917,708		108,216,521
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	44,712				44,712
6.2 Applied to pay renewal premiums .....	63,324				63,324
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	66,690				66,690
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	174,726				174,726
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) .....	174,726				174,726
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	935,482		26,582		962,065
10. Matured endowments .....					
11. Annuity benefits .....	16,359,004		4,972,057		21,331,062
12. Surrender values and withdrawals for life contracts ..	65,123,235		38,062,574		103,185,809
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	47,283				47,283
15. Totals .....	82,465,004		43,061,214		125,526,218
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	10	269,786							10	269,786
17. Incurred during current year Settled during current year:	39	935,482				24,243			39	959,725
18.1 By payment in full .....	47	937,552				24,243			47	961,795
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	47	937,552				24,243			47	961,795
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	47	937,552				24,243			47	961,795
19. Unpaid Dec. 31, current year (16+17-18.6) .....	2	267,716							2	267,716
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,660	378,036,793	(a)		41	65,352,369			1,701	443,389,162
21. Issued during year .....	12	13,369,198			523	31,189,514			535	44,558,712
22. Other changes to in force (Net) .....	(135)	(56,108,038)			(489)	(9,791,852)			(624)	(65,899,890)
23. In force December 31 of current year .....	1,537	335,297,953	(a)		75	86,750,031			1,612	422,047,984

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	918,691	930,445		910,076	898,013
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	2,935	2,935		1,519	1,519
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) .....	2,935	2,935		1,519	1,519
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	921,625	933,379		911,595	899,533

(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 328



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2022

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 .....	57,089,008		128,772,779		185,861,787
2. Annuity considerations .....	273,505,736		232,353,482		505,859,218
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	330,594,744		361,126,262		691,721,005
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	1,240,834				1,240,834
6.2 Applied to pay renewal premiums .....	1,008,058				1,008,058
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	1,798,132				1,798,132
6.4 Other .....	(25,935,523)		(400)		(25,935,923)
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	(21,888,499)		(400)		(21,888,899)
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) .....	(21,888,499)		(400)		(21,888,899)
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	60,119,184		3,169,150		63,288,335
10. Matured endowments .....	50,544				50,544
11. Annuity benefits .....	80,731,054		24,768,189		105,499,243
12. Surrender values and withdrawals for life contracts ..	377,446,287		203,573,397		581,019,684
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	524,492				524,492
15. Totals .....	518,871,562		231,510,736		750,382,299
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	204	7,173,716			1	20,778			205	7,194,494
17. Incurred during current year Settled during current year:	1,577	62,777,193			29	3,183,729			1,606	65,960,922
18.1 By payment in full .....	1,662	58,135,721			30	3,027,384			1,692	61,163,105
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1,662	58,135,721			30	3,027,384			1,692	61,163,105
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1,662	58,135,721			30	3,027,384			1,692	61,163,105
19. Unpaid Dec. 31, current year (16+17-18.6) .....	119	11,815,188				177,123			119	11,992,311
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	70,381	6,045,358,112	(a)		742	859,450,889			71,123	6,904,809,001
21. Issued during year .....	56	76,518,451			893	114,803,308			949	191,321,759
22. Other changes to in force (Net) .....	(4,127)	(435,284,464)			(822)	(38,522,888)			(4,949)	(473,807,353)
23. In force December 31 of current year .....	66,310	5,686,592,099	(a)		813	935,731,309			67,123	6,622,323,408

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	18,656,416	18,921,788		12,488,587	8,676,773
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					(579,128)
25.2 Guaranteed renewable (b) .....	233,479	233,479		204,190	204,190
25.3 Non-renewable for stated reasons only (b) .....	1,169	1,169		361	361
25.4 Other accident only .....					
25.5 All other (b) .....	56	56			
25.6 Totals (sum of Lines 25.1 to 25.5) .....	234,704	234,704		204,552	(374,577)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	18,891,120	19,156,492		12,693,139	8,302,196

(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 2,483





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2022

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 .....	2,103,307		3,880,979		5,984,286
2. Annuity considerations .....	42,609,444		15,183,824		57,793,268
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	44,712,751		19,064,803		63,777,554
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	115,939				115,939
6.2 Applied to pay renewal premiums .....	90,767				90,767
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	112,880				112,880
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	319,587				319,587
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) .....	319,587				319,587
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,099,285		(423)		1,098,861
10. Matured endowments .....					
11. Annuity benefits .....	8,591,513		1,035,051		9,626,564
12. Surrender values and withdrawals for life contracts ..	28,597,851		10,892,092		39,489,943
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	49,065				49,065
15. Totals .....	38,337,714		11,926,720		50,264,434
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	21	881,175			2	2,563			23	883,738
17. Incurred during current year .....	54	1,099,285				2,618			54	1,101,903
Settled during current year:										
18.1 By payment in full .....	74	1,939,112			2	5,181			76	1,944,293
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	74	1,939,112			2	5,181			76	1,944,293
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	74	1,939,112			2	5,181			76	1,944,293
19. Unpaid Dec. 31, current year (16+17-18.6) .....	1	41,347							1	41,347
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	3,901	384,297,151	(a)		5	9,170,559			3,906	393,467,710
21. Issued during year .....	1	250,000			36	1,579,573			37	1,829,573
22. Other changes to in force (Net) .....	(256)	(42,627,568)			(36)	(873,108)			(292)	(43,500,676)
23. In force December 31 of current year .....	3,646	341,919,583	(a)		5	9,877,024			3,651	351,796,607

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	890,179	904,305		507,584	271,323
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	890,179	904,305		507,584	271,323

(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 57 .



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2022

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 .....	8,057,643		10,358,349		18,415,992
2. Annuity considerations .....	78,810,437		16,777,818		95,588,255
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	86,868,080		27,136,167		114,004,247
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	134,594				134,594
6.2 Applied to pay renewal premiums .....	104,441				104,441
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	229,666				229,666
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	468,701				468,701
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) .....	468,701				468,701
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,230,500		84,888		7,315,388
10. Matured endowments .....	2,982				2,982
11. Annuity benefits .....	18,472,610		2,362,635		20,835,245
12. Surrender values and withdrawals for life contracts ..	92,019,646		21,527,498		113,547,144
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	110,111				110,111
15. Totals .....	117,835,848		23,975,021		141,810,870
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	22	669,938							22	669,938
17. Incurred during current year .....	251	7,224,834			3	85,484			254	7,310,318
Settled during current year:										
18.1 By payment in full .....	253	7,529,558			3	85,484			256	7,615,043
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	253	7,529,558			3	85,484			256	7,615,043
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	253	7,529,558			3	85,484			256	7,615,043
19. Unpaid Dec. 31, current year (16+17-18.6) .....	20	365,213							20	365,213
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	9,247	837,459,484	(a)		32	59,943,626			9,279	897,403,110
21. Issued during year .....	1	653,738			724	21,125,419			725	21,779,157
22. Other changes to in force (Net) .....	(527)	(70,807,279)			(718)	(4,788,044)			(1,245)	(75,595,323)
23. In force December 31 of current year .....	8,721	767,305,943	(a)		38	76,281,001			8,759	843,586,944

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	9,979,154	10,191,037		9,015,348	8,631,678
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	62,427	62,427		19,895	19,895
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) .....	62,427	62,427		19,895	19,895
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	10,041,580	10,253,463		9,035,243	8,651,573

(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 1,346



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2022

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 .....	334,966		7,775		342,741
2. Annuity considerations .....	16,314,940		1,531,173		17,846,113
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	16,649,906		1,538,948		18,188,854
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	3,129				3,129
6.2 Applied to pay renewal premiums .....	3,652				3,652
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	9,098				9,098
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	15,879				15,879
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) .....	15,879				15,879
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	338,500		485		338,986
10. Matured endowments .....					
11. Annuity benefits .....	1,179,559		884,545		2,064,104
12. Surrender values and withdrawals for life contracts ..	6,286,124		1,591,107		7,877,231
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	2				2
15. Totals .....	7,804,185		2,476,137		10,280,322
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....	3	338,500							3	338,500
Settled during current year:										
18.1 By payment in full .....	3	338,500							3	338,500
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	3	338,500							3	338,500
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	3	338,500							3	338,500
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	439	97,504,089	(a)		3	6,175,167			442	103,679,256
21. Issued during year .....	1	484,907			127	4,799,608			128	5,284,515
22. Other changes to in force (Net) .....	(48)	(11,227,135)			(126)	(2,434,478)			(174)	(13,661,613)
23. In force December 31 of current year .....	392	86,761,861	(a)		4	8,540,297			396	95,302,158

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	571,573	561,999		718,560	642,551
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	571,573	561,999		718,560	642,551

(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 122



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2022

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 .....	8,259,163		14,579,768		22,838,931
2. Annuity considerations .....	120,492,437		34,006,477		154,498,913
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4)	128,751,600		48,586,245		177,337,845
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	122,919				122,919
6.2 Applied to pay renewal premiums .....	150,045				150,045
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	266,327				266,327
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	539,292				539,292
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)	539,292				539,292
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	7,544,293		1,443,993		8,988,287
10. Matured endowments .....	2,000				2,000
11. Annuity benefits .....	23,230,763		9,091,838		32,322,600
12. Surrender values and withdrawals for life contracts ..	80,408,355		53,786,312		134,194,668
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	101,988				101,988
15. Totals	111,287,399		64,322,144		175,609,543
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	18	373,525				55,222			18	428,747
17. Incurred during current year Settled during current year:	160	7,472,293			4	1,397,073			164	8,869,366
18.1 By payment in full .....	168	7,608,460			4	1,449,446			172	9,057,906
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	168	7,608,460			4	1,449,446			172	9,057,906
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	168	7,608,460			4	1,449,446			172	9,057,906
19. Unpaid Dec. 31, current year (16+17-18.6)	10	237,358				2,849			10	240,207
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	7,099	790,415,617	(a)		305	284,401,760			7,404	1,074,817,377
21. Issued during year .....	2	1,171,550			1,415	55,376,795			1,417	56,548,345
22. Other changes to in force (Net) .....	(406)	(68,592,358)			(1,380)	(27,028,629)			(1,786)	(95,620,987)
23. In force December 31 of current year	6,695	722,994,809	(a)		340	312,749,926			7,035	1,035,744,735

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	8,723,793	8,795,800		6,056,865	5,457,130
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	16,772	16,772		26,205	26,205
25.3 Non-renewable for stated reasons only (b) .....	123	123			
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	16,895	16,895		26,205	26,205
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	8,740,688	8,812,695		6,083,070	5,483,335

(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 1,787



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2022

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 .....	25,652,423		77,582,272		103,234,695
2. Annuity considerations .....	408,254,686		287,586,240		695,840,927
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	433,907,110		365,168,513		799,075,622
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	376,121				376,121
6.2 Applied to pay renewal premiums .....	366,802				366,802
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	702,358				702,358
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,445,282				1,445,282
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) .....	1,445,282				1,445,282
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	22,851,832		5,394,452		28,246,284
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	70,294,013		24,108,596		94,402,609
12. Surrender values and withdrawals for life contracts ..	321,532,730		303,435,342		624,968,072
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	67,395				67,395
15. Totals .....	414,746,969		332,938,391		747,685,360
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	37	2,810,749			1	1,084,965			38	3,895,714
17. Incurred during current year .....	173	22,771,033			2	4,738,228			175	27,509,260
Settled during current year:										
18.1 By payment in full .....	204	24,973,155			2	5,823,193			206	30,796,348
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	204	24,973,155			2	5,823,193			206	30,796,348
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	204	24,973,155			2	5,823,193			206	30,796,348
19. Unpaid Dec. 31, current year (16+17-18.6) .....	6	608,627			1				7	608,627
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	14,075	3,405,075,791	(a)		1,722	4,339,031,745			15,797	7,744,107,536
21. Issued during year .....	41	37,924,679			9,644	529,752,206			9,685	567,676,885
22. Other changes to in force (Net) .....	(856)	(296,690,802)			(9,255)	(207,916,414)			(10,111)	(504,607,216)
23. In force December 31 of current year .....	13,260	3,146,309,668	(a)		2,111	4,660,867,537			15,371	7,807,177,205

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	52,668,307	59,126,848		39,126,103	38,930,729
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	(308)	(308)			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	12,089	12,089		2,896	2,896
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) .....	12,089	12,089		2,896	2,896
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	52,680,088	59,138,630		39,128,999	38,933,625

(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 14,018



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2022

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 .....	1,746,914		4,260,061		6,006,975
2. Annuity considerations .....	40,627,259		8,829,178		49,456,437
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	42,374,173		13,089,239		55,463,412
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	12,782				12,782
6.2 Applied to pay renewal premiums .....	22,514				22,514
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	11,923				11,923
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	47,219				47,219
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) .....	47,219				47,219
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	409,641		3,895		413,536
10. Matured endowments .....					
11. Annuity benefits .....	7,086,975		411,285		7,498,260
12. Surrender values and withdrawals for life contracts ..	360,386,183		7,489,889		367,876,072
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1,314				1,314
15. Totals .....	367,884,112		7,905,070		375,789,182
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	3	15,967							3	15,967
17. Incurred during current year Settled during current year:	16	409,641				288			16	409,929
18.1 By payment in full .....	19	425,608				288			19	425,896
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	19	425,608				288			19	425,896
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	19	425,608				288			19	425,896
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	637	173,470,861	(a)		25	31,414,699			662	204,885,560
21. Issued during year .....					471	43,772,527			471	43,772,527
22. Other changes to in force (Net) .....	(36)	(11,390,678)			(425)	(13,373,612)			(461)	(24,764,290)
23. In force December 31 of current year .....	601	162,080,183	(a)		71	61,813,614			672	223,893,797

(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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	5,380,188	5,391,758		1,947,282	2,390,681
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	5,380,188	5,391,758		1,947,282	2,390,681

(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 558



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	911,794		286,641		1,198,435
2. Annuity considerations .....	13,345,525		14,097,247		27,442,773
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	14,257,319		14,383,888		28,641,208
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	43,904				43,904
6.2 Applied to pay renewal premiums .....	48,739				48,739
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	117,320				117,320
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	209,964				209,964
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) .....	209,964				209,964
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	1,412,690		15,199		1,427,889
10. Matured endowments .....	27,064				27,064
11. Annuity benefits .....	4,084,602		581,209		4,665,811
12. Surrender values and withdrawals for life contracts ..	14,250,900		11,141,381		25,392,281
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	7,909				7,909
15. Totals .....	19,783,166		11,737,789		31,520,955
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	9	85,623							9	85,623
17. Incurred during current year .....	56	1,412,690			2	15,199			58	1,427,889
Settled during current year:										
18.1 By payment in full .....	63	1,461,486			2	15,199			65	1,476,685
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	63	1,461,486			2	15,199			65	1,476,685
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	63	1,461,486			2	15,199			65	1,476,685
19. Unpaid Dec. 31, current year (16+17-18.6) .....	2	36,827							2	36,827
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,452	138,049,932	(a)		2	2,106,797			2,454	140,156,729
21. Issued during year .....					26	1,229,700			26	1,229,700
22. Other changes to in force (Net) .....	(146)	(10,976,222)			(26)	100,314,528			(172)	89,338,306
23. In force December 31 of current year .....	2,306	127,073,710	(a)		2	103,651,025			2,308	230,724,735

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,048,228	2,051,071		2,973,910	3,185,621
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	3,823	3,823			
25.2 Guaranteed renewable (b) .....	13,679	13,679		490	490
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) .....	17,503	17,503		490	490
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,065,731	2,068,574		2,974,400	3,186,111

(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 3



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2022

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 .....	16,420,701		16,909,921		33,330,622
2. Annuity considerations .....	118,453,025		85,153,101		203,606,126
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	134,873,726		102,063,022		236,936,748
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	314,811		13		314,824
6.2 Applied to pay renewal premiums .....	223,528				223,528
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	555,998				555,998
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	1,094,337		13		1,094,350
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) .....	1,094,337		13		1,094,350
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	18,098,390		236,605		18,334,994
10. Matured endowments .....	27,667				27,667
11. Annuity benefits .....	27,972,920		8,128,557		36,101,476
12. Surrender values and withdrawals for life contracts ..	121,022,999		68,888,112		189,911,111
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	292,992				292,992
15. Totals .....	167,414,967		77,253,273		244,668,241
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	51	3,977,863			2	5,223			53	3,983,086
17. Incurred during current year .....	500	18,098,390			8	254,499			508	18,352,889
Settled during current year:										
18.1 By payment in full .....	517	20,785,799			10	259,722			527	21,045,521
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	517	20,785,799			10	259,722			527	21,045,521
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	517	20,785,799			10	259,722			527	21,045,521
19. Unpaid Dec. 31, current year (16+17-18.6) .....	34	1,290,453							34	1,290,453
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year .....	25,011	2,154,012,209	(a)		34	149,330,700			25,045	2,303,342,909
21. Issued during year .....	23	10,470,320			767	29,305,233			790	39,775,553
22. Other changes to in force (Net) .....	(1,391)	(164,958,938)			(766)	(112,718,425)			(2,157)	(277,677,363)
23. In force December 31 of current year .....	23,643	1,999,523,591	(a)		35	65,917,508			23,678	2,065,441,099

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	9,197,779	8,989,086		4,393,126	3,429,512
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	(104)	(104)			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	124,725	124,725		97,975	97,975
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) .....	124,725	124,725		97,975	97,975
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	9,322,400	9,113,706		4,491,101	3,527,487

(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 1,802





ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2022

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 .....	2,819,533		4,220,099		7,039,631
2. Annuity considerations .....	164,919,768		77,980,670		242,900,439
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	167,739,301		82,200,769		249,940,070
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	78,700				78,700
6.2 Applied to pay renewal premiums .....	77,149				77,149
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	118,638				118,638
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	274,487				274,487
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) .....	274,487				274,487
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,431,886		14,638		2,446,524
10. Matured endowments .....					
11. Annuity benefits .....	31,900,839		7,932,920		39,833,759
12. Surrender values and withdrawals for life contracts ..	103,265,501		72,027,133		175,292,634
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	321				321
15. Totals .....	137,598,547		79,974,691		217,573,238
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	7	532,558			(1)				6	532,558
17. Incurred during current year .....	36	2,431,886				16,781			36	2,448,667
Settled during current year:										
18.1 By payment in full .....	40	2,803,216				13,141			40	2,816,357
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	40	2,803,216				13,141			40	2,816,357
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	40	2,803,216				13,141			40	2,816,357
19. Unpaid Dec. 31, current year (16+17-18.6) .....	3	161,228			(1)	3,640			2	164,868
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	2,381	410,777,276	(a)		33	46,459,214			2,414	457,236,490
21. Issued during year .....	1	74,400			696	32,447,696			697	32,522,096
22. Other changes to in force (Net) .....	(122)	(29,050,490)			(698)	(19,548,649)			(820)	(48,599,139)
23. In force December 31 of current year .....	2,260	381,801,186	(a)		31	59,358,261			2,291	441,159,447

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,910,765	1,922,310		1,073,021	861,548
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	(58)	(58)			
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....	6,672	6,672		272	272
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) .....	6,672	6,672		272	272
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,917,379	1,928,925		1,073,293	861,820

(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 500



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2022

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 .....	9,449,342		156,620		9,605,962
2. Annuity considerations .....	39,340,054		10,069,591		49,409,645
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	48,789,396		10,226,211		59,015,607
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	63,556				63,556
6.2 Applied to pay renewal premiums .....	24,616				24,616
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	151,166				151,166
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	239,337				239,337
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) .....	239,337				239,337
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	6,564,680		(6,204)		6,558,476
10. Matured endowments .....	1,000				1,000
11. Annuity benefits .....	7,497,550		2,232,355		9,729,906
12. Surrender values and withdrawals for life contracts ..	34,072,119		11,804,482		45,876,601
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	140,102				140,102
15. Totals .....	48,275,451		14,030,634		62,306,085
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	36	742,009			1				37	742,009
17. Incurred during current year .....	234	6,564,680				1,145			234	6,565,824
Settled during current year:										
18.1 By payment in full .....	235	6,974,879				1,145			235	6,976,024
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	235	6,974,879				1,145			235	6,976,024
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	235	6,974,879				1,145			235	6,976,024
19. Unpaid Dec. 31, current year (16+17-18.6) .....	35	331,809			1				36	331,809
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	9,134	482,184,594	(a)		1	19,334,950			9,135	501,519,544
21. Issued during year .....					248	6,519,710			248	6,519,710
22. Other changes to in force (Net) .....	(524)	(31,446,592)			(245)	22,537,508			(769)	(8,909,084)
23. In force December 31 of current year .....	8,610	450,738,002	(a)		4	48,392,168			8,614	499,130,170

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	17,788,096	17,802,323		13,272,756	12,373,475
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	80,854	80,854		64,600	64,600
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) .....	80,854	80,854		64,600	64,600
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	17,868,950	17,883,177		13,337,356	12,438,075

(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 751



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2022

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 .....	6,955,651		12,839,318		19,794,969
2. Annuity considerations .....	116,782,483		73,832,168		190,614,651
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	123,738,134		86,671,486		210,409,620
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	72,109				72,109
6.2 Applied to pay renewal premiums .....	97,155				97,155
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	120,504				120,504
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	289,769				289,769
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) .....	289,769				289,769
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	2,198,010		76,704		2,274,714
10. Matured endowments .....					
11. Annuity benefits .....	21,108,932		17,770,003		38,878,935
12. Surrender values and withdrawals for life contracts ..	102,961,609		140,915,659		243,877,267
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	16,263				16,263
15. Totals .....	126,284,815		158,762,365		285,047,180
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	14	653,140							14	653,140
17. Incurred during current year .....	48	1,994,093			7	77,116			55	2,071,209
Settled during current year:										
18.1 By payment in full .....	58	2,408,535			7	75,034			65	2,483,569
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	58	2,408,535			7	75,034			65	2,483,569
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	58	2,408,535			7	75,034			65	2,483,569
19. Unpaid Dec. 31, current year (16+17-18.6) .....	4	238,698				2,082			4	240,780
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	3,958	501,983,312	(a)		78	113,068,424			4,036	615,051,736
21. Issued during year .....	23	11,501,207			422	19,086,800			445	30,588,007
22. Other changes to in force (Net) .....	(150)	(21,800,186)			(416)	(33,590,329)			(566)	(55,390,515)
23. In force December 31 of current year .....	3,831	491,684,333	(a)		84	98,564,895			3,915	590,249,228

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	6,243,302	6,356,048		4,930,549	3,459,697
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	6,243,302	6,356,048		4,930,549	3,459,697

(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 466



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	727,793		11,003		738,796
2. Annuity considerations .....	8,320,996		1,637,837		9,958,832
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	9,048,789		1,648,840		10,697,629
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	3,803				3,803
6.2 Applied to pay renewal premiums .....	26,822				26,822
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	11,107				11,107
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	41,732				41,732
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) .....	41,732				41,732
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	3,232,494		23,659		3,256,153
10. Matured endowments .....					
11. Annuity benefits .....	1,028,413		230,862		1,259,276
12. Surrender values and withdrawals for life contracts ..	5,710,205		2,691,261		8,401,465
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	2,674				2,674
15. Totals .....	9,973,787		2,945,782		12,919,569
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	1	1,000							1	1,000
17. Incurred during current year .....	8	3,232,494							8	3,232,494
Settled during current year:										
18.1 By payment in full .....	9	3,233,494							9	3,233,494
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	9	3,233,494							9	3,233,494
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	9	3,233,494							9	3,233,494
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	308	43,967,706	(a)		7	5,346,250			315	49,313,956
21. Issued during year .....					254	7,356,814			254	7,356,814
22. Other changes to in force (Net) .....	(29)	2,324,446			(243)	(3,170,471)			(272)	(846,025)
23. In force December 31 of current year .....	279	46,292,152	(a)		18	9,532,593			297	55,824,745

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	4,158,576	4,153,218		5,449,622	5,175,082
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (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) .....	4,158,576	4,153,218		5,449,622	5,175,082

(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 213



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2022

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 .....	35,604				35,604
2.	Annuity considerations .....					
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	35,604				35,604
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1	Paid in cash or left on deposit .....	252				252
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) .....	252				252
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) .....	252				252
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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 .....	15	6,451,416	(a)	1	221,939			16	6,673,355
21.	Issued during year .....									
22.	Other changes to in force (Net) .....		377,396			(13,647)				363,749
23.	In force December 31 of current year .....	15	6,828,812	(a)	1	208,292			16	7,037,104

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam  
NAIC Group Code 0140

LIFE INSURANCE

DURING THE YEAR 2022  
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 .....	139				139
2.	Annuity considerations .....			68,522		68,522
3.	Deposit-type contract funds .....		XXX		XXX	
4.	Other considerations .....					
5.	Totals (Sum of Lines 1 to 4) .....	139		68,522		68,661
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
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 .....	157,377		14,827		172,204
12.	Surrender values and withdrawals for life contracts ..	743,072		110,815		853,886
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14.	All other benefits, except accident and health .....					
15.	Totals .....	900,449		125,641		1,026,090
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	30,001	(a)					2	30,001
21.	Issued during year .....									
22.	Other changes to in force (Net) .....									
23.	In force December 31 of current year .....	2	30,001	(a)					2	30,001

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2022

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 .....	236,433				236,433
2. Annuity considerations .....	128,284,556		4,918,342		133,202,898
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4)	128,520,989		4,918,342		133,439,331
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	2,397				2,397
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	597				597
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	2,995				2,995
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)	2,995				2,995
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	122,496				122,496
10. Matured endowments .....					
11. Annuity benefits .....	4,080,690		399,759		4,480,449
12. Surrender values and withdrawals for life contracts ..	25,151,965		9,182,390		34,334,355
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	1				1
15. Totals	29,355,151		9,582,149		38,937,300
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	1	22,818							1	22,818
17. Incurred during current year Settled during current year:		122,496								122,496
18.1 By payment in full .....	1	119,121							1	119,121
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	1	119,121							1	119,121
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	1	119,121							1	119,121
19. Unpaid Dec. 31, current year (16+17-18.6)		26,193								26,193
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	65	28,655,811	(a)		(7)				58	28,655,811
21. Issued during year .....										
22. Other changes to in force (Net) .....		2,846,966								2,846,966
23. In force December 31 of current year	65	31,502,777	(a)		(7)				58	31,502,777

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

DURING THE YEAR 2022

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 .....	17,216				17,216
2. Annuity considerations .....	424,095		185,514		609,608
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	441,310		185,514		626,824
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	394				394
6.2 Applied to pay renewal premiums .....	3,738				3,738
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	6,411				6,411
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	10,543				10,543
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) .....	10,543				10,543
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....	52,819		2,452		55,271
12. Surrender values and withdrawals for life contracts ..	488,308		17,483		505,791
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	541,127		19,935		561,062
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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 .....	24	4,317,295	(a)						24	4,317,295
21. Issued during year .....										
22. Other changes to in force (Net) .....	(1)	160							(1)	160
23. In force December 31 of current year .....	23	4,317,455	(a)						23	4,317,455

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2022

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 .....					
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/REFUNDS TO MEMBERS					
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 ..	8,519				8,519
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....	8,519				8,519
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF  Canada

DURING THE YEAR  2022

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 .....	48,326				48,326
2. Annuity considerations .....			1,115,153		1,115,153
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	48,326		1,115,153		1,163,479
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	10,133				10,133
6.2 Applied to pay renewal premiums .....	7,919				7,919
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	9,730				9,730
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	27,782				27,782
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) .....	27,782				27,782
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	390,550				390,550
10. Matured endowments .....					
11. Annuity benefits .....	105,898		28,020		133,918
12. Surrender values and withdrawals for life contracts ..	350,087		720,326		1,070,413
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	258				258
15. Totals .....	846,793		748,347		1,595,139
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....		110,496								110,496
Settled during current year:										
18.1 By payment in full .....		2,000								2,000
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		2,000								2,000
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		2,000								2,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....		108,496								108,496
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	350	16,387,834	(a)		1	59,812			351	16,447,646
21. Issued during year .....										
22. Other changes to in force (Net) .....	(35)	(3,228,547)				(10,130)			(35)	(3,238,677)
23. In force December 31 of current year .....	315	13,159,287	(a)		1	49,682			316	13,208,969

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2022

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 .....					
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/REFUNDS TO MEMBERS					
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	1	7,568							1	7,568
17. Incurred during current year .....	13	106,304							13	106,304
Settled during current year:										
18.1 By payment in full .....	14	108,872							14	108,872
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	14	108,872							14	108,872
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	14	108,872							14	108,872
19. Unpaid Dec. 31, current year (16+17-18.6) .....		5,000								5,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	276	53,945,398	(a)			150,000			276	54,095,398
21. Issued during year .....					3	115,440			3	115,440
22. Other changes to in force (Net) .....	(4)	7,483,059			(3)	(77,940)			(7)	7,405,119
23. In force December 31 of current year .....	272	61,428,457	(a)			187,500			272	61,615,957

(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 Policyholder Dividends Paid, Refunds to Members 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/certificates (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 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2022

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 .....	649,087,486		2,805,765,962		3,454,853,448
2. Annuity considerations .....	6,338,689,806		5,487,576,460		11,826,266,266
3. Deposit-type contract funds .....	10,272,116,331	XXX		XXX	10,272,116,331
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....	17,259,893,623		8,293,342,422		25,553,236,045
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....	7,876,481		153		7,876,634
6.2 Applied to pay renewal premiums .....	7,928,454				7,928,454
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	14,242,495		84		14,242,579
6.4 Other .....	(827,521)		(100)		(827,621)
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	29,219,908		138		29,220,046
Annuities:					
7.1 Paid in cash or left on deposit .....	(3,371)				(3,371)
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	(3,371)				(3,371)
8. Grand Totals (Lines 6.5 plus 7.4) .....	29,216,537		138		29,216,675
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....	520,664,581		223,938,291		744,602,872
10. Matured endowments .....	440,031				440,031
11. Annuity benefits .....	1,385,719,689		703,054,827		2,088,774,516
12. Surrender values and withdrawals for life contracts ..	6,403,409,321		6,675,321,431		13,078,730,752
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....	3,579,622		24,379		3,604,001
15. Totals .....	8,313,813,244		7,602,338,928		15,916,152,172
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. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....	1,324	88,317,367			45	4,813,777			1,369	93,131,144
17. Incurred during current year Settled during current year:	9,112	520,874,092			184	205,847,114			9,296	726,721,207
18.1 By payment in full .....	9,695	546,466,412			209	205,992,258			9,904	752,458,669
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	9,695	546,466,412			209	205,992,258			9,904	752,458,669
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	9,695	546,466,412			209	205,992,258			9,904	752,458,669
19. Unpaid Dec. 31, current year (16+17-18.6) .....	741	62,725,048			20	4,668,634			761	67,393,681
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	484,420	79,218,670,652	(a)		38,585	64,839,361,893			523,005	144,058,032,545
21. Issued during year .....	3,128	1,620,467,938			55,451	12,334,933,694			58,579	13,955,401,632
22. Other changes to in force (Net) .....	(28,338)	(6,142,804,483)			(48,293)	(6,753,813,600)			(76,631)	(12,896,618,083)
23. In force December 31 of current year .....	459,210	74,696,334,107	(a)		45,743	70,420,481,987			504,953	145,116,816,094

(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	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	422,229,962	434,067,034	35,109	302,038,163	269,468,571
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....	(625)	(638)		2,250	2,262
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....	367,484	367,659		2,748,579	2,084,920
25.2 Guaranteed renewable (b) .....	1,989,237	2,076,195		1,560,307	1,503,529
25.3 Non-renewable for stated reasons only (b) .....	3,522	3,522		80,716	97,612
25.4 Other accident only .....					
25.5 All other (b) .....					(194)
25.6 Totals (sum of Lines 25.1 to 25.5) .....	2,360,243	2,447,376		4,389,602	3,685,867
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	424,589,579	436,513,773	35,109	306,430,015	273,156,700

(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 67,075

ANNUAL STATEMENT FOR THE YEAR 2022 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 .....		16,934,038
2. Current year's realized pre-tax capital gains/(losses) of \$ ..... (130,608,089) transferred into the reserve net of taxes of \$ ..... (27,427,699) .....		(103,180,390)
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) .....		(86,246,352)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....		(11,158,461)
6. Reserve as of December 31, current year (Line 4 minus Line 5)		(75,087,891)

AMORTIZATION				
Year of Amortization	1  Reserve as of December 31, Prior Year	2  Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3  Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4  Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2022 .....	118,890	(11,277,351)		(11,158,461)
2. 2023 .....	705,948	(13,837,933)		(13,131,985)
3. 2024 .....	1,502,713	(13,207,146)		(11,704,433)
4. 2025 .....	2,094,156	(12,265,857)		(10,171,701)
5. 2026 .....	2,006,481	(11,361,008)		(9,354,527)
6. 2027 .....	1,379,485	(10,474,246)		(9,094,761)
7. 2028 .....	980,212	(8,999,802)		(8,019,590)
8. 2029 .....	716,024	(7,261,923)		(6,545,899)
9. 2030 .....	385,205	(5,379,356)		(4,994,151)
10. 2031 .....	225,492	(3,418,565)		(3,193,073)
11. 2032 .....	152,793	(1,323,387)		(1,170,594)
12. 2033 .....	335,628	(303,660)		31,968
13. 2034 .....	508,767	(282,479)		226,288
14. 2035 .....	552,158	(267,323)		284,835
15. 2036 .....	583,525	(245,138)		338,387
16. 2037 .....	558,773	(226,710)		332,063
17. 2038 .....	502,899	(221,656)		281,243
18. 2039 .....	485,357	(227,507)		257,850
19. 2040 .....	521,083	(238,809)		282,274
20. 2041 .....	459,075	(248,963)		210,112
21. 2042 .....	98,023	(254,757)		(156,734)
22. 2043 .....	287,498	(257,686)		29,812
23. 2044 .....	312,037	(255,624)		56,413
24. 2045 .....	304,224	(245,875)		58,349
25. 2046 .....	343,616	(246,054)		97,562
26. 2047 .....	299,043	(237,394)		61,649
27. 2048 .....	212,754	(216,511)		(3,757)
28. 2049 .....	98,863	(172,324)		(73,461)
29. 2050 .....	155,087	(123,720)		31,367
30. 2051 .....	48,229	(75,115)		(26,886)
31. 2052 and Later		(26,511)		(26,511)
32. Total (Lines 1 to 31)	16,934,038	(103,180,390)		(86,246,352)

ANNUAL STATEMENT FOR THE YEAR 2022 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 .....	357,371,923	81,280,810	438,652,733	18,335,971	153,235,593	171,571,564	610,224,297
2. Realized capital gains/(losses) net of taxes - General Account .....	(27,582,299)	2,734,564	(24,847,735)	(98)	2,353,681	2,353,583	(22,494,152)
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....	(12,204,256)	3,022,248	(9,182,008)	(13,420,970)	60,809,200	47,388,230	38,206,222
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 .....	92,020,253	18,500,342	110,520,595		713,949	713,949	111,234,544
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	409,605,621	105,537,964	515,143,585	4,914,903	217,112,423	222,027,326	737,170,911
9. Maximum reserve .....	438,801,410	86,611,249	525,412,659	21,186,388	238,451,217	259,637,604	785,050,263
10. Reserve objective .....	262,877,255	66,522,903	329,400,159	20,603,751	237,657,940	258,261,691	587,661,849
11. 20% of (Line 10 - Line 8) .....	(29,345,673)	(7,803,012)	(37,148,685)	3,137,770	4,109,103	7,246,873	(29,901,812)
12. Balance before transfers (Lines 8 + 11) .....	380,259,947	97,734,952	477,994,900	8,052,673	221,221,526	229,274,199	707,269,098
13. Transfers .....	11,123,703	(11,123,703)					
14. Voluntary contribution .....							
15. Adjustment down to maximum/up to zero .....							
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	391,383,650	86,611,249	477,994,900	8,052,673	221,221,526	229,274,199	707,269,098

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

Line Num- ber	NAIC Desig- nation	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 .....	7, 133, 385	XXX	XXX	7, 133, 385	0.0000		0.0000		0.0000	
2.1	1	NAIC Designation Category 1.A .....	5, 473, 494, 236	XXX	XXX	5, 473, 494, 236	0.0002	1, 094, 699	0.0007	3, 831, 446	0.0013	7, 115, 543
2.2	1	NAIC Designation Category 1.B .....	634, 173, 263	XXX	XXX	634, 173, 263	0.0004	253, 669	0.0011	697, 591	0.0023	1, 458, 599
2.3	1	NAIC Designation Category 1.C .....	1, 922, 597, 823	XXX	XXX	1, 922, 597, 823	0.0006	1, 153, 559	0.0018	3, 460, 676	0.0035	6, 729, 092
2.4	1	NAIC Designation Category 1.D .....	2, 167, 386, 527	XXX	XXX	2, 167, 386, 527	0.0007	1, 517, 171	0.0022	4, 768, 250	0.0044	9, 536, 501
2.5	1	NAIC Designation Category 1.E .....	2, 424, 835, 063	XXX	XXX	2, 424, 835, 063	0.0009	2, 182, 352	0.0027	6, 547, 055	0.0055	13, 336, 593
2.6	1	NAIC Designation Category 1.F .....	4, 191, 697, 428	XXX	XXX	4, 191, 697, 428	0.0011	4, 610, 867	0.0034	14, 251, 771	0.0068	28, 503, 543
2.7	1	NAIC Designation Category 1.G .....	4, 252, 383, 689	XXX	XXX	4, 252, 383, 689	0.0014	5, 953, 337	0.0042	17, 860, 011	0.0085	36, 145, 261
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7) .....	21,066,568,029	XXX	XXX	21,066,568,029	XXX	16,765,653	XXX	51,416,800	XXX	102,825,131
3.1	2	NAIC Designation Category 2.A .....	6, 311, 290, 375	XXX	XXX	6, 311, 290, 375	0.0021	13, 253, 710	0.0063	39, 761, 129	0.0105	66, 268, 549
3.2	2	NAIC Designation Category 2.B .....	7, 566, 162, 790	XXX	XXX	7, 566, 162, 790	0.0025	18, 915, 407	0.0076	57, 502, 837	0.0127	96, 090, 267
3.3	2	NAIC Designation Category 2.C .....	3, 363, 746, 129	XXX	XXX	3, 363, 746, 129	0.0036	12, 109, 486	0.0108	36, 328, 458	0.0180	60, 547, 430
3.4		Subtotal NAIC 2 (3.1+3.2+3.3) .....	17,241,199,294	XXX	XXX	17,241,199,294	XXX	44,278,603	XXX	133,592,425	XXX	222,906,247
4.1	3	NAIC Designation Category 3.A .....	537, 956, 206	XXX	XXX	537, 956, 206	0.0069	3, 711, 898	0.0183	9, 844, 599	0.0262	14, 094, 453
4.2	3	NAIC Designation Category 3.B .....	263, 373, 799	XXX	XXX	263, 373, 799	0.0099	2, 607, 401	0.0264	6, 953, 068	0.0377	9, 929, 192
4.3	3	NAIC Designation Category 3.C .....	489, 662, 968	XXX	XXX	489, 662, 968	0.0131	6, 414, 585	0.0350	17, 138, 204	0.0500	24, 483, 148
4.4		Subtotal NAIC 3 (4.1+4.2+4.3) .....	1,290,992,973	XXX	XXX	1,290,992,973	XXX	12,733,883	XXX	33,935,871	XXX	48,506,793
5.1	4	NAIC Designation Category 4.A .....	186, 406, 920	XXX	XXX	186, 406, 920	0.0184	3, 429, 887	0.0430	8, 015, 498	0.0615	11, 464, 026
5.2	4	NAIC Designation Category 4.B .....	201, 515, 725	XXX	XXX	201, 515, 725	0.0238	4, 796, 074	0.0555	11, 184, 123	0.0793	15, 980, 197
5.3	4	NAIC Designation Category 4.C .....	123, 965, 940	XXX	XXX	123, 965, 940	0.0310	3, 842, 944	0.0724	8, 975, 134	0.1034	12, 818, 078
5.4		Subtotal NAIC 4 (5.1+5.2+5.3) .....	511,888,585	XXX	XXX	511,888,585	XXX	12,068,906	XXX	28,174,754	XXX	40,262,301
6.1	5	NAIC Designation Category 5.A .....	30, 048, 502	XXX	XXX	30, 048, 502	0.0472	1, 418, 289	0.0846	2, 542, 103	0.1410	4, 236, 839
6.2	5	NAIC Designation Category 5.B .....	42, 009, 939	XXX	XXX	42, 009, 939	0.0663	2, 785, 259	0.1188	4, 990, 781	0.1980	8, 317, 968
6.3	5	NAIC Designation Category 5.C .....	5, 761, 414	XXX	XXX	5, 761, 414	0.0836	481, 654	0.1498	863, 060	0.2496	1, 438, 049
6.4		Subtotal NAIC 5 (6.1+6.2+6.3) .....	77,819,855	XXX	XXX	77,819,855	XXX	4,685,202	XXX	8,395,944	XXX	13,992,856
7.	6	NAIC 6 .....	12, 553, 687	XXX	XXX	12, 553, 687	0.0000		0.2370	2, 975, 224	0.2370	2, 975, 224
8.		Total Unrated Multi-class Securities Acquired by Conversion .		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	40,208,155,808	XXX	XXX	40,208,155,808	XXX	90,532,248	XXX	258,491,018	XXX	431,468,551
PREFERRED STOCKS												
10.	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
11.	2	High Quality .....	14, 970, 333	XXX	XXX	14, 970, 333	0.0021	31, 438	0.0064	95, 810	0.0106	158, 686
12.	3	Medium Quality .....	7, 739, 924	XXX	XXX	7, 739, 924	0.0099	76, 625	0.0263	203, 560	0.0376	291, 021
13.	4	Low Quality .....	6, 230, 423	XXX	XXX	6, 230, 423	0.0245	152, 645	0.0572	356, 380	0.0817	509, 026
14.	5	Lower Quality .....	818, 913	XXX	XXX	818, 913	0.0630	51, 592	0.1128	92, 373	0.1880	153, 956
15.	6	In or Near Default .....	646, 570	XXX	XXX	646, 570	0.0000		0.2370	153, 237	0.2370	153, 237
16.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)	30,406,163	XXX	XXX	30,406,163	XXX	312,300	XXX	901,361	XXX	1,265,925

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

Line Num- ber	NAIC Desig- nation	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)
SHORT-TERM BONDS												
18.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
19.1	1	NAIC Designation Category 1.A .....		XXX	XXX		0.0002		0.0007		0.0013	
19.2	1	NAIC Designation Category 1.B .....		XXX	XXX		0.0004		0.0011		0.0023	
19.3	1	NAIC Designation Category 1.C .....		XXX	XXX		0.0006		0.0018		0.0035	
19.4	1	NAIC Designation Category 1.D .....		XXX	XXX		0.0007		0.0022		0.0044	
19.5	1	NAIC Designation Category 1.E .....		XXX	XXX		0.0009		0.0027		0.0055	
19.6	1	NAIC Designation Category 1.F .....		XXX	XXX		0.0011		0.0034		0.0068	
19.7	1	NAIC Designation Category 1.G .....		XXX	XXX		0.0014		0.0042		0.0085	
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7) .....		XXX	XXX		XXX		XXX		XXX	
20.1	2	NAIC Designation Category 2.A .....		XXX	XXX		0.0021		0.0063		0.0105	
20.2	2	NAIC Designation Category 2.B .....		XXX	XXX		0.0025		0.0076		0.0127	
20.3	2	NAIC Designation Category 2.C .....		XXX	XXX		0.0036		0.0108		0.0180	
20.4		Subtotal NAIC 2 (20.1+20.2+20.3) .....		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A .....		XXX	XXX		0.0069		0.0183		0.0262	
21.2	3	NAIC Designation Category 3.B .....		XXX	XXX		0.0099		0.0264		0.0377	
21.3	3	NAIC Designation Category 3.C .....		XXX	XXX		0.0131		0.0350		0.0500	
21.4		Subtotal NAIC 3 (21.1+21.2+21.3) .....		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A .....		XXX	XXX		0.0184		0.0430		0.0615	
22.2	4	NAIC Designation Category 4.B .....		XXX	XXX		0.0238		0.0555		0.0793	
22.3	4	NAIC Designation Category 4.C .....		XXX	XXX		0.0310		0.0724		0.1034	
22.4		Subtotal NAIC 4 (22.1+22.2+22.3) .....		XXX	XXX		XXX		XXX		XXX	
23.1	5	NAIC Designation Category 5.A .....		XXX	XXX		0.0472		0.0846		0.1410	
23.2	5	NAIC Designation Category 5.B .....		XXX	XXX		0.0663		0.1188		0.1980	
23.3	5	NAIC Designation Category 5.C .....		XXX	XXX		0.0836		0.1498		0.2496	
23.4		Subtotal NAIC 5 (23.1+23.2+23.3) .....		XXX	XXX		XXX		XXX		XXX	
24.	6	NAIC 6 .....		XXX	XXX		0.0000		0.2370		0.2370	
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24) .....		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded .....	29,186,875	XXX	XXX	29,186,875	0.0005	14,593	0.0016	46,699	0.0033	96,317
27.	1	Highest Quality .....	15,757,245	XXX	XXX	15,757,245	0.0005	7,879	0.0016	25,212	0.0033	51,999
28.	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
33.		Total Derivative Instruments .....	44,944,120	XXX	XXX	44,944,120	XXX	22,472	XXX	71,911	XXX	148,316
34.		Total (Lines 9 + 17 + 25 + 33) .....	40,283,506,091	XXX	XXX	40,283,506,091	XXX	90,867,020	XXX	259,464,289	XXX	432,882,792



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

Line Num- ber	NAIC Desig- nation	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)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
36.		Farm Mortgages - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
37.		Farm Mortgages - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
38.		Farm Mortgages - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
39.		Farm Mortgages - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
40.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
41.		Residential Mortgages - All Other .....			XXX		0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality .....	5,322,140,311		XXX	5,322,140,311	0.0011	5,854,354	0.0057	30,336,200	0.0074	39,383,838
44.		Commercial Mortgages - All Other - CM2 - High Quality .....	2,887,326,884		XXX	2,887,326,884	0.0040	11,549,308	0.0114	32,915,526	0.0149	43,021,171
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....	153,074,559		XXX	153,074,559	0.0069	1,056,214	0.0200	3,061,491	0.0257	3,934,016
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
47.		Commercial Mortgages - All Other - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
		Overdue, Not in Process:										
48.		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
49.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50.		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
51.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
52.		Commercial Mortgages - All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure:										
53.		Farm Mortgages .....			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
55.		Residential Mortgages - All Other .....			XXX		0.0000		0.0149		0.0149	
56.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
57.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1942		0.1942	
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	8,362,541,754		XXX	8,362,541,754	XXX	18,459,876	XXX	66,313,217	XXX	86,339,025
59.		Schedule DA Mortgages			XXX		0.0034		0.0114		0.0149	
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	8,362,541,754		XXX	8,362,541,754	XXX	18,459,876	XXX	66,313,217	XXX	86,339,025

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

Line Num- ber	NAIC Desig- nation	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 .....	77,022,703	XXX	XXX	77,022,703	0.0000		0.2431 (a)	18,724,219	0.2431 (a)	18,724,219
2.		Unaffiliated - Private .....	79,972	XXX	XXX	79,972	0.0000		0.1945	15,555	0.1945	15,555
3.		Federal Home Loan Bank .....	161,843,600	XXX	XXX	161,843,600	0.0000		0.0061	987,246	0.0097	1,569,883
4.		Affiliated - Life with AVR .....	3,429,447,563	XXX	XXX	3,429,447,563	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		0.1580 (a)		0.1580 (a)	
13.		Unaffiliated Common Stock - Private .....					0.0000		0.1945		0.1945	
14.		Real Estate .....					(b)		(b)		(b)	
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX		0.0000		0.1580		0.1580	
16.		Affiliated - All Other .....	1,272,267	XXX	XXX	1,272,267	0.0000		0.1945	247,456	0.1945	247,456
17.		Total Common Stock (Sum of Lines 1 through 16)	3,669,666,105			3,669,666,105	XXX		XXX	19,974,476	XXX	20,557,113
REAL ESTATE												
18.		Home Office Property (General Account only) .....					0.0000		0.0912		0.0912	
19.		Investment Properties .....					0.0000		0.0912		0.0912	
20.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1337		0.1337	
21.		Total Real Estate (Sum of Lines 18 through 20)					XXX		XXX		XXX	
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
23.	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
24.	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
25.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
26.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
28.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)		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 Desig- nation	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 PREFERRED STOCKS										
30.	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
31.	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
32.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
33.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
34.	5	Lower Quality.....		XXX	XXX		0.0630		0.1128		0.1880	
35.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
36.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)		XXX	XXX		XXX		XXX		XXX	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
39.		Mortgages - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
40.		Mortgages - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
41.		Mortgages - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
42.		Mortgages - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
43.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
44.		Residential Mortgages - All Other .....		XXX	XXX		0.0015		0.0034		0.0046	
45.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
		Overdue, Not in Process Affiliated:										
46.		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
47.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
48.		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
49.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50.		Commercial Mortgages - All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages .....			XXX		0.0000		0.1942		0.1942	
52.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
53.		Residential Mortgages - All Other .....			XXX		0.0000		0.0149		0.0149	
54.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
55.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1942		0.1942	
56.		Total Affiliated (Sum of Lines 38 through 55) .....			XXX		XXX		XXX		XXX	
57.		Unaffiliated - In Good Standing With Covenants .....			XXX		(c)		(c)		(c)	
58.		Unaffiliated - In Good Standing Defeased With Government Securities .....			XXX		0.0011		0.0057		0.0074	
59.		Unaffiliated - In Good Standing Primarily Senior .....			XXX		0.0040		0.0114		0.0149	
60.		Unaffiliated - In Good Standing All Other .....			XXX		0.0069		0.0200		0.0257	
61.		Unaffiliated - Overdue, Not in Process .....			XXX		0.0480		0.0868		0.1371	
62.		Unaffiliated - In Process of Foreclosure .....			XXX		0.0000		0.1942		0.1942	
63.		Total Unaffiliated (Sum of Lines 57 through 62) .....			XXX		XXX		XXX		XXX	
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)			XXX		XXX		XXX		XXX	

**ASSET VALUATION RESERVE (Continued)**  
**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)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65.		Unaffiliated Public .....		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated Private .....	497,061,369	XXX	XXX	497,061,369	0.0000		0.1945	96,678,436	0.1945	96,678,436
67.		Affiliated Life with AVR .....	51,782,000	XXX	XXX	51,782,000	0.0000		0.0000		0.0000	
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX		0.0000		0.1580		0.1580	
69.		Affiliated Other - All Other .....		XXX	XXX		0.0000		0.1945		0.1945	
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	548,843,369	XXX	XXX	548,843,369	XXX		XXX	96,678,436	XXX	96,678,436
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71.		Home Office Property (General Account only) .....					0.0000		0.0912		0.0912	
72.		Investment Properties .....	752,963,018			752,963,018	0.0000		0.0912	68,670,227	0.0912	68,670,227
73.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1337		0.1337	
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	752,963,018			752,963,018	XXX		XXX	68,670,227	XXX	68,670,227
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75.		Guaranteed Federal Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit .....	107,596,522			107,596,522	0.0063	677,858	0.0120	1,291,158	0.0190	2,044,334
77.		Guaranteed State Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit .....	5,728,681			5,728,681	0.0063	36,091	0.0120	68,744	0.0190	108,845
79.		All Other Low Income Housing Tax Credit .....					0.0273		0.0600		0.0975	
80.		Total LIHTC (Sum of Lines 75 through 79)	113,325,203			113,325,203	XXX	713,949	XXX	1,359,902	XXX	2,153,179
		RESIDUAL TRANCHES OR INTERESTS										
81.		Fixed Income Instruments - Unaffiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
82.		Fixed Income Instruments - Affiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
83.		Common Stock - Unaffiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
84.		Common Stock - Affiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
85.		Preferred Stock - Unaffiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
86.		Preferred Stock - Affiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
87.		Real Estate - Unaffiliated .....					0.0000		0.1580		0.1580	
88.		Real Estate - Affiliated .....					0.0000		0.1580		0.1580	
89.		Mortgage Loans - Unaffiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
90.		Mortgage Loans - Affiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
91.		Other - Unaffiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
92.		Other - Affiliated .....		XXX	XXX		0.0000		0.1580		0.1580	
93.		Total Residual Tranches or Interests (Sum of Lines 81 through 92)					XXX		XXX		XXX	
		ALL OTHER INVESTMENTS										
94.		NAIC 1 Working Capital Finance Investments .....		XXX			0.0000		0.0042		0.0042	
95.		NAIC 2 Working Capital Finance Investments .....		XXX			0.0000		0.0137		0.0137	
96.		Other Invested Assets - Schedule BA .....	281,546,672	XXX		281,546,672	0.0000		0.1580	44,484,374	0.1580	44,484,374
97.		Other Short-Term Invested Assets - Schedule DA .....	167,500,000	XXX		167,500,000	0.0000		0.1580	26,465,000	0.1580	26,465,000
98.		Total All Other (Sum of Lines 94, 95, 96 and 97) .....	449,046,672	XXX		449,046,672	XXX		XXX	70,949,374	XXX	70,949,374
99.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80, 93 and 98)	1,864,178,262			1,864,178,262	XXX	713,949	XXX	237,657,940	XXX	238,451,217

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).  
(b) Determined using the same factors and breakdowns used for directly owned real estate.  
(c) This will be the factor associated with the risk category determined in the company generated worksheet.

Asset Valuation Reserve - Replications (Synthetic) Assets  
**N O N E**

Schedule F - Claims  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT  
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written .....	250,181	XXX	41,452	XXX	208,729	XXX		XXX		XXX		XXX		XXX
2. Premiums earned .....	250,181	XXX	41,452	XXX	208,729	XXX		XXX		XXX		XXX		XXX
3. Incurred claims .....	(1,815,789)	(725.8)	212,583	512.8	347,912	166.7								
4. Cost containment expenses .....														
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	(1,815,789)	(725.8)	212,583	512.8	347,912	166.7								
6. Increase in contract reserves .....	(313,005)	(125.1)	(13,657)	(32.9)	(267,366)	(128.1)								
7. Commissions (a) .....	(73,715,228)	(29,464.8)	4,095	9.9	7,255	3.5			(106,773)		(1,543,010)			
8. Other general insurance expenses .....	66,264,044	26,486.4	(121,926)	(294.1)	86,698	41.5			94,431		960,317			
9. Taxes, licenses and fees .....	7,614,149	3,043.5	(237)	(0.6)	3,022	1.4			13,552		634,582			
10. Total other expenses incurred .....	162,965	65.1	(118,068)	(284.8)	96,975	46.5			1,210		51,889			
11. Aggregate write-ins for deductions .....	(436,719)	(174.6)												
12. Gain from underwriting before dividends or refunds .	2,652,729	1,060.3	(39,406)	(95.1)	31,208	15.0			(1,210)		(51,889)			
13. Dividends or refunds .....														
14. Gain from underwriting after dividends or refunds	2,652,729	1,060.3	(39,406)	(95.1)	31,208	15.0			(1,210)		(51,889)			
DETAILS OF WRITE-INS														
1101. Change in sate stabilization reserves .....	(36,719)	(14.7)												
1102. Change in loss recognition reserves .....	(400,000)	(159.9)												
1103. ....														
1198. Summary of remaining write-ins for Line 11 from overflow page .....														
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	(436,719)	(174.6)												

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1. Premiums written .....		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned .....		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims .....							(2,076,128)				(300,156)	
4. Cost containment expenses .....												
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....							(2,076,128)				(300,156)	
6. Increase in contract reserves .....											(31,982)	
7. Commissions (a) .....							(69,688)				(72,007,107)	
8. Other general insurance expenses .....							63,804				65,180,720	
9. Taxes, licenses and fees .....							5,967				6,957,263	
10. Total other expenses incurred .....							83				130,876	
11. Aggregate write-ins for deductions .....											(436,719)	
12. Gain from underwriting before dividends or refunds .							2,076,045				637,981	
13. Dividends or refunds .....												
14. Gain from underwriting after dividends or refunds							2,076,045				637,981	
DETAILS OF WRITE-INS												
1101. Change in sate stabilization reserves .....											(36,719)	
1102. Change in loss recognition reserves .....											(400,000)	
1103. ....												
1198. Summary of remaining write-ins for Line 11 from overflow page .....												
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)											(436,719)	

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY  
**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

**PART 2. - RESERVES AND LIABILITIES**

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Premium Reserves:													
1. Unearned premiums .....	6,647,155												6,647,155
2. Advance premiums .....	13,754	1,366	12,388										
3. Reserve for rate credits .....	758,500												758,500
4. Total premium reserves, current year .....	7,419,409	1,366	12,388										7,405,655
5. Total premium reserves, prior year .....	18,533,287	1,224	15,719										18,516,344
6. Increase in total premium reserves .....	(11,113,878)	142	(3,331)										(11,110,689)
B. Contract Reserves:													
1. Additional reserves (a) .....	8,054,995	154,395	1,780,490										6,120,110
2. Reserve for future contingent benefits .....													
3. Total contract reserves, current year .....	8,054,995	154,395	1,780,490										6,120,110
4. Total contract reserves, prior year .....	8,368,000	168,052	2,047,856										6,152,092
5. Increase in contract reserves .....	(313,005)	(13,657)	(267,366)										(31,982)
C. Claim Reserves and Liabilities:													
1. Total current year .....	106,328,801	1,219,246	2,202,361			5,365,730					4,695,024		92,846,440
2. Total prior year .....	114,126,709	1,249,594	2,205,726		21,016	5,432,195					6,974,055		98,244,123
3. Increase .....	(7,797,908)	(30,348)	(3,365)		(21,016)	(66,465)					(2,279,031)		(5,397,683)

**PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES**

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year .....	5,982,119	242,931	351,277		21,016	66,465					202,903		5,097,527
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 .....	106,328,801	1,219,246	2,202,361			5,365,730					4,695,024		92,846,440
2.2 On claims incurred during current year .....													
3. Test:													
3.1 Lines 1.1 and 2.1 .....	112,310,920	1,462,177	2,553,638		21,016	5,432,195					4,897,927		97,943,967
3.2 Claim reserves and liabilities, December 31, prior year .....	114,126,709	1,249,594	2,205,726		21,016	5,432,195					6,974,055		98,244,123
3.3 Line 3.1 minus Line 3.2 .....	(1,815,789)	212,583	347,912								(2,076,128)		(300,156)

**PART 4. - REINSURANCE**

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Reinsurance Assumed:													
1. Premiums written .....													
2. Premiums earned .....													
3. Incurred claims .....													
4. Commissions .....													
B. Reinsurance Ceded:													
1. Premiums written .....	424,339,399	2,318,166	10		849,584	36,449,308					58,050		384,664,281
2. Premiums earned .....	436,263,593	2,405,287	10		849,584	36,449,308					58,050		396,501,354
3. Incurred claims .....	274,955,592	3,458,649			409,016	29,549,990					(880,911)		242,418,848
4. Commissions .....	114,850,282	127,295			191,676	10,223,566					98,675		104,209,070

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3  Medicare Supplement	4  Vision Only	5  Dental Only	6 Federal Employees Health Benefits Plan	7  Medicare Title XVIII	8  Medicaid Title XIX	9  Credit A&H	10  Disability Income	11  Long-Term Care	12  Other Health	13  Total
A. Direct:													
1. Incurred claims .....	3,671,234	347,912		409,016	29,549,990					(2,957,039)		242,118,692	273,139,805
2. Beginning claim reserves and liabilities .....	24,515,285	2,205,747		21,016	5,432,195					15,149,143		160,096,322	207,419,708
3. Ending claim reserves and liabilities .....	23,794,667	2,202,382			5,365,730					10,542,713		132,224,005	174,129,497
4. Claims paid .....	4,391,852	351,277		430,032	29,616,455					1,649,391		269,991,009	306,430,016
B. Assumed Reinsurance:													
1. Incurred claims .....													
2. Beginning claim reserves and liabilities .....													
3. Ending claim reserves and liabilities .....													
4. Claims paid .....													
C. Ceded Reinsurance:													
1. Incurred claims .....	3,458,649			409,016	29,549,990					(880,911)		242,418,848	274,955,592
2. Beginning claim reserves and liabilities .....	23,265,692	21								8,175,088		61,852,199	93,293,000
3. Ending claim reserves and liabilities .....	22,575,421	21								5,847,690		39,377,565	67,800,697
4. Claims paid .....	4,148,920			409,016	29,549,990					1,446,487		264,893,482	300,447,895
D. Net:													
1. Incurred claims .....	212,585	347,912								(2,076,128)		(300,156)	(1,815,787)
2. Beginning claim reserves and liabilities .....	1,249,593	2,205,726		21,016	5,432,195					6,974,055		98,244,123	114,126,708
3. Ending claim reserves and liabilities .....	1,219,246	2,202,361			5,365,730					4,695,023		92,846,440	106,328,800
4. Claims paid .....	242,932	351,277		21,016	66,465					202,904		5,097,527	5,982,121
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses .....	212,583	347,912								(2,076,128)		(300,156)	(1,815,789)
2. Beginning reserves and liabilities .....	1,249,594	2,205,726		21,016	5,432,195					6,974,055		98,244,123	114,126,709
3. Ending reserves and liabilities .....	1,219,246	2,202,361			5,365,730					4,695,024		92,846,440	106,328,801
4. Paid claims and cost containment expenses	242,931	351,277		21,016	66,465					202,903		5,097,527	5,982,119



ANNUAL STATEMENT FOR THE YEAR 2022 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 Type of Business Assumed	8 Amount of In Force at End of Year	9 Reserve	10 Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
.....92657.....	..31-1000740..	..02/26/1999..	Nationwide Life and Annuity Insurance Co .....	OH.....	.....CO/G.....	.....OL.....	.....79,538,867.....	.....155,976,305.....	.....	.....	.....	.....
.....92657.....	..31-1000740..	..01/01/1994..	Nationwide Life and Annuity Insurance Co .....	OH.....	.....MCO/I.....	.....OL.....	.....524,173,748.....	.....	.....12,271,499.....	.....	.....32,601,611.....	.....
.....92657.....	..31-1000740..	..12/31/1996..	Nationwide Life and Annuity Insurance Co .....	OH.....	.....MCO/I.....	.....FA.....	.....	.....	.....10,407,991.....	.....	.....858,946,997.....	.....
0299999. General Account - U.S. Affiliates - Other							603,712,615	155,976,305	22,679,490		891,548,608	
0399999. Total General Account - U.S. Affiliates							603,712,615	155,976,305	22,679,490		891,548,608	
0699999. Total General Account - Non-U.S. Affiliates												
0799999. Total General Account - Affiliates							603,712,615	155,976,305	22,679,490		891,548,608	
.....60992.....	..13-3690700..	..04/16/1993..	First MetLife Investors Insurance Co .....	NY.....	.....CO/I.....	.....FA.....	.....	.....476,296.....	.....	.....	.....	.....
.....82627.....	..06-0839705..	..01/01/1989..	Swiss Re Life and Health America Inc .....	MO.....	.....YRT/I.....	.....OL.....	.....	.....	.....766.....	.....	.....	.....
.....70335.....	..94-0971150..	..01/01/1986..	West Coast Life Ins Company .....	NE.....	.....OTH/I.....	.....OL.....	.....960,147.....	.....467,163.....	.....14,218.....	.....	.....	.....
0899999. General Account - U.S. Non-Affiliates							960,147	943,459	14,984			
1099999. Total General Account - Non-Affiliates							960,147	943,459	14,984			
1199999. Total General Account							604,672,762	156,919,764	22,694,474		891,548,608	
.....92657.....	..31-1000740..	..01/01/1994..	Nationwide Life and Annuity Insurance Co .....	OH.....	.....MCO/I.....	.....OL.....	.....	.....	.....	.....	.....76,807,854.....	.....
1399999. Separate Accounts - U.S. Affiliates - Other											76,807,854	
1499999. Total Separate Accounts - U.S. Affiliates											76,807,854	
1799999. Total Separate Accounts - Non-U.S. Affiliates												
1899999. Total Separate Accounts - Affiliates											76,807,854	
2199999. Total Separate Accounts - Non-Affiliates												
2299999. Total Separate Accounts											76,807,854	
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)							604,672,762	156,919,764	22,694,474		968,356,462	
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)												
9999999 - Totals							604,672,762	156,919,764	22,694,474		968,356,462	

## SCHEDULE S - PART 1 - SECTION 2

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2022 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	70,004	125,000
86258	13-2572994	12/01/1973	General Re Life Corporation	CT	25,665	154,912
86258	13-2572994	12/01/1973	General Re Life Corporation	CT	20,190	94,378
88340	59-2859797	06/01/2012	Hannover Life Reassurance Company of America	FL	75,736	109,995
65676	35-0472300	04/01/1998	Lincoln National Life Insurance Co	IN	87,026	
65676	35-0472300	10/01/1946	Lincoln National Life Insurance Co	IN	675,838	
65676	35-0472300	10/01/1946	Lincoln National Life Insurance Co	IN	904,975	480,728
66346	58-0828824	03/20/1979	Munich American Reassurance Co	GA		174,763
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	50,074	187,500
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	2,260,388	286,405
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	112,912	823,128
64688	75-6020048	02/07/2000	SCOR Global Life Americas Reinsurance	DE	450,000	
64688	75-6020048	11/01/1989	SCOR Global Life Americas Reinsurance	DE	37,519	172,806
87572	23-2038295	03/01/2005	Scottish Re Us Inc	DE	448,216	121,257
87572	23-2038295	10/01/1984	Scottish Re Us Inc	DE	59,149	19,829
68713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	10,500	350,000
68713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	75,005	150,000
68713	84-0499703	04/01/1994	Security Life of Denver Ins Co	CO	479,058	
82627	06-0839705	03/01/1964	Swiss Re Life and Health America Inc	MO	67,366	64,176
82627	06-0839705	03/01/1964	Swiss Re Life and Health America Inc	MO	7,000	13,452
62596	31-0252460	11/12/1982	Union Fidelity Life Ins Co	KS		1,096
0899999. Life and Annuity - U.S. Non-Affiliates					5,916,620	3,329,425
1099999. Total Life and Annuity - Non-Affiliates					5,916,620	3,329,425
1199999. Total Life and Annuity					5,916,620	3,329,425
1499999. Total Accident and Health - U.S. Affiliates						
1799999. Total Accident and Health - Non-U.S. Affiliates						
1899999. Total Accident and Health - Affiliates						
71439	38-1843471	07/01/2003	Assurity Life Insurance Compnay	NE		163,945
37273	39-1338397	10/01/2012	AXIS Insurance Company	IL		5,530,446
00000	45-2207399	06/01/2014	Fringe Re, LLC	MT		783,495
70939	13-2611847	01/01/2005	Gerber Life Insurance Company	NY		2,728,944
88340	59-2859797	01/01/2011	Hannover Life Re	FL		4,957,234
11054	43-1898350	01/01/2018	Maiden Reinsurance North America Inc	MO		7,598,595
68381	36-0883760	04/01/2010	Reliance Standard Life Ins Co	IL		885,000
68381	36-0883760	04/01/2010	Reliance Standard Life Ins Co	IL		173,896
93572	43-1235868	05/01/2015	RGA Reinsurance Company	MO		685,539
82627	06-0839705	05/01/1977	Swiss Re Life and Health America Inc	MO	74,000	109,995
19453	13-5616275	04/01/2019	Transatlantic Reinsurance Company	NY		333,022
21113	13-5459190	04/01/2019	United States Fire Insurance Company	DE		86,894
1999999. Accident and Health - U.S. Non-Affiliates					74,000	24,037,004
00000	AA-3160157	01/01/2019	Black Sands Reinsurance	BRB		2,580,172
00000	AA-0055586	09/01/2019	Beam Reinsurance Company	TCA		12,160
00000	AA-1126033	12/01/2004	Lloyds Syndicate #0033	GBR		69,646
00000	AA-1126033	12/01/2004	Lloyds Syndicate #0033	GBR		91
00000	AA-1126457	12/01/2006	Lloyds Syndicate #0457	GBR		23,654
00000	AA-1126457	12/01/2006	Lloyds Syndicate #0457	GBR		30
00000	AA-1126510	12/01/2004	Lloyds Syndicate #0510	GBR		69,646
00000	AA-1126510	12/01/2004	Lloyds Syndicate #0510	GBR		91
00000	AA-1126780	12/01/2014	Lloyds Syndicate #0780	GBR		46
00000	AA-1126958	04/01/2014	Lloyds Syndicate #0958	GBR		3
00000	AA-1127183	01/01/2005	Lloyds Syndicate #1183	GBR		30
00000	AA-1127200	01/01/2010	Lloyds Syndicate #1200	GBR		14,455
00000	AA-1127200	01/01/2010	Lloyds Syndicate #1200	GBR		18
00000	AA-1127206	04/01/2010	Lloyds Syndicate #1206	GBR		26,610
00000	AA-1127206	04/01/2010	Lloyds Syndicate #1206	GBR		15
00000	AA-1127861	12/01/2012	Lloyds Syndicate #1861	GBR		18
00000	AA-1128001	01/01/2005	Lloyds Syndicate #2001	GBR		32,852
00000	AA-1128001	01/01/2005	Lloyds Syndicate #2001	GBR		43
00000	AA-1128003	05/01/2016	Lloyds Syndicate #2003	GBR		46
00000	AA-1120104	12/01/2011	Lloyds Syndicate #2012	GBR		14,455
00000	AA-1120104	12/01/2011	Lloyds Syndicate #2012	GBR		18
00000	AA-1128488	12/01/2004	Lloyds Syndicate #2488	GBR		30
00000	AA-1128987	12/01/2004	Lloyds Syndicate #2987	GBR		91
00000	AA-1120055	03/01/2010	Lloyds Syndicate #3623	GBR		35,151
00000	AA-1120055	03/01/2010	Lloyds Syndicate #3623	GBR		91
00000	AA-1120075	12/01/2006	Lloyds Syndicate #4020	GBR		69,646
00000	AA-1120075	12/01/2006	Lloyds Syndicate #4020	GBR		102
00000	AA-1126004	12/01/2006	Lloyds Syndicate #4444	GBR		12,156
00000	AA-1126004	12/01/2006	Lloyds Syndicate #4444	GBR		12
00000	AA-1126006	01/01/2005	Lloyds Syndicate #4472	GBR		69,646
00000	AA-1126006	01/01/2005	Lloyds Syndicate #4472	GBR		91
00000	AA-1120090	05/01/2016	Lloyds Syndicate #4711	GBR		12
00000	AA-1126003	08/01/2008	Lloyds Syndicate #5000	GBR		48,291
00000	AA-1126003	08/01/2008	Lloyds Syndicate #5000	GBR		46
00000	AA-3194213	10/01/2012	Roundstone Insurance	BMU		12,751,023
2099999. Accident and Health - Non-U.S. Non-Affiliates						15,830,492
2199999. Total Accident and Health - Non-Affiliates					74,000	39,867,496
2299999. Total Accident and Health					74,000	39,867,496
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					5,990,620	27,366,429
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)						15,830,492
9999999 Totals - Life, Annuity and Accident and Health					5,990,620	43,196,921

ANNUAL STATEMENT FOR THE YEAR 2022 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 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
15821	47-4523959	10/01/2015	Eagle Captive Reinsurance, LLC	OH	COFII/I	VA		248,865,256	48,982,722	626,892,015				1,584,217,410
15821	47-4523959	10/01/2015	Eagle Captive Reinsurance, LLC	OH	COFII/G	VA		3,675,627	1,183,524	9,933,160				23,398,173
15821	47-4523959	03/31/2021	Eagle Captive Reinsurance, LLC	OH	COFII/G	FA								33,300
0199999. General Account - Authorized U.S. Affiliates - Captive								252,540,883	50,166,246	636,825,175				1,607,648,883
0399999. Total General Account - Authorized U.S. Affiliates								252,540,883	50,166,246	636,825,175				1,607,648,883
0699999. Total General Account - Authorized Non-U.S. Affiliates														
0799999. Total General Account - Authorized Affiliates								252,540,883	50,166,246	636,825,175				1,607,648,883
60488	25-0598210	10/01/1991	American General Life Ins Co	TX	CO/I	FA		17,934,241	18,406,546	239,925				
60895	35-0145825	01/01/1977	American United Life Ins Co	IN	CO/I	XXXL	521,324,393	9,031,636	12,937,841	2,935,272				
60895	35-0145825	01/01/1977	American United Life Ins Co	IN	CO/I	OL	662,500	675,707	665,911	29,892				
60895	35-0145825	01/01/1992	American United Life Ins Co	IN	YRT/I	OL	150,000	36	33	3,466				
61689	42-0175020	01/01/1992	Athene Ann & Life Co	IA	OTH/I	OL	47,033,610	21,356,990	22,002,191	302,075				
68365	04-2729166	05/01/1999	AXA Corp Solutions Re Life Reins Co	DE	CO/I	VA		2,319,321	482,221	1,159,798				
33197	06-0949141	11/01/1997	Cologne Reinsurance Co	CT	YRT/I	XXXLO	3,750,000			77,672				
33197	06-0949141	11/01/1997	Cologne Reinsurance Co	CT	YRT/I	OL	24,751,661	711,066	671,208	72,244				
68276	48-1024691	12/31/1995	Employers Reassurance Corp	KS	CO/I	OL	59,747,820	8,910,978	9,403,234	538,032				
68276	48-1024691	04/01/1996	Employers Reassurance Corp	KS	YRT/I	OL		469	469					
86258	13-2572994	12/01/1973	General Re Life Corporation	CT	YRT/I	AXXX	53,466,528	31,819	15,654	256,510				
86258	13-2572994	12/01/1973	General Re Life Corporation	CT	YRT/I	XXXLO	990,000			1,320				
86258	13-2572994	12/01/1973	General Re Life Corporation	CT	YRT/I	OL	495,369,286	7,123,107	6,926,248	5,515,268				
11231	13-5617450	03/01/1986	Generali US Branch	NY	YRT/I	OL	207,054	97	84	1,814				
88340	59-2859797	06/01/2012	Hannover Life Reassurance Company of America	FL	YRT/G	OL	3,627,335,210	992,386	892,993	7,568,506				
88340	59-2859797	10/01/2005	Hannover Life Reassurance Company of America	FL	YRT/I	AXXX	1,505,790,590	465,070	438,262	4,397,910				
88340	59-2859797	10/01/2005	Hannover Life Reassurance Company of America	FL	YRT/I	XXXLO	117,693,683			137,063				
88340	59-2859797	10/01/2005	Hannover Life Reassurance Company of America	FL	YRT/I	OL	118,362,031	20,208	12,454	47,548				
65676	35-0472300	01/01/1982	Lincoln National Life Insurance Co	IN	CO/G	FA		27,808,584	28,919,381	17,969				
65676	35-0472300	03/01/1944	Lincoln National Life Insurance Co	IN	MCO/I	OL	2,917,463			60,840			2,215,913	
65676	35-0472300	04/01/1998	Lincoln National Life Insurance Co	IN	YRT/G	OL	352,056,053	400,196	425,859	3,473,116				
65676	35-0472300	10/01/1946	Lincoln National Life Insurance Co	IN	YRT/I	AXXX	1,025,561,339	1,315,446	1,293,485	11,293,597				
65676	35-0472300	10/01/1946	Lincoln National Life Insurance Co	IN	YRT/I	XXXLO	869,833,883	4,895,069	6,257,338	4,545,551				
65676	35-0472300	10/01/1946	Lincoln National Life Insurance Co	IN	YRT/I	OL	683,476,244	1,648,710	1,585,303	4,025,329				
65676	35-0472300	10/01/1946	Lincoln National Life Insurance Co	IN	CO/I	OL	530,000			13,009				
66346	58-0828824	07/01/2001	Munich American Reassurance Co	GA	YRT/G	OL	471,358,013	81,078	41,670	295,825				
66346	58-0828824	03/20/1979	Munich American Reassurance Co	GA	YRT/I	AXXX	160,709,941	53,540	34,174	126,553				
66346	58-0828824	03/20/1979	Munich American Reassurance Co	GA	YRT/I	XXXLO	67,176,104			55,132				
66346	58-0828824	03/20/1979	Munich American Reassurance Co	GA	YRT/I	OL	161,331,280	904,244	915,084	638,569				
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	CO/I	XXXL	505,820,167	10,270,557	12,391,084	903,516				
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	CO/I	OL	421,250	2,690	3,401	3,079				
93572	43-1235868	09/01/1989	RGA Reinsurance Company	MO	YRT/G	OL	451,160,586	443,802	461,852	3,992,271				
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	YRT/I	AXXX	1,277,243,581	1,336,670	1,284,928	12,193,571				
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	YRT/I	XXXLO	265,627,575	99,776	114,649	483,003				
93572	43-1235868	10/01/1980	RGA Reinsurance Company	MO	YRT/I	OL	2,364,366,569	10,615,723	10,412,666	18,203,695				
64688	75-6020048	02/07/2000	SCOR Global Life Americas Reinsurance	DE	CO/I	OL	1,272,282,620	21,500,392	31,841,175	2,848,014				
64688	75-6020048	09/01/1989	SCOR Global Life Americas Reinsurance	DE	YRT/G	OL	9,305,000	176,060	186,965	110,032				
64688	75-6020048	11/01/1989	SCOR Global Life Americas Reinsurance	DE	YRT/I	OL	575,172,365	7,191,800	7,099,033	3,743,882				
64688	75-6020048	10/01/1983	Scor Global Life Americas Reinsurance Co	DE	YRT/I	AXXX	52,705,431	25,960	24,179	264,846				
64688	75-6020048	10/01/1983	Scor Global Life Americas Reinsurance Co	DE	YRT/I	XXXLO	64,372,800			91,476				
64688	75-6020048	10/01/1983	Scor Global Life Americas Reinsurance Co	DE	YRT/I	OL	102,304,973	683,314	597,259	369,971				
97071	13-3126819	06/01/2012	SCOR Global Life USA Reins Co	DE	YRT/I	AXXX	625,913	1,566	1,329	6,404				
87572	23-2038295	10/01/2002	Scottish Re Us Inc	DE	CO/I	FA		23,400,506	24,525,453					
87572	23-2038295	10/01/2002	Scottish Re Us Inc	DE	CO/I	OL				1,148				
87572	23-2038295	03/01/2005	Scottish Re Us Inc	DE	YRT/G	OL	483,157,743	2,299,012	6,005,538	3,942,709				
87572	23-2038295	10/01/1984	Scottish Re Us Inc	DE	YRT/I	OL	295,989,855	2,250,189	2,006,853	3,646,434				
68675	48-0409770	07/01/2000	Security Benefits Life Insurance Co	KS	CO/I	FA		2,651,401	2,700,761					
68675	48-0409770	07/01/2000	Security Benefits Life Insurance Co	KS	CO/I	VA		91,531,596	93,590,077	2,880,088				
68713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	CO/I	XXXL	1,156,610,369	20,547,744	28,168,580	4,848,586				

ANNUAL STATEMENT FOR THE YEAR 2022 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 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9	10		12	13		
								Current Year	Prior Year		Current Year	Prior Year		
68713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	CO/I	OL	227,500	1,912	3,624	(66)				
68713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	CO/I	OL	1,447,238	810,788	969,227	13,983				
68713	84-0499703	04/01/1994	Security Life of Denver Ins Co	CO	YRT/G	OL	196,807,744	228,351	235,524	2,000,086				
68713	84-0499703	04/01/1994	Security Life of Denver Ins Co	CO	YRT/I	AXXX	1,018,852,348	15,958,083	15,992,439	13,407,060				
68713	84-0499703	04/01/1994	Security Life of Denver Ins Co	CO	YRT/I	OL	216,996,220	5,684,477	5,404,984	2,167,603				
82627	06-0839705	08/01/1997	Swiss Re Life and Health America Inc	MO	CO/G	VA		1,081,207	413,875	404,186				
82627	06-0839705	05/01/1972	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	1,309,525	4,212	3,524	70,451				
82627	06-0839705	01/01/1950	Swiss Re Life and Health America Inc	MO	CO/I	XXXL	852,791,925	14,832,507	20,627,970	4,012,716				
82627	06-0839705	10/01/1984	Swiss Re Life and Health America Inc	MO	OTH/G	OL	5,743,986,468	1,747,925	1,282,631	10,360,769				
82627	06-0839705	03/01/1964	Swiss Re Life and Health America Inc	MO	YRT/I	AXXX	1,836,800,677	831,483	885,096	6,513,241				
82627	06-0839705	03/01/1964	Swiss Re Life and Health America Inc	MO	YRT/I	XXXL	147,346,828			227,487				
82627	06-0839705	03/01/1964	Swiss Re Life and Health America Inc	MO	YRT/I	OL	315,270,416	1,227,424	1,402,112	2,949,522				
82627	06-0839705	03/01/1964	Swiss Re Life and Health America Inc	MO	YRT/I	OL				984				
62596	31-0252460	11/12/1982	Union Fidelity Life Ins Co	KS	OTH/G	OL	120,000	2,942	3,053	(1,928)				
70335	94-0971150	01/01/1994	West Coast Life Ins Company	NE	MCO/I	FA							22,170,186	
70335	94-0971150	01/01/1994	West Coast Life Ins Company	NE	MCO/I	OL							40,045,018	
70335	94-0971150	01/01/1994	West Coast Life Ins Company	NE	OTH/I	OL	3,863,693	16,008	21,819	68,070				
0899999. General Account - Authorized U.S. Non-Affiliates							29,584,572,065	344,136,078	380,989,306	148,556,693			64,431,117	
1099999. Total General Account - Authorized Non-Affiliates							29,584,572,065	344,136,078	380,989,306	148,556,693			64,431,117	
1199999. Total General Account Authorized							29,584,572,065	596,676,961	431,155,552	785,381,868			64,431,117	1,607,648,883
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-3190878	07/01/2002	Wilton Reinsurance Bermuda Ltd	BMU	YRT/I	OL	13,297,315	1,074,998	1,048,228	212,438				
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates							13,297,315	1,074,998	1,048,228	212,438				
2199999. Total General Account - Unauthorized Non-Affiliates							13,297,315	1,074,998	1,048,228	212,438				
2299999. Total General Account Unauthorized							13,297,315	1,074,998	1,048,228	212,438				
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														
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates														
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates														
4099999. Total General Account - Reciprocal Jurisdiction Affiliates														
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates														
4499999. Total General Account Reciprocal Jurisdiction														
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							29,597,869,380	597,751,959	432,203,780	785,594,306			64,431,117	1,607,648,883
4899999. Total Separate Accounts - Authorized U.S. Affiliates														
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates														
5299999. Total Separate Accounts - Authorized Affiliates														
68675	48-0409770	07/01/2000	Security Benefits Life Insurance Co	KS	CO/I	VA				2,713,718			331,367,572	
5399999. Separate Accounts - Authorized U.S. Non-Affiliates										2,713,718			331,367,572	
5599999. Total Separate Accounts - Authorized Non-Affiliates										2,713,718			331,367,572	
5699999. Total Separate Accounts Authorized										2,713,718			331,367,572	
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates														
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates														
6399999. Total Separate Accounts - Unauthorized Affiliates														
6699999. Total Separate Accounts - Unauthorized Non-Affiliates														
6799999. Total Separate Accounts Unauthorized														
7099999. Total Separate Accounts - Certified U.S. Affiliates														
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates														
7499999. Total Separate Accounts - Certified Affiliates														
7799999. Total Separate Accounts - Certified Non-Affiliates														

ANNUAL STATEMENT FOR THE YEAR 2022 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  Domi- ciliary Juris- diction	6  Type of Reinsurance Ceded	7  Type of Business Ceded	8  Amount in Force at End of Year	Reserve Credit Taken		11  Premiums	Outstanding Surplus Relief		14  Modified Coinsurance Reserve	15  Funds Withheld Under Coinsurance
								9	10		12	13		
								Current Year	Prior Year		Current Year	Prior Year		
7899999. Total Separate Accounts Certified														
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates														
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates														
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates														
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates														
8999999. Total Separate Accounts Reciprocal Jurisdiction														
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified										2,713,718			331,367,572	
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)								29,584,572,065	596,676,961	431,155,552	788,095,586		395,798,689	1,607,648,883
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)								13,297,315	1,074,998	1,048,228	212,438			
9999999 - Totals								29,597,869,380	597,751,959	432,203,780	788,308,024		395,798,689	1,607,648,883

ANNUAL STATEMENT FOR THE YEAR 2022 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 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
23787	31-4177100	01/01/1996	Nationwide Mutual Insurance Company	OH	QA/G	OH	263,588,367					12,358,819	
0299999. General Account - Authorized U.S. Affiliates - Other							263,588,367					12,358,819	
0399999. Total General Account - Authorized U.S. Affiliates							263,588,367					12,358,819	
0699999. Total General Account - Authorized Non-U.S. Affiliates													
0799999. Total General Account - Authorized Affiliates							263,588,367					12,358,819	
22667	95-2371728	08/01/2005	ACE American Ins Co	PA	OTH/G	OH	1,659	55					
71439	38-1843471	07/01/2003	Assurity Life Insurance Compnay	NE	QA/I	STD1	69,106	9,867	1,344,297				
37273	39-1338397	10/01/2012	AXIS Insurance Company	IL	QA/G	SLEL	21,426,612						
61883	42-0884060	10/01/2002	Central United Life Insurance Company	AR	QA/I	STD1	(892)	1,741	36,650				
62359	36-1824600	11/01/2002	Constitution Life Insurance Company	TX	QA/I	MS	1,944,352	283,629	261,581				
26921	22-2005057	08/01/2005	Everest Reinsurance Company	DE	OTH/G	A	174	12,491					
70939	13-2611847	01/01/2005	Gerber Life Insurance Company	NY	OTH/G	SLEL	3,355,369						
88340	59-2859797	01/01/2011	Hannover Life Re	FL	QA/G	SLEL	11,819,982						
65676	35-0472300	02/01/1984	Lincoln National Life Insurance Co	IN	QA/I	STD1			313,869				
11054	43-1898350	01/01/2018	Maiden Reinsurance North America Inc	MO	QA/G	OH	16,872,478						
38636	13-3031176	04/01/2012	Partner Reinsurance Co of the US	NY	QA/G	OH	4,147	137					
68209	62-0506281	07/01/1991	Provident Life & Casualty Insurance Company	TN	QA/I	STD1	341,959		20,594,795				
68381	36-0883760	04/01/2010	Reliance Standard Life Ins Co	IL	QA/G	LTD1	3,301						
93572	43-1235868	05/01/2015	RGA Reinsurance Company	MO	QA/G	SLEL	11,426						
82627	06-0839705	05/01/1987	Swiss Re Life and Health America Inc	MO	QA/G	OH			7,034				
82627	06-0839705	05/01/1977	Swiss Re Life and Health America Inc	MO	OTH/G	OH			637				
19453	13-5616275	04/01/2019	Transatlantic Reinsurance Company	NY	CO/G	OH	523,242						
61425	36-0792925	05/01/1987	Trustmark Insurance Co (Mutual)	IL	QA/I	STD1	5,700						
62596	31-0252460	11/12/1982	Union Fidelity Life Ins Co	KS	QA/I	STD1	(483)	5,675					
21113	13-5459190	04/01/2019	United States Fire Insurance Company	DE	CO/G	OH	508,544	(25)					
40827	36-3186541	10/01/2017	Virginia Surety Company Inc	IL	QA/G	OH	43,051						
70335	94-0971150	01/01/1994	West Coast Life Ins Company	NE	OTH/G	OH			(43,558)				
20583	13-1290712	05/01/2016	XL Reinsurance America, Inc.	NY	QA/G	OH	37,862	82					
0899999. General Account - Authorized U.S. Non-Affiliates							56,967,588	313,653	22,515,305				
00000	AA-3160157	01/01/2019	Black Sands Reinsurance	BRB	QA/G	OH	8,388,422						
00000	AA-3770280	01/01/2016	Greenlight Reinsurance, Ltd.	CYM	QA/G	OH	2,742,214						
00000	AA-1126033	12/01/2004	Lloyds Syndicate #0033	GBR	QA/G	SLEL	108,942						
00000	AA-1126033	12/01/2004	Lloyds Syndicate #0033	GBR	QA/G	OH	283,857	9					
00000	AA-1126457	12/01/2006	Lloyds Syndicate #0457	GBR	QA/G	SLEL	37,000						
00000	AA-1126457	12/01/2006	Lloyds Syndicate #0457	GBR	QA/G	OH	96,498	3					
00000	AA-1126510	12/01/2004	Lloyds Syndicate #0510	GBR	QA/G	SLEL	108,942						
00000	AA-1126510	12/01/2004	Lloyds Syndicate #0510	GBR	QA/G	OH	283,857	9					
00000	AA-1126780	12/01/2014	Lloyds Syndicate #0780	GBR	QA/G	OH	(7,402)	14					
00000	AA-1126958	04/01/2014	Lloyds Syndicate #0958	GBR	QA/G	OH	(523)						
00000	AA-1127183	01/01/2005	Lloyds Syndicate #1183	GBR	QA/G	OH	(5,226)						
00000	AA-1127200	01/01/2010	Lloyds Syndicate #1200	GBR	QA/G	SLEL	22,610						
00000	AA-1127200	01/01/2010	Lloyds Syndicate #1200	GBR	QA/G	OH	59,025	2					
00000	AA-1127206	04/01/2010	Lloyds Syndicate #1206	GBR	QA/G	SLEL	41,624						
00000	AA-1127206	04/01/2010	Lloyds Syndicate #1206	GBR	QA/G	OH	111,644	(3)					
00000	AA-1127861	12/01/2012	Lloyds Syndicate #1861	GBR	QA/G	OH	(3,136)						
00000	AA-1128001	01/01/2005	Lloyds Syndicate #2001	GBR	QA/G	SLEL	51,388						
00000	AA-1128001	01/01/2005	Lloyds Syndicate #2001	GBR	QA/G	OH	133,969	4					
00000	AA-1128003	05/01/2016	Lloyds Syndicate #2003	GBR	QA/G	OH	(7,402)	14					
00000	AA-1120104	12/01/2011	Lloyds Syndicate #2012	GBR	QA/G	SLEL	22,610						
00000	AA-1120104	12/01/2011	Lloyds Syndicate #2012	GBR	QA/G	OH	59,025	2					
00000	AA-1128488	12/01/2004	Lloyds Syndicate #2488	GBR	QA/G	OH	(5,226)						
00000	AA-1128987	12/01/2004	Lloyds Syndicate #2987	GBR	QA/G	OH	(14,804)	29					
00000	AA-1120055	03/01/2010	Lloyds Syndicate #3623	GBR	QA/G	SLEL	54,984						
00000	AA-1120055	03/01/2010	Lloyds Syndicate #3623	GBR	QA/G	OH	135,933	19					
00000	AA-1120075	12/01/2006	Lloyds Syndicate #4020	GBR	QA/G	SLEL	108,942						
00000	AA-1120075	12/01/2006	Lloyds Syndicate #4020	GBR	QA/G	OH	282,130	13					

ANNUAL STATEMENT FOR THE YEAR 2022 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 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
... 00000 ...	..AA-1126004 ..	12/01/2006 ..	Lloyds Syndicate #4444 .....	GBR.....	...QA/G .....	.....SLEL .....	.....19,014 .....	.....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1126004 ..	12/01/2006 ..	Lloyds Syndicate #4444 .....	GBR.....	...QA/G .....	.....OH .....	.....50,181 .....	.....1 .....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1126006 ..	01/01/2005 ..	Lloyds Syndicate #4472 .....	GBR.....	...QA/G .....	.....SLEL .....	.....108,942 .....	.....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1126006 ..	01/01/2005 ..	Lloyds Syndicate #4472 .....	GBR.....	...QA/G .....	.....OH .....	.....283,857 .....	.....9 .....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1120090 ..	05/01/2016 ..	Lloyds Syndicate #4711 .....	GBR.....	...QA/G .....	.....OH .....	.....(1,974) .....	.....4 .....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1126003 ..	08/01/2008 ..	Lloyds Syndicate #5000 .....	GBR.....	...QA/G .....	.....SLEL .....	.....75,538 .....	.....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1126003 ..	08/01/2008 ..	Lloyds Syndicate #5000 .....	GBR.....	...QA/G .....	.....OH .....	.....199,684 .....	.....1 .....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1120080 ..	11/17/2017 ..	Lloyd's Syndicate 5151 .....	GBR.....	...QA/G .....	.....OH .....	.....175 .....	.....6 .....	.....	.....	.....	.....	.....
... 00000 ...	..AA-3194213 ..	10/01/2012 ..	Roundstone Insurance .....	BMJ.....	...OTH/G .....	.....SLEL .....	.....82,551,238 .....	.....	.....	.....	.....	.....	.....
... 00000 ...	..AA-1121468 ..	12/01/2017 ..	Trident Insurance Company Ltd .....	GBR.....	...QA/G .....	.....OH .....	.....179,655 .....	.....188 .....	.....	.....	.....	.....	.....
0999999. General Account - Authorized Non-U.S. Non-Affiliates							96,556,207	325					
1099999. Total General Account - Authorized Non-Affiliates							153,523,796	313,978	22,515,305				
1199999. Total General Account Authorized							417,112,163	313,978	22,515,305			12,358,819	
1499999. Total General Account - Unauthorized U.S. Affiliates													
1799999. Total General Account - Unauthorized Non-U.S. Affiliates													
1899999. Total General Account - Unauthorized Affiliates													
... 00000 ...	..45-2207399 ..	06/01/2014 ..	Fringe Re, LLC .....	MT.....	...QA/G .....	.....SLEL .....	.....2,086,118 .....	.....	.....	.....	.....	.....	.....
1999999. General Account - Unauthorized U.S. Non-Affiliates							2,086,118						
... 00000 ...	..AA-0055586 ..	09/01/2019 ..	Beam Reinsurance Company .....	TCA.....	...QA/G.....	.....STDI .....	.....5,182,694 .....	.....5,346,410 .....	.....799,789 .....	.....	.....	.....	.....
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates							5,182,694	5,346,410	799,789				
2199999. Total General Account - Unauthorized Non-Affiliates							7,268,812	5,346,410	799,789				
2299999. Total General Account Unauthorized							7,268,812	5,346,410	799,789				
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													
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates													
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates													
4099999. Total General Account - Reciprocal Jurisdiction Affiliates													
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates													
4499999. Total General Account Reciprocal Jurisdiction													
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							424,380,975	5,660,388	23,315,094			12,358,819	
4899999. Total Separate Accounts - Authorized U.S. Affiliates													
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates													
5299999. Total Separate Accounts - Authorized Affiliates													
5599999. Total Separate Accounts - Authorized Non-Affiliates													
5699999. Total Separate Accounts Authorized													
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates													
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates													
6399999. Total Separate Accounts - Unauthorized Affiliates													
6699999. Total Separate Accounts - Unauthorized Non-Affiliates													
6799999. Total Separate Accounts Unauthorized													
7099999. Total Separate Accounts - Certified U.S. Affiliates													
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates													
7499999. Total Separate Accounts - Certified Affiliates													
7799999. Total Separate Accounts - Certified Non-Affiliates													
7899999. Total Separate Accounts Certified													
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates													
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates													
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates													
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates													
8999999. Total Separate Accounts Reciprocal Jurisdiction													



ANNUAL STATEMENT FOR THE YEAR 2022 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  Domi- ciliary Juris- diction	6  Type of Reinsurance Ceded	7  Type of Business Ceded	8   Premiums	9  Unearned Premiums (Estimated)	10  Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13  Modified Coinsurance Reserve	14  Funds Withheld Under Coinsurance
										11  Current Year	12  Prior Year		
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified													
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)								322,642,073	313,653	22,515,305		12,358,819	
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)								101,738,901	5,346,735	799,789			
9999999 - Totals								424,380,975	5,660,388	23,315,094		12,358,819	

ANNUAL STATEMENT FOR THE YEAR 2022 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					
..00000 .....	..AA-3190878 ..	07/01/2002	Wilton Reinsurance Bermuda Ltd .....	1,096,744			1,096,744	1,035,000	..0001					1,035,000
0999999. General Account - Life and Annuity Non-U.S. Non-Affiliates				1,096,744			1,096,744	1,035,000	XXX					1,035,000
1099999. Total General Account - Life and Annuity Non-Affiliates				1,096,744			1,096,744	1,035,000	XXX					1,035,000
1199999. Total General Account Life and Annuity				1,096,744			1,096,744	1,035,000	XXX					1,035,000
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					
..00000 .....	..45-2207399 ..	06/01/2014	Fringe Re, LLC .....		783,495		783,495	804,152	..0002					783,495
1999999. General Account - Accident and Health U.S. Non-Affiliates					783,495		783,495	804,152	XXX					783,495
..00000 .....	..98-1502043 ..	01/01/2019	Black Sands Reinsurance .....		2,580,172		2,580,172			3,499,761				2,580,172
..00000 .....	..AA-3770280 ..	01/01/2016	Greenlight Reinsurance, Ltd. ....		573,730		573,730	1,507,991	..0003					573,730
..00000 .....	..AA-3194213 ..	10/01/2012	Roundstone Insurance .....		12,751,023		12,751,023			18,722,855				12,751,023
2099999. General Account - Accident and Health Non-U.S. Non-Affiliates					15,904,925		15,904,925	1,507,991	XXX	22,222,616				15,904,925
2199999. Total General Account - Accident and Health Non-Affiliates					16,688,420		16,688,420	2,312,143	XXX	22,222,616				16,688,420
2299999. Total General Account Accident and Health					16,688,420		16,688,420	2,312,143	XXX	22,222,616				16,688,420
2399999. Total General Account				1,096,744	16,688,420		17,785,164	3,347,143	XXX	22,222,616				17,723,420
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)					783,495		783,495	804,152	XXX					783,495
3699999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)				1,096,744	15,904,925		17,001,669	2,542,991	XXX	22,222,616				16,939,925
9999999 - Totals				1,096,744	16,688,420		17,785,164	3,347,143	XXX	22,222,616				17,723,420

(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
	0001 .....	1.....	111025013 .....	Wells Fargo Bank, N.A. ....	..... 1,035,000
	0002 .....	1.....	111907940 .....	Horizon Bank, SSB .....	..... 804,152
	0003 .....	1.....	021000089 .....	Citibank New York .....	..... 1,507,991

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business  
(\$000 Omitted)

	1 2022	2 2021	3 2020	4 2019	5 2018
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts .....	1,212,689	1,199,713	1,208,638	1,111,293	1,018,120
2. Commissions and reinsurance expense allowances .....	141,863	119,751	115,074	81,953	80,082
3. Contract claims .....	472,751	437,176	436,812	446,209	398,992
4. Surrender benefits and withdrawals for life contracts .....	36,534	42,484	38,037	43,608	53,865
5. Dividends to policyholders and refunds to members .....	149	448	731	749	761
6. Reserve adjustments on reinsurance ceded .....	(15,759)	(10,594)	(3,744)	1,506	(11,109)
7. Increase in aggregate reserve for life and accident and health contracts .....	165,444	(55,349)	(233,555)	(392,868)	437,600
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	23,361	27,655	25,392	27,355	22,922
9. Aggregate reserves for life and accident and health contracts .....	626,727	460,912	516,828	748,634	1,142,542
10. Liability for deposit-type contracts .....	22	23	24	34	49
11. Contract claims unpaid .....	43,197	82,142	69,637	62,415	42,958
12. Amounts recoverable on reinsurance .....	5,991	9,342	9,477	7,846	16,600
13. Experience rating refunds due or unpaid .....	2	729	542	583	54
14. Policyholders' dividends and refunds to members (not included in Line 10) .....					
15. Commissions and reinsurance expense allowances due .....	276	241	379	488	882
16. Unauthorized reinsurance offset .....	62	1,096	189	826	132
17. Offset for reinsurance with Certified Reinsurers .....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F) .....					
19. Letters of credit (L) .....	3,347	11,967	15,643	10,100	6,700
20. Trust agreements (T) .....	22,223	18,159	22,206	23,250	21,846
21. Other (O) .....					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust .....					
23. Funds deposited by and withheld from (F) .....					
24. Letters of credit (L) .....					
25. Trust agreements (T) .....					
26. Other (O) .....					

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) .....	57,047,471,577		57,047,471,577
2. Reinsurance (Line 16) .....	13,673,560	(13,673,560)	
3. Premiums and considerations (Line 15) .....	56,816,591	23,361,248	80,177,839
4. Net credit for ceded reinsurance .....	XXX	210,620,152	210,620,152
5. All other admitted assets (balance) .....	1,482,475,912		1,482,475,912
6. Total assets excluding Separate Accounts (Line 26) .....	58,600,437,640	220,307,840	58,820,745,480
7. Separate Account assets (Line 27) .....	102,807,850,581		102,807,850,581
8. Total assets (Line 28)	161,408,288,221	220,307,840	161,628,596,061
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	41,525,357,326	626,616,301	42,151,973,627
10. Liability for deposit-type contracts (Line 3) .....	4,189,483,393	(23,672)	4,189,459,721
11. Claim reserves (Line 4) .....	176,204,238	43,196,920	219,401,158
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7) .....	30,853,020		30,853,020
13. Premium & annuity considerations received in advance (Line 8) .....	2,954,627		2,954,627
14. Other contract liabilities (Line 9) .....	451,034,312	(449,419,965)	1,614,347
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....	61,744	(61,744)	
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) .....	2,029,127,032		2,029,127,032
20. Total liabilities excluding Separate Accounts (Line 26) .....	48,405,075,692	220,307,840	48,625,383,532
21. Separate Account liabilities (Line 27) .....	102,807,850,581		102,807,850,581
22. Total liabilities (Line 28) .....	151,212,926,273	220,307,840	151,433,234,113
23. Capital & surplus (Line 38) .....	10,195,361,948	XXX	10,195,361,948
24. Total liabilities, capital & surplus (Line 39)	161,408,288,221	220,307,840	161,628,596,061
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	626,616,301		
26. Claim reserves .....	43,196,920		
27. Policyholder dividends/reserves .....			
28. Premium & annuity considerations received in advance .....			
29. Liability for deposit-type contracts .....	(23,672)		
30. Other contract liabilities .....	(449,419,965)		
31. Reinsurance ceded assets .....	13,673,560		
32. Other ceded reinsurance recoverables .....			
33. Total ceded reinsurance recoverables .....	234,043,144		
34. Premiums and considerations .....	23,361,248		
35. Reinsurance in unauthorized companies .....	61,744		
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 .....	23,422,992		
41. Total net credit for ceded reinsurance	210,620,152		

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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

Allocated by States and Territories

			Direct Business Only					
			1	2	3	4	5	6
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama .....	AL	12,563,053	152,344,412	925			164,908,390
2.	Alaska .....	AK	199,575	10,263,997				10,463,572
3.	Arizona .....	AZ	37,716,083	553,972,365	12,957			591,701,405
4.	Arkansas .....	AR	4,502,081	47,265,452				51,767,533
5.	California .....	CA	190,771,552	1,289,472,286	594			1,480,244,432
6.	Colorado .....	CO	40,006,464	236,491,986				276,498,450
7.	Connecticut .....	CT	59,889,113	272,327,820				332,216,933
8.	Delaware .....	DE	507,574,659	32,830,734				540,405,393
9.	District of Columbia .....	DC	737,975	15,804,977	33			16,542,985
10.	Florida .....	FL	193,616,638	1,327,927,895	810			1,521,545,343
11.	Georgia .....	GA	67,640,779	196,446,681	5,858			264,093,318
12.	Hawaii .....	HI	3,028,789	43,631,042				46,659,831
13.	Idaho .....	ID	1,088,798	44,643,097	1			45,731,896
14.	Illinois .....	IL	126,173,647	452,498,042	507			578,672,196
15.	Indiana .....	IN	52,499,465	225,442,662	5,481			277,947,608
16.	Iowa .....	IA	43,961,013	102,093,476	619			146,055,108
17.	Kansas .....	KS	11,426,795	83,037,081	995			94,464,871
18.	Kentucky .....	KY	12,174,501	86,404,527	385			98,579,413
19.	Louisiana .....	LA	7,256,739	109,183,436	2			116,440,177
20.	Maine .....	ME	2,369,220	40,452,312				42,821,532
21.	Maryland .....	MD	22,575,663	264,308,040	294			286,883,997
22.	Massachusetts .....	MA	42,282,097	405,992,932				448,275,029
23.	Michigan .....	MI	20,147,940	309,879,769	3,122			330,030,831
24.	Minnesota .....	MN	185,331,057	153,792,364	796			339,124,217
25.	Mississippi .....	MS	3,831,464	63,008,478	16			66,839,958
26.	Missouri .....	MO	41,307,137	116,100,886				157,408,023
27.	Montana .....	MT	855,580	24,152,432	3			25,008,015
28.	Nebraska .....	NE	2,095,005	46,792,552	(495)			48,887,062
29.	Nevada .....	NV	4,971,301	67,242,160	1			72,213,462
30.	New Hampshire .....	NH	3,571,516	73,253,033	3			76,824,552
31.	New Jersey .....	NJ	709,325,526	409,009,838	1,149			1,118,336,513
32.	New Mexico .....	NM	377,140	27,911,066	48			28,288,254
33.	New York .....	NY	402,296,892	1,187,660,817	391,159			1,590,348,868
34.	North Carolina .....	NC	126,536,010	230,606,889	13,312			357,156,211
35.	North Dakota .....	ND	21,836,543	25,055,563	1			46,892,107
36.	Ohio .....	OH	66,847,325	432,395,838	9,601		10,272,116,331	10,771,369,095
37.	Oklahoma .....	OK	1,414,131	108,629,852	361			110,044,344
38.	Oregon .....	OR	8,765,478	99,451,043				108,216,521
39.	Pennsylvania .....	PA	185,861,787	505,859,218	2,731			691,723,736
40.	Rhode Island .....	RI	5,984,286	57,793,268	1			63,777,555
41.	South Carolina .....	SC	18,415,992	95,588,255	3			114,004,250
42.	South Dakota .....	SD	342,741	17,846,113				18,188,854
43.	Tennessee .....	TN	22,838,931	154,498,913	472			177,338,316
44.	Texas .....	TX	103,234,695	695,840,927	6,787			799,082,409
45.	Utah .....	UT	6,006,975	49,456,437	9,593			55,473,005
46.	Vermont .....	VT	1,198,435	27,442,773	18,001			28,659,209
47.	Virginia .....	VA	33,330,622	203,606,126				236,936,748
48.	Washington .....	WA	7,039,631	242,900,439	1			249,940,071
49.	West Virginia .....	WV	9,605,962	49,409,645	12			59,015,619
50.	Wisconsin .....	WI	19,794,969	190,614,651				210,409,620
51.	Wyoming .....	WY	738,796	9,958,832	1,712			10,699,340
52.	American Samoa .....	AS	35,604					35,604
53.	Guam .....	GU	139	68,522				68,661
54.	Puerto Rico .....	PR	236,433	133,202,898				133,439,331
55.	U.S. Virgin Islands .....	VI	17,216	609,608				626,824
56.	Northern Mariana Islands .....	MP						
57.	Canada .....	CAN	48,326	1,115,153				1,163,479
58.	Aggregate Other Alien .....	OT	557,164	22,676,657				23,233,821
59.	Total		3,454,853,448	11,826,266,267	487,851		10,272,116,331	25,553,723,897

ANNUAL STATEMENT FOR THE YEAR 2022 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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	10 W. Nationwide, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	1000 Yard Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	1015 Long Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	1050 Yard Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	1125 Rail Street, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1733036 ..	.....	.....	.....	120 Acre Partners, LLC .....	.. DE.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	95.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	1 .....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	1125 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939867 ..	.....	.....	.....	1175 Bobcat, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	26-2451988 ..	.....	.....	.....	1492 Capital, LLC .....	.. OH.....	NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	111 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	155 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	161 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1580283 ..	.....	.....	.....	170 Marconi, LLC .....	.. OH.....	NIA.....	NID Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1580283 ..	.....	.....	.....	245 Parks Edge Place, LLC .....	.. OH.....	NIA.....	NID Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	275 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	300 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	310 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	343 N. Front, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	400 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1580283 ..	.....	.....	.....	400 West Nationwide Boulevard, LLC .....	.. OH.....	NIA.....	NID Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	410 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1580283 ..	.....	.....	.....	425 West Nationwide Boulevard, LLC .....	.. OH.....	NIA.....	NID Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	44 Chestnut, LLC .....	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	38-4118665 ..	.....	.....	.....	500 Neil Avenue, LLC .....	.. OH.....	NIA.....	NID HP, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	38-4118665 ..	.....	.....	.....	515 Kilbourne Street, LLC .....	.. OH.....	NIA.....	NID HP, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	87-1954007 ..	.....	.....	.....	525 Cleveland Avenue, LLC .....	.. OH.....	NIA.....	Nationwide Financial Services, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	75 Rivulon Boulevard, LLC .....	.. OH.....	NIA.....	NRI-Rivulon, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	775 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	777 Swan Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	780 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	795 Rail Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	800 Bobcat Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	800 Goodale Boulevard, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	800 Yard Street, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	805 Bobcat Avenue, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	808 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	820 Goodale Boulevard, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	822 Williams Avenue, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	825 Junction Way, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	828 Bobcat Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	840 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	840 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	845 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	855 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	860 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	880 Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	880 Yard Street, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	895 W. Third Avenue, LLC .....	.. OH.....	NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	950 Dorchester Way, LLC .....	.. OH.....	NIA.....	GVY Residential, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140	Nationwide		20-4939866				950 Goodale Boulevard, LLC	.. OH.....	NIA.....	NRI Equity Land Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				960 Bobcat Avenue, LLC	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				975 Rail Street, LLC	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				995 Yard Street, LLC	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				18615 Claret Drive, LLC	.. OH.....	NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				18655 Claret Drive, LLC	.. OH.....	NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				18700 Hayden Road, LLC	.. OH.....	NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				18750 Hayden Road, LLC	.. OH.....	NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1580283				AD DORA, LLC	.. OH.....	NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1580283				ADTV, LLC	.. OH.....	NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		52-2227314				AGMC Reinsurance, Ltd.	.. TCA.....	NIA.....	Nationwide Advantage Mortgage Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide	10127	27-0114983				ALLIED Insurance Company of America	.. OH.....	IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
							ALLIED Property and Casualty Insurance Company								
. 0140	Nationwide	42579	42-1201931				ALLIED Texas Agency, Inc.	.. IA.....	IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		42-1527863				AMCO Insurance Company	.. TX.....	IA.....	AMCO Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide	19100	42-6054959				AMCO Insurance Company	.. IA.....	IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		59-1031596				American Marine Underwriters, Inc.	.. FL.....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		81-4532504				American Tax Credit Fund 2017-A, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		82-2001573				American Tax Credit Fund 2017-B, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		82-4591498				American Tax Credit Fund 2018-A, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		83-0606592				American Tax Credit Fund 2018-B, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		83-0620232				American Tax Credit Fund 2018-C, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		83-3900932				American Tax Credit Fund 2019-A, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		83-3953721				American Tax Credit Fund 2019-B, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		84-3443067				American Tax Credit Fund 2020-A, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		85-2359702				American Tax Credit Fund 2020-B, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
							American Tax Credit Fund 2021-A, LLC (fka American Tax Credit Fund 2020-C, LLC)	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		85-2649655				American Tax Credit Fund 2021-B, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		86-2502912				American Tax Credit Fund 2021-C, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		87-1349942				American Tax Credit Fund 2022-A, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		87-4753681				American Tax Credit Fund 2022-B, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		87-4771309				American Tax Credit Fund 2023-A, LLC	.. OH.....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		92-1389304				Arena District CA I, LLC	.. OH.....	NIA.....	NID Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		90-0280710				Arena District Owners Association	.. OH.....	OTH.....	Other non-Nationwide	n/a		Other non-Nationwide	.... NO.....	2
. 0140	Nationwide		31-1486309				Cavasson Hotel, LLC	.. OH.....	NIA.....	Cavasson Hotel Holdings, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				Cavasson Hotel Holdings, LLC	.. OH.....	NIA.....	NRI Cavasson, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		20-1618232				CNRI-Cannonsport Condominium, LLC	.. OH.....	NIA.....	CNRI-Cannonsport, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		20-1618232				CNRI-Cannonsport, LLC	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide	29262	74-1061659				Colonial County Mutual Insurance Company	.. TX.....	IA.....	Other non-Nationwide	contract		Other non-Nationwide	.... NO.....	2
. 0140	Nationwide		31-1486309				Cottages at Hyatts LLC	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide	18961	68-0066866				Crestbrook Insurance Company	.. OH.....	IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		31-1486309				Crewville, Ltd.	.. OH.....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide		84-5052608				Danforth, LLC	.. OH.....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide	42587	42-1207150				Depositors Insurance Company	.. IA.....	IA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
							Discover Affordable Housing Investment Fund I LLC	.. OH.....	OTH.....	Other non-Nationwide	n/a	0.000	Other non-Nationwide	.... NO.....	2
. 0140	Nationwide		33-0096671				DVM Insurance Agency	.. CA.....	NIA.....	Veterinary Pet Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	
. 0140	Nationwide	15821	47-4523959				Eagle Captive Reinsurance, LLC	.. OH.....	IA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	.... NO.....	



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SCHEDULE Y  
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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140	Nationwide		26-3260559				E-Risk Services, L.L.C.	.. DE	..... NIA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	22209	75-6013587				Freedom Specialty Insurance Company	.. OH	..... IA	Scottsdale Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		20-4939866				Grandview Yard Hotel Holdings, LLC	.. OH	..... NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		20-4939866				Grandview Yard Hotel, LLC	.. OH	..... NIA	Grandview Yard Hotel Holdings, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		20-4939866				GVY Residential, LLC	.. OH	..... NIA	NRI Equity Land Investments, LLC	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	23582	41-0417250				Harleysville Insurance Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
							Harleysville Insurance Company of New Jersey								
. 0140	Nationwide	42900	23-2253669					.. NJ	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	10674	23-2864924				Harleysville Insurance Company of New York	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	14516	38-3198542				Harleysville Lake States Insurance Company	.. MI	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	35696	23-2384978				Harleysville Preferred Insurance Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	26182	04-1989660				Harleysville Worcester Insurance Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		20-3289512				Jefferson National Financial Corp.	.. DE	..... NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... YES	.....
. 0140	Nationwide	64017	75-0300900				Jefferson National Life Insurance Company	.. TX	..... IA	Jefferson National Financial Corporation	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
							Jefferson National Life Insurance Company of New York	.. NY	..... IA	Jefferson National Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-1486309				Jerome Village Company, LLC	.. OH	..... NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-1486309				JV Developers, LLC	.. OH	..... NIA	Nationwide Realty Investors, Ltd.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		74-1395229				Lone Star General Agency, Inc.	.. TX	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	11991	38-0865250				National Casualty Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide						National Casualty Company of America, Ltd.	.. GBR	..... IA	National Casualty Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	.. IA	..... NIA	AMCO Insurance Company	Ownership	87.300	Nationwide Mutual Insurance Company	... YES	..... 1
										ALLIED Property & Casualty Insurance					
. 0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	.. IA	..... NIA	Company	Ownership	8.470	Nationwide Mutual Insurance Company	... YES	..... 1
. 0140	Nationwide		42-1154244				Nationwide Advantage Mortgage Company	.. IA	..... NIA	Depositors Insurance Company	Ownership	4.230	Nationwide Mutual Insurance Company	... YES	..... 1
							Nationwide Affinity Insurance Company of America	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	26093	48-0470690				Nationwide Agent Risk Purchasing Group, Inc. (fka On Your Side Nationwide Insurance Agency, Inc.)	.. OH	..... NIA	NBS Insurance Agency, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	28223	42-1015537				Nationwide Agribusiness Insurance Company	.. IA	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-1578869				Nationwide Arena, LLC	.. OH	..... NIA	NRI Arena, LLC	Ownership	90.000	Nationwide Mutual Insurance Company	... NO	..... 1
. 0140	Nationwide		20-8670712				Nationwide Asset Management, LLC	.. OH	..... NIA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	10723	95-0639970				Nationwide Assurance Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-1036287				Nationwide Cash Management Company	.. OH	..... NIA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-4416546				Nationwide Corporation	.. OH	..... NIA	Nationwide Mutual Insurance Company	Ownership	95.200	Nationwide Mutual Insurance Company	... YES	..... 1
. 0140	Nationwide		31-4416546				Nationwide Corporation	.. OH	..... NIA	Nationwide Mutual Fire Insurance Company	Ownership	4.800	Nationwide Mutual Insurance Company	... YES	..... 1
. 0140	Nationwide		31-1667326				Nationwide Financial Assignment Company	.. OH	..... NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		23-2412039				Nationwide Financial General Agency, Inc.	.. PA	..... NIA	NFS Distributors, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-6554353				Nationwide Financial Services Capital Trust	.. DE	..... NIA	Nationwide Financial Services, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-1486870				Nationwide Financial Services, Inc.	.. DE	..... UDP	Nationwide Corporation	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		52-6969857				Nationwide Fund Advisors	.. DE	..... NIA	Nationwide Financial Services, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-1748721				Nationwide Fund Distributors LLC	.. DE	..... NIA	NFS Distributors, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		31-0900518				Nationwide Fund Management LLC	.. DE	..... NIA	NFS Distributors, Inc.	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	23760	31-4425763				Nationwide General Insurance Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	10070	31-1399201				Nationwide Indemnity Company	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	25453	95-2130882				Nationwide Insurance Company of America	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide	10948	31-1613686				Nationwide Insurance Company of Florida	.. OH	..... IA	Nationwide Mutual Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....
. 0140	Nationwide		41-2206199				Nationwide Investment Advisors, LLC	.. OH	..... NIA	Nationwide Life Insurance Company	Ownership	100.000	Nationwide Mutual Insurance Company	... NO	.....

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide .....	.....	73-0988442 ..	.....	.....	.....	Nationwide Investment Services Corporation .. Nationwide Life and Annuity Insurance Company	.. OK.....	..... NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... YES.....	.....
. 0140 ...	Nationwide .....	..... 92657 ..	31-1000740 ..	.....	.....	.....	.....	.. OH.....	..... IA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 66869 ..	31-4156830 ..	.....	.....	.....	.....	.. OH.....	..... RE.....	Nationwide Financial Services, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	13-4212969 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	01-0749754 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	54-2113175 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	58-2672725 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-0382144 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-0745965 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-1918935 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-2303694 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-2303602 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-2450960 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	20-2774223 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	21-1288836 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	27-1362364 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	45-0469525 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	..... 42110 ..	75-1780981 ..	.....	.....	.....	.....	.. TX.....	..... IA.....	n/a .....	contract .....	.....	Nationwide Mutual Insurance Company ...	... NO.....	... 2 .....
. 0140 ...	Nationwide .....	.....	42-1373380 ..	.....	.....	.....	.....	.. IA.....	..... NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	75-3191025 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 23779 ..	31-4177110 ..	.....	.....	.....	.....	.. OH.....	..... IA.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	... NO.....	... 2 .....
. 0140 ...	Nationwide .....	..... 23787 ..	31-4177100 ..	.....	.....	.....	.....	.. OH.....	..... UIP.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	... NO.....	... 2 .....
. 0140 ...	Nationwide .....	.....	34-2012765 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 37877 ..	31-0970750 ..	.....	.....	.....	.....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	97.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Indemnity Company .....	Ownership.....	3.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	.....	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	73-0948330 ..	.....	.....	.....	.....	.. DE.....	..... NIA.....	NFS Distributors, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	83-2250056 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide SBL, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	36-2434406 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	NFS Distributors, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	46-1952215 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	46-1971926 ..	.....	.....	.....	.....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 1 .....
. 0140 ...	Nationwide .....	.....	31-1592130 ..	2729677 ..	.....	.....	.....	.. US.....	..... OTH.....	Nationwide Financial Services, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	... 2 .....

ANNUAL STATEMENT FOR THE YEAR 2022 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	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0140 ...	Nationwide ...	.....	20-5976272 ..	.....	.....	.....	Nationwide Ventures, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-0871532 ..	.....	.....	.....	NBS Insurance Agency, Inc. ....	.. OH.....	.. IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	85-4193218 ..	.....	.....	.....	NCS Arizona, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	11-3651828 ..	.....	.....	.....	ND La Quinta Partners, LLC .....	.. DE.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	95.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	1 .....
. 0140 ...	Nationwide ...	.....	31-1630871 ..	.....	.....	.....	NFS Distributors, Inc. ....	.. DE.....	.. NIA.....	Nationwide Financial Services, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	82-5195340 ..	.....	.....	.....	NLIC REO Holdings, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	82-5194959 ..	.....	.....	.....	NMIC REO Holdings, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	46-3762545 ..	.....	.....	.....	NNOV8, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 ..	.....	.....	.....	North of Third, LLC .....	.. OH.....	.. NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Arena, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Brookside, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Builders, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Cavasson, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Corporate Housing, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Cramer Creek, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	20-4939866 ..	.....	.....	.....	NRI Equity Land Investments, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	80.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	1 .....
. 0140 ...	Nationwide ...	.....	26-0212217 ..	.....	.....	.....	NRI Equity Tampa, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI Office Ventures, Ltd .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1580283 ..	.....	.....	.....	NRI Telecom, LLC .....	.. OH.....	.. NIA.....	NID Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	31-1486309 ..	.....	.....	.....	NRI-Rivulon, LLC .....	.. OH.....	.. NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	90-0729552 ..	.....	.....	.....	NTCIF-2011, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	50.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	1 .....
. 0140 ...	Nationwide ...	.....	90-0729552 ..	.....	.....	.....	NTCIF-2011, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Fire Insurance Company ..	Ownership.....	50.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	1 .....
. 0140 ...	Nationwide ...	.....	27-4700627 ..	.....	.....	.....	NTCP 2011-A, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	46-0741029 ..	.....	.....	.....	NTCP 2012-A, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	46-3309896 ..	.....	.....	.....	NTCP 2013-C, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	46-4111078 ..	.....	.....	.....	NTCP 2014-A, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	47-1404116 ..	.....	.....	.....	NTCP 2014-B, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	47-1413242 ..	.....	.....	.....	NTCP 2014-C, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	47-3909345 ..	.....	.....	.....	NTCP 2015-A, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	47-4148470 ..	.....	.....	.....	NTCP 2015-B, LLC .....	.. OH.....	.. OTH.....	Nationwide Life Insurance Company .....	Other.....	0.010 ...	Nationwide Mutual Insurance Company ...	... NO.....	2 .....
. 0140 ...	Nationwide ...	.....	81-3836925 ..	.....	.....	.....	NTCP 2016-A, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	82-2015065 ..	.....	.....	.....	NTCP 2017-A, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	84-1969518 ..	.....	.....	.....	NW Fyrebyrd, LLC .....	.. OH.....	.. NIA.....	NNOV8, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	85-3363961 ..	.....	.....	.....	NW Next, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	81-0936428 ..	.....	.....	.....	NW Private Debt, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	26-1903919 ..	.....	.....	.....	NW REI, LLC .....	.. DE.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	92-1294202 ..	.....	.....	.....	NW-Adams, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-1087011 ..	.....	.....	.....	NW-Asheville, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	84-3942108 ..	.....	.....	.....	NW-Beloit, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Fire Insurance Company ..	Ownership.....	100.000 ...	Nationwide Mutual Fire Insurance Company ..	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-0847675 ..	.....	.....	.....	NW-Broadway at Surf, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	88-2152576 ..	.....	.....	.....	NW-Colfax, LLC .....	.. OH.....	.. NIA.....	Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	92-0292630 ..	.....	.....	.....	NW-Conroe, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	87-3648595 ..	.....	.....	.....	NW-Corazon, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	84-2920247 ..	.....	.....	.....	NW-Cranberry, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	86-3529884 ..	.....	.....	.....	NW-Englewood, LLC .....	.. OH.....	.. NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	84-4388876 ..	.....	.....	.....	NW-Escalante, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide ...	.....	86-1538532 ..	.....	.....	.....	NW-Escalante II, LLC .....	.. OH.....	.. NIA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....

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SCHEDULE Y  
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.0140	Nationwide		31-1580283				NWD 205 Vine, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 225 Nationwide, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 230 West, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 240 Nationwide, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 250 Brodbelt, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 250 West, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 265 Neil, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 275 Marconi, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 300 Neil, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 300 Spring, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 355 McConnell, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 425 Nationwide, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD 500 Nationwide, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Arena Crossing, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Arena District I, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Arena District II, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Arena District MM, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Arena District PW, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Arena District V, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Athletic Club, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		88-2975730				NW-Boise, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		31-1580283				NWD Brodbelt, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		30-0876022				NWD Franklinton, LLC	..OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	80.000	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		31-4118665				NWD HP, LLC	..OH....	NIA.....	NWD Investments, LLC	Ownership.....	75.000	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		31-1580283				NWD Investments, LLC	..OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	80.000	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		31-1486309				NWGH, LLC	..OH....	NIA.....	Nationwide Realty Investors, Ltd.	Ownership.....	75.000	Nationwide Mutual Insurance Company	...NO.....	1
.0140	Nationwide		87-3124154				NW-Gallatin, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		85-1262262				NW-Gator Walk, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		86-2431839				NW-Hub13, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		47-2482818				NW-Jasper WAG, LLC	..OH....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-3767006				NW-Kingsbury, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		81-5146596				NW-Logan, LLC	..OH....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-1565013				NW-Midtown, LLC	..OH....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide						Nationwide Life and Annuity Insurance Company								
.0140	Nationwide		85-1246853				NW-Oakbrook, LLC	..OH....	NIA.....		Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		88-2595124				NW-OG, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		83-2260477				NW-ORBD, LLC	..OH....	NIA.....	NW REI (NMFC), LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		47-2449044				NW-Promenade at Madison, LLC	..OH....	NIA.....	NW REI, LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		83-2173918				NW-Radius, LLC	..OH....	NIA.....	NW REI (NLIC), LLC	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-1367836				NW-Rancho, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		88-1405151				NW-Riverchase, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		86-3702669				NW-RPG Cranberry, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-0890277				NW-Ruby, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-3273918				NW-San Marco, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		87-3289289				NW-San Pablo, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		84-4326171				NW-Southbank, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		81-3212025				NW-Springfield, LLC	..OH....	NIA.....	Nationwide Mutual Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	
.0140	Nationwide		85-0536537				NW-Sweetwater, LLC	..OH....	NIA.....	Nationwide Life Insurance Company	Ownership.....	100.000	Nationwide Mutual Insurance Company	...NO.....	

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. 0140 ...	Nationwide .....	.....	92-0677233 ..	.....	.....	.....	NW-UNCC, LLC .....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	81-1603024 ..	.....	.....	.....	NW REI (NLAIC), LLC .....	.. OH.....	..... NIA.....	Nationwide Life and Annuity Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	81-1619428 ..	.....	.....	.....	NW REI (NLIC), LLC .....	.. OH.....	..... NIA.....	Nationwide Life Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	81-1861190 ..	.....	.....	.....	NW REI (NMFIC), LLC .....	.. OH.....	..... NIA.....	Nationwide Mutual Fire Insurance Company ..	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-0947092 ..	.....	.....	.....	OCH Company, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	26-0263012 ..	.....	.....	.....	Old Track Street Owners Association, Inc. ...	.. OH.....	..... OTH.....	Other non-Nationwide .....	n/a .....	.....	Other non-Nationwide .....	... NO.....	..... 2 .....
. 0140 ...	Nationwide .....	..... 13999	27-1712056 ..	.....	.....	.....	Olentangy Reinsurance, LLC .....	.. VT.....	..... IA.....	Nationwide Life and Annuity Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	Perimeter A, Ltd. ....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	20-4939866 ..	.....	.....	.....	Rail Street Parking, LLC .....	.. OH.....	..... NIA.....	NRI Equity Land Investments, LLC .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Registered Investment Advisors Services, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	.....	75-2938844 ..	.....	.....	.....	.....	.. TX.....	..... NIA.....	Nationwide Financial Services, Inc. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	82-0549218 ..	.....	.....	.....	Retention Alternatives Ltd. ....	.. BMU.....	..... IA.....	Nationwide Mutual Fire Insurance Company ..	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 15580	31-1117969 ..	.....	.....	.....	Scottsdale Indemnity Company .....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 41297	31-1024978 ..	.....	.....	.....	Scottsdale Insurance Company .....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 10672	86-0835870 ..	.....	.....	.....	Scottsdale Surplus Lines Insurance Company ..	.. AZ.....	..... IA.....	Scottsdale Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1610040 ..	.....	.....	.....	The Waterfront Partners, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	50.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	..... 1 .....
. 0140 ...	Nationwide .....	..... 36269	86-0619597 ..	.....	.....	.....	Titan Insurance Company .....	.. MI.....	..... IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	75-1284530 ..	.....	.....	.....	Titan Insurance Services, Inc. ....	.. TX.....	..... IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	33-0160222 ..	.....	.....	.....	V.P.I. Services, Inc. ....	.. CA.....	..... IA.....	Veterinary Pet Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 42285	95-3750113 ..	.....	.....	.....	Veterinary Pet Insurance Company .....	.. OH.....	..... IA.....	Scottsdale Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	..... 42889	34-1394913 ..	.....	.....	.....	Victoria Fire & Casualty Company .....	.. OH.....	..... IA.....	Nationwide Mutual Insurance Company .....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Victoria Fire & Casualty Insurance Company ..	.....	.....	.....	.....	.....	.....	.....	.....
. 0140 ...	Nationwide .....	..... 10105	34-1777972 ..	.....	.....	.....	Victoria Select Insurance Company .....	.. OH.....	..... IA.....	.....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....
. 0140 ...	Nationwide .....	.....	31-1486309 ..	.....	.....	.....	Wellington Park, LLC .....	.. OH.....	..... NIA.....	Nationwide Realty Investors, Ltd. ....	Ownership.....	100.000 ...	Nationwide Mutual Insurance Company ...	... NO.....	.....

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 2022 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	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)
10127	27-0114983	Allied Insurance Company of America							*			314,491,600
42579	42-1201931	Allied Property & Casualty Insurance Company							*			705,129,045
19100	42-6054959	AMCO Insurance Company	(20,000,000)						*		(20,000,000)	1,095,261,191
29262	74-1061659	Colonial County Mutual Insurance Company							0			270,869,339
18961	68-0066866	Crestbrook Insurance Company	(6,800,000)	2,500,000					*		(4,300,000)	725,812,738
42587	42-1207150	Depositors Insurance Company							*			725,103,311
	33-0096671	DVM Insurance Agency, Inc	(35,000)						0		(35,000)	
15821	47-4523959	Eagle Captive Reinsurance, LLC	(130,000,000)						0		(130,000,000)	(1,797,498,373)
	26-3260559	E-Risk Services, LLC	(72,000,000)						0		(72,000,000)	
22209	75-6013587	Freedom Specialty Insurance Company							0			910,559,703
23582	41-0417250	Harleysville Insurance Company							*			545,556,176
42900	16-1075588	Harleysville Insurance Company of New Jersey							*			213,332,227
10674	23-2864924	Harleysville Insurance Company of New York	(2,000,000)						*		(2,000,000)	208,345,264
14516	38-3198542	Harleysville Lake States Insurance Company							*			26,648,363
35696	23-2384978	Harleysville Preferred Insurance Company							*			253,009,756
26182	04-1989660	Harleysville Worcester Insurance Company							*			492,918,907
11991	38-0865250	National Casualty Company		3,200,000					0		3,200,000	2,255,545,640
26093	48-0470690	Nationwide Affinity Insurance Company of America							*			356,053,623
28223	42-1015537	Nationwide Agribusiness Insurance Company							*			1,121,388,709
10723	95-0639970	Nationwide Assurance Company							*			273,018,982
	31-4416546	Nationwide Corporation		3,049,000					0		3,049,000	
	31-1486870	Nationwide Financial Services, Inc	(310,472,542)						0		(310,472,542)	
23760	31-4425763	Nationwide General Insurance Company		33,100,000					*		33,100,000	1,700,135,974
10070	31-1399201	Nationwide Indemnity Company							*			1,113,978,391
25453	95-2130882	Nationwide Insurance Company of America		30,300,000					*		30,300,000	1,482,303,519
10948	31-1613686	Nationwide Insurance Company of Florida							*			85,764,023
92657	31-1000740	Nationwide Life and Annuity Insurance Company		855,472,542					0		855,472,542	2,211,766,452
66869	31-4156830	Nationwide Life Insurance Company	130,000,000	(550,000,000)					0		(420,000,000)	1,451,672,578
42110	75-1780981	Nationwide Lloyds							*			306,982
	75-3191025	Nationwide Mutual Capital, LLC	153,370						0		153,370	
23779	82-0549218	Nationwide Mutual Fire Insurance Company	(60,897,307)	(3,049,000)					*		(63,946,307)	(5,264,002,098)
23787	31-4177100	Nationwide Mutual Insurance Company	62,004,440	(188,785,408)					*		(126,780,968)	(16,917,047,211)
	34-2012765	Nationwide Private Equity Fund, LLC	138,695						0		138,695	
37877	31-0970750	Nationwide Property & Casualty Insurance Company							*			1,475,175,231
	31-1486309	Nationwide Realty Investors		925,000					0		925,000	
00000	83-2250056	Nationwide SBL, LLC		5,000,000					0		5,000,000	
	20-5976272	Nationwide Ventures, LLC		4,000,000					0		4,000,000	

ANNUAL STATEMENT FOR THE YEAR 2022 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	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)
	31-0871532	NBS Insurance Agency, Inc	(8,153,000)						0		(8,153,000)	
	85-4193218	NCS Arizona, LLC		1,500,000					0		1,500,000	
	46-3762545	NNOV8, LLC		54,500,000					0		54,500,000	
	26-1903919	NW REI, LLC	46,656,495	58,760,408					0		105,416,903	
	81-1861190	NW-REI (NMFIC), LLC	60,897,307						0		60,897,307	
13999	27-1712056	Olentangy Reinsurance, LLC							0			(1,865,940,657)
15580	31-1117969	Scottsdale Indemnity Company							0			713,987,668
41297	31-1024978	Scottsdale Insurance Company							*			4,921,223,155
10672	86-0835870	Scottsdale Surplus Lines Insurance Company							0			62,264,879
36269	86-0619597	Titan Insurance Company							0			(117,044)
42285	95-3750113	Veterinary Pet Insurance Company	196,000						*		196,000	131,510,235
42889	34-1394913	Victoria Fire & Casualty Company							*			1,266,478
10105	34-1777972	Victoria Select Insurance Company							0			205,244
	33-0160222	VPI Services, Inc	(161,000)						0		(161,000)	
9999999	Control Totals								XXX			

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater Than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control\ Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control\ Affiliation of Column 5 Over Column 6 (Yes/No)
Allied Insurance Company of America .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Allied Property & Casualty Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
AMCO Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Colonial County Mutual Insurance Company .....	Lone Star General Agency, Inc. ....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Crestbrook Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Depositors Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Eagle Captive Reinsurance, LLC .....	Nationwide Life Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Freedom Specialty Insurance Company .....	Scottsdale Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Harleysville Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Harleysville Insurance Company of New Jersey .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Harleysville Insurance Company of New York .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Harleysville Lake States Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Harleysville Preferred Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Harleysville Worcester Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Jefferson National Life Insurance Company .....	Jefferson National Financial Corporation .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Jefferson National Life Insurance Company of New York .....	Jefferson National Life Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
National Casualty Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Affinity Insurance Company of America ....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Agribusiness Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Assurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide General Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Indemnity Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Insurance Company of America .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Insurance Company of Florida .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Life and Annuity Insurance Company .....	Nationwide Life Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Life Insurance Company .....	Nationwide Financial Services, Inc. ....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Nationwide Lloyds .....	n/a .....			Nationwide Mutual Insurance Company .....	Nationwide .....		NO.....
Nationwide Mutual Fire Insurance Company .....	n/a .....			Nationwide Mutual Insurance Company .....	Nationwide .....		NO.....
Nationwide Mutual Insurance Company .....	n/a .....			Nationwide Mutual Insurance Company .....	Nationwide .....		NO.....
Nationwide Property & Casualty Insurance Company ....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Olentangy Reinsurance, LLC .....	Nationwide Life and Annuity Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Scottsdale Indemnity Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Scottsdale Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Scottsdale Surplus Lines Insurance Company .....	Scottsdale Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Titan Insurance Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Veterinary Pet Insurance Company .....	Scottsdale Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Victoria Fire & Casualty Company .....	Nationwide Mutual Insurance Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....
Victoria Select Insurance Company .....	Victoria Fire & Casualty Company .....	100.000	NO.....	Nationwide Mutual Insurance Company .....	Nationwide .....	100.000	NO.....



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

	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 Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) .....	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
JUNE FILING	
8. Will an audited financial report be filed by June 1? .....	YES
9. Will Accountant’s Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

SUPPLEMENTAL FILINGS

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

MARCH FILING	
10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ..	NO
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	YES
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
13. 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
14. 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
15. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
16. 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
17. 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
18. 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
19. 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
20. 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
21. 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
22. 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
23. 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
24. 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
25. 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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26.	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
27.	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
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) .....	NO
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? .....	YES
30.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
31.	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
32.	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
33.	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
34.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? .....	YES
35.	Will the Health Care Receivables Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
APRIL FILING		
36.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1? .....	YES
37.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
38.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) ..	NO
39.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	YES
40.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	WAIVED
41.	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? .....	WAIVED
42.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? .....	NO
43.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	YES
44.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1? .....	YES
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	YES
46.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	YES
47.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile 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
10.	Explanations:	
12.		
18.		
20.		
21.		
25.		
27.		
28.		
30.		
31.		
32.		
33.		
35.		
37.		
38.		
42.		
Bar Codes:		
10.	SIS Stockholder Information Supplement [Document Identifier 420]	
12.	Trusted Surplus Statement [Document Identifier 490]	
18.	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]	
20.	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]	
21.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	
25.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	
27.	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]	
28.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]	
30.	Medicare Part D Coverage Supplement [Document Identifier 365]	
31.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	
32.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	
33.	Relief from the Requirements for Audit Committees [Document Identifier 226]	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

35. Health Care Receivables Supplement [Document Identifier 470]



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



38. Credit Insurance Experience Exhibit [Document Identifier 230]



40. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]



41. Supplemental Health Care Exhibit's Expense Allocation Report  
[Document Identifier 217]



42. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D  
[Document Identifier 435]



ANNUAL STATEMENT FOR THE YEAR 2022 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 .....	32,254,434	27,311,759	4,942,675	5,802,273
2505.	Disallowed interest maintenance reserve .....	75,087,891	75,087,891		
2597.	Summary of remaining write-ins for Line 25 from overflow page	107,342,325	102,399,650	4,942,675	5,802,273

Additional Write-ins for Liabilities Line 25

		1	2
		Current Year	Prior Year
2504.	Reserve for litigation and contingencies .....	4,794,248	11,224,413
2505.	Reserve for rate stabilizations .....	16,447,672	16,197,913
2506.	Tax credit commitment liabilities .....	49,335,713	45,426,307
2507.	Contingency reserve .....	196,606,444	190,413,225
2508.	Deferred gain liabilities .....	638,143	
2597.	Summary of remaining write-ins for Line 25 from overflow page	267,822,220	263,261,858

Additional Write-ins for Summary of Operations Line 27

		1	2
		Current Year	Prior Year
2704.	Change in rate stabilization reserves .....	249,760	908,499
2705.	Change in loss recognition reserves .....	400,000	500,000
2797.	Summary of remaining write-ins for Line 27 from overflow page	649,760	1,408,499

Additional Write-ins for Exhibit of Nonadmitted Assets Line 25

		1	2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2504.	Disallowed interest maintenance reserve .....	75,087,891		(75,087,891)
2597.	Summary of remaining write-ins for Line 25 from overflow page	75,087,891		(75,087,891)

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Analysis of Operations - Summary Line 27

	1	2	3	4	5	6	7	8	9
	Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Other Lines of Business	YRT Mortality Risk Only
2704. Change in rate stabilization reserves .....	249,759	.....	213,040	.....	.....	36,719	.....	.....	.....
2705. Change in loss recognition reserves .....	400,000	.....	.....	.....	.....	400,000	.....	.....	.....
2797. Summary of remaining write-ins for Line 27 from overflow page	649,759	.....	213,040	.....	.....	436,719	.....	.....	.....



SUPPLEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1522AL .....	P.....	NO.....	1234067 .....	08/12/1982 .....		05/11/2001 .....	03/01/1995 .....	Medicare Supplement .....	7,210 .....	7,136 .....	99.0 .....	1 .....						
YES.....	2122AL .....	B.....	NO.....	1234067 .....	06/08/1992 .....	11/06/2002 .....	05/11/2001 .....	12/01/2002 .....	Medicare Supplement .....		26 .....								
YES.....	2123AL .....	F.....	NO.....	1234067 .....	06/08/1992 .....	11/06/2002 .....	05/11/2001 .....	12/01/2002 .....	Medicare Supplement .....	11,984 .....	5,998 .....	50.1 .....	2 .....						
YES.....	2129-1 .....	C.....	NO.....	1234067 .....	08/03/1999 .....	11/06/2002 .....	05/11/2001 .....	12/01/2002 .....	Medicare Supplement .....	5,738 .....	4,169 .....	72.7 .....	1 .....						
0199999. Total Experience on Individual Policies										24,932	17,329	69.5	4						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
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 Percent of Premiums Earned			16	17 Percent of Premiums Earned	
										Amount							
YES.....	2121CT94 .....	A.....	NO.....	1234067 .....	07/28/1992 .....	11/01/2002 .....	08/01/2001 .....	12/01/2001 .....	Medicare Supplement .....	17,837 .....	7,286 .....	40.8 .....	8 .....	.....	.....	.....	.....
YES.....	2122CT94 .....	B.....	NO.....	1234067 .....	07/28/1992 .....	11/01/2002 .....	08/01/2001 .....	12/01/2001 .....	Medicare Supplement .....	34,655 .....	14,971 .....	43.2 .....	7 .....	.....	.....	.....	.....
YES.....	2123CT94 .....	F.....	NO.....	1234067 .....	07/28/1992 .....	11/01/2002 .....	08/01/2001 .....	12/01/2001 .....	Medicare Supplement .....	67,395 .....	29,125 .....	43.2 .....	9 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										119,887	51,382	42.9	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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1524 .....	P.....	NO.....	1234067 .....	12/16/1982 .....		05/10/2001 .....	12/01/1991 .....	Medicare Supplement .....	16,652 .....	27,470 .....	165.0 .....	7 .....						
YES.....	2121FL .....	A.....	NO.....	1234067 .....	03/12/1992 .....	12/03/2002 .....	05/10/2001 .....	12/01/2002 .....	Medicare Supplement .....	2,836 .....	2,372 .....	83.6 .....	1 .....						
YES.....	2122FL .....	B.....	NO.....	1234067 .....	03/12/1992 .....	12/03/2002 .....	05/10/2001 .....	12/01/2002 .....	Medicare Supplement .....	38,236 .....	36,808 .....	96.3 .....	17 .....						
YES.....	2123FL .....	F.....	NO.....	1234067 .....	03/12/1992 .....	12/03/2002 .....	05/10/2001 .....	12/01/2002 .....	Medicare Supplement .....	331,464 .....	311,149 .....	93.9 .....	106 .....						
0199999. Total Experience on Individual Policies										389,188	377,799	97.1	131						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
										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.....	1924 .....	.....P.....	.....NO.....	1234067 .....	09/19/1989 .....	.....	05/31/2001 .....	07/01/1992 .....	Medicare Supplement .....	7,461 .....	12,594 .....	168.8 .....	2 .....	.....	.....	.....	.....
.....YES.....	2122GA .....	.....B.....	.....NO.....	1234067 .....	08/28/1992 .....	11/01/2002 .....	05/31/2001 .....	12/01/2002 .....	Medicare Supplement .....	3,784 .....	339 .....	9.0 .....	1 .....	.....	.....	.....	.....
.....YES.....	2123GA .....	.....F.....	.....NO.....	1234067 .....	08/28/1992 .....	11/01/2002 .....	05/31/2001 .....	12/01/2002 .....	Medicare Supplement .....	76,448 .....	24,289 .....	31.8 .....	12 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										87,693	37,222	42.4	15				

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1522 .....	P.....	NO.....	1234067 .....	09/21/1982 .....		05/21/2001 .....	12/01/1991 .....	Medicare Supplement .....	7,767 .....	1,578 .....	20.3 .....	1 .....						
YES.....	2121IN .....	A.....	NO.....	1234067 .....	01/09/1995 .....	11/04/2002 .....	05/21/2001 .....	12/01/2002 .....	Medicare Supplement .....	823 .....	467 .....	56.7 .....							
YES.....	2122IN .....	B.....	NO.....	1234067 .....	01/09/1995 .....	11/04/2002 .....	05/21/2001 .....	12/01/2002 .....	Medicare Supplement .....	6,354 .....	615 .....	9.7 .....	2 .....						
YES.....	2123IN .....	F.....	NO.....	1234067 .....	01/09/1995 .....	11/04/2002 .....	05/21/2001 .....	12/01/2002 .....	Medicare Supplement .....	4,777 .....	2,797 .....	58.6 .....	1 .....						
0199999. Total Experience on Individual Policies										19,721	5,457	27.7	4						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
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.....	2121KY .....	A.....	NO.....	1234067 .....	06/28/1994 .....	11/04/2002 .....	05/14/2001 .....	12/01/2002 .....	Medicare Supplement .....	2,337 .....	32 .....	1.4 .....	1 .....	.....	.....	.....	.....
YES.....	2122KY .....	B.....	NO.....	1234067 .....	06/28/1994 .....	11/04/2002 .....	05/14/2001 .....	12/01/2002 .....	Medicare Supplement .....	277 .....	3,404 .....	1,228.9 .....	.....	.....	.....	.....	.....
YES.....	2123KY .....	F.....	NO.....	1234067 .....	06/28/1994 .....	11/04/2002 .....	05/14/2001 .....	12/01/2002 .....	Medicare Supplement .....	16,972 .....	5,586 .....	32.9 .....	4 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										19,586	9,022	46.1	5	.....	.....	.....	.....

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
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
											12	13			16	17	
										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.....	1234067 .....	08/27/1992 .....	12/09/2002 .....	01/25/2002 .....	12/01/2002 .....	Medicare Supplement .....	1,676 .....	4,524 .....	269.9 .....	.....	.....	.....	.....	.....
YES.....	2122MD .....	B.....	NO.....	1234067 .....	08/27/1992 .....	12/09/2002 .....	01/25/2002 .....	12/01/2002 .....	Medicare Supplement .....	30,902 .....	52,019 .....	168.3 .....	10 .....	.....	.....	.....	.....
YES.....	2123MD .....	F.....	NO.....	1234067 .....	08/27/1992 .....	12/09/2002 .....	01/25/2002 .....	12/01/2002 .....	Medicare Supplement .....	239,720 .....	138,009 .....	57.6 .....	45 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										272,298	194,552	71.4	55				

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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	2	3	4	5	6	7	8	9	10	Policies Issued Through 2019				Policies Issued in 2020; 2021; 2022			
										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.....	MS-10990 .....	.....0.....	.....NO.....	.....1234067 .....	.....	.....	.....	.....12/31/1993 .....	Medicare Supplement .....	.....3,288 .....	.....1,681 .....	.....51.1 .....	.....1 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										.....3,288 .....	.....1,681 .....	.....51.1 .....	.....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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
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.....	1234067 .....	08/24/1982 .....	.....	04/27/2001 .....	06/01/1992 .....	Medicare Supplement .....	4,880 .....	2,255 .....	46.2 .....	1 .....	.....	.....	.....	.....
YES.....	2123 .....	F.....	NO.....	1234067 .....	06/22/1992 .....	11/18/2002 .....	04/27/2001 .....	12/01/2002 .....	Medicare Supplement .....	32,576 .....	32,985 .....	101.3 .....	6 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										37,456	35,240	94.1	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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
										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.....	1234067 .....	09/13/1982 .....		04/24/2001 .....	12/01/1991 .....	Medicare Supplement .....	32,368 .....	3,540 .....	10.9 .....	7 .....				
YES.....	2121NC .....	A.....	NO.....	1234067 .....	06/16/1992 .....	11/05/2002 .....	04/24/2001 .....	12/01/2002 .....	Medicare Supplement .....	3,006 .....	1,536 .....	51.1 .....	1 .....				
YES.....	2122NC .....	B.....	NO.....	1234067 .....	06/16/1992 .....	11/05/2002 .....	04/24/2001 .....	12/01/2002 .....	Medicare Supplement .....	3,249 .....	6,797 .....	209.2 .....	1 .....				
YES.....	2123NC .....	F.....	NO.....	1234067 .....	06/16/1992 .....	11/05/2002 .....	04/24/2001 .....	12/01/2002 .....	Medicare Supplement .....	197,868 .....	101,389 .....	51.2 .....	46 .....				
YES.....	2124NC .....	I.....	NO.....	1234067 .....	06/16/1992 .....	11/05/2002 .....	04/24/2001 .....	12/01/2002 .....	Medicare Supplement .....	11,624 .....	1,224 .....	10.5 .....	2 .....				
YES.....	2129NC .....	C.....	NO.....	1234067 .....	07/05/2000 .....	11/05/2002 .....	04/24/2001 .....	12/01/2002 .....	Medicare Supplement .....	4,080 .....	8,807 .....	215.9 .....	1 .....				
0199999. Total Experience on Individual Policies										252,195	123,293	48.9	58				

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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	2	3	4	5	6	7	8	9	10	Policies Issued Through 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1522 .....	P.....	NO.....	1234067 .....	07/15/1982 .....		05/15/2001 .....	04/01/1992 .....	Medicare Supplement .....	27,418 .....	11,460 .....	41.8 .....	5 .....						
YES.....	2121 .....	A.....	NO.....	1234067 .....	03/20/1992 .....	11/01/2001 .....	05/15/2001 .....	12/01/2002 .....	Medicare Supplement .....	(1,246) .....	3,737 .....	(299.9) .....	1 .....						
YES.....	2122 .....	B.....	NO.....	1234067 .....	03/20/1992 .....	11/01/2001 .....	05/15/2001 .....	12/01/2002 .....	Medicare Supplement .....	58,823 .....	63,056 .....	107.2 .....	23 .....						
YES.....	2123 .....	F.....	NO.....	1234067 .....	03/20/1992 .....	11/01/2001 .....	05/15/2001 .....	12/01/2002 .....	Medicare Supplement .....	461,267 .....	427,165 .....	92.6 .....	123 .....						
0199999. Total Experience on Individual Policies										546,262	505,418	92.5	152						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1926 .....	P.....	NO.....	1234067 .....	08/03/1989 .....		05/07/2001 .....	07/01/1990 .....	Medicare Supplement .....	8,616 .....	2,113 .....	24.5 .....	2 .....						
YES.....	2121PA .....	A.....	NO.....	1234067 .....	09/04/1992 .....	11/20/2002 .....	05/07/2001 .....	12/01/2002 .....	Medicare Supplement .....	13,133 .....	18,428 .....	140.3 .....	7 .....						
YES.....	2122PA .....	B.....	NO.....	1234067 .....	09/04/1992 .....	11/20/2002 .....	05/07/2001 .....	12/01/2002 .....	Medicare Supplement .....	20,484 .....	11,804 .....	57.6 .....	8 .....						
YES.....	2129 .....	C.....	NO.....	1234067 .....	09/04/1992 .....	11/20/2002 .....	05/07/2001 .....	12/01/2002 .....	Medicare Supplement .....	279,991 .....	242,583 .....	86.6 .....	81 .....						
0199999. Total Experience on Individual Policies										322,224	274,928	85.3	98						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
										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 .....	.....A.....	.....NO.....	.....1234067 .....	.....10/06/1982 .....	.....11/05/2002 .....	.....04/24/2001 .....	.....04/01/1992 .....	Medicare Supplement .....	.....9,033 .....	.....12,021 .....	.....133.1 .....	.....2 .....	.....	.....	.....	.....
.....YES.....	2122SC .....	.....F.....	.....NO.....	.....1234067 .....	.....02/05/1993 .....	.....11/05/2002 .....	.....04/24/2001 .....	.....12/01/2002 .....	Medicare Supplement .....	.....7,695 .....	.....7,475 .....	.....97.1 .....	.....3 .....	.....	.....	.....	.....
.....YES.....	2123SC .....	.....C.....	.....NO.....	.....1234067 .....	.....02/05/1993 .....	.....11/05/2002 .....	.....04/24/2001 .....	.....12/01/2002 .....	Medicare Supplement .....	.....55,864 .....	.....39,855 .....	.....71.3 .....	.....14 .....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										72,592	59,351	81.8	19				

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
										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.....	2122TN .....	.....B.....	.....NO.....	.....1234067 .....	.....06/30/1992 .....	.....11/19/2002 .....	.....05/31/2001 .....	.....12/01/2002 .....	Medicare Supplement .....	.....3,515 .....	.....461 .....	.....13.1 .....	.....1 .....	..... .....	..... .....	..... .....	..... .....
.....YES.....	2123TN .....	.....F.....	.....NO.....	.....1234067 .....	.....06/30/1992 .....	.....11/19/2002 .....	.....05/31/2001 .....	.....12/01/2002 .....	Medicare Supplement .....	.....30,161 .....	.....21,061 .....	.....69.8 .....	.....5 .....	..... .....	..... .....	..... .....	..... .....
0199999. Total Experience on Individual Policies										33,676	21,522	63.9	6				

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022			
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.....	.....1234067 .....	.....06/02/1994 .....	.....11/13/2002 .....	.....06/15/2001 .....	.....12/01/2002 .....	Medicare Supplement .....	.....8,299 .....	.....5,188 .....	.....62.5 .....	.....2 .....	.....	.....	.....	.....
.....YES.....	2123TX .....	.....F.....	.....NO.....	.....1234067 .....	.....06/02/1994 .....	.....11/13/2002 .....	.....06/15/2001 .....	.....12/01/2002 .....	Medicare Supplement .....	.....2,671 .....	.....(107) .....	.....(4.0) .....	.....	.....	.....	.....	.....
0199999. Total Experience on Individual Policies										10,970	5,081	46.3	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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1522 .....	P.....	NO.....	1234067 .....	09/27/1982 .....		05/11/2001 .....	02/01/1989 .....	Medicare Supplement .....	4,585 .....	1,198 .....	26.1 .....	1 .....						
YES.....	1925 .....	P.....	NO.....	1234067 .....	02/02/1989 .....		05/11/2001 .....	07/01/1992 .....	Medicare Supplement .....	11,845 .....	18,190 .....	153.6 .....	2 .....						
YES.....	2122VA .....	B.....	NO.....	1234067 .....	07/30/1992 .....	11/21/2002 .....	05/11/2001 .....	12/01/2002 .....	Medicare Supplement .....	27,058 .....	10,177 .....	37.6 .....	10 .....						
YES.....	2123VA .....	F.....	NO.....	1234067 .....	07/30/1992 .....	11/21/2002 .....	05/11/2001 .....	12/01/2002 .....	Medicare Supplement .....	139,300 .....	83,621 .....	60.0 .....	35 .....						
0199999. Total Experience on Individual Policies										182,788	113,186	61.9	48						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT**

For The Year Ended December 31, 2022  
(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 2019				Policies Issued in 2020; 2021; 2022					
										11	Incurred Claims		14	15	Incurred Claims		18		
											12	13			16	17			
																		Compliance with OBRA	Policy Form Number
YES.....	1523 .....	P.....	NO.....	1234067 .....	09/22/1982 .....		05/30/2001 .....	12/01/1991 .....	Medicare Supplement .....	16,372 .....	13,522 .....	82.6 .....	3 .....						
YES.....	2121WV .....	A.....	NO.....	1234067 .....	02/27/1992 .....	11/07/2002 .....	05/30/2001 .....	12/01/2002 .....	Medicare Supplement .....	2,075 .....	6,747 .....	325.2 .....	1 .....						
YES.....	2122WV .....	B.....	NO.....	1234067 .....	02/27/1992 .....	11/07/2002 .....	05/30/2001 .....	12/01/2002 .....	Medicare Supplement .....	6,862 .....	12,671 .....	184.7 .....	2 .....						
YES.....	2123WV .....	F.....	NO.....	1234067 .....	02/27/1992 .....	11/07/2002 .....	05/30/2001 .....	12/01/2002 .....	Medicare Supplement .....	125,429 .....	73,920 .....	58.9 .....	25 .....						
0199999. Total Experience on Individual Policies										150,738	106,860	70.9	31						

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 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

VM-20 RESERVES SUPPLEMENT – PART 1A

Life Insurance Reserves Valued According to VM-20 by Product Type  
For The Year Ended December 31, 2022  
(To Be Filed by March 1)

NAIC Group Code 0140

NAIC Company Code 66869

	Prior Year	Current Year	
	1	2	3
	Reported Reserve	Reported Reserve	Due and Deferred Premium Asset
1. Post-Reinsurance-Ceded Reserve			
1.1. Term Life Insurance.....	2,543,579	2,034,998	315,531
1.2. Universal Life With Secondary Guarantee .....	116,967,807	145,373,097	
1.3. Non-Participating Whole Life .....	61,436	174,499	42,816
1.4. Participating Whole Life .....			
1.5. Universal Life Without Secondary Guarantee .....	450,580	619,704	
1.6. Variable Universal Life Without Secondary Guarantee .....			
1.7. Variable Life Without Secondary Guarantee .....			
1.8. Indexed Life Without Secondary Guarantee .....			
1.9. Aggregate Write-Ins for Other Products			
2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)	120,023,402	148,202,298	XXX
3. Pre-Reinsurance-Ceded Reserve			
3.1. Term Life Insurance.....	2,595,931	2,122,851	315,531
3.2. Universal Life With Secondary Guarantee .....	116,974,904	145,386,084	
3.3. Non-Participating Whole Life .....	61,436	174,499	42,816
3.4. Participating Whole Life .....			
3.5. Universal Life Without Secondary Guarantee .....	450,580	619,704	
3.6. Variable Universal Life Without Secondary Guarantee .....			
3.7. Variable Life Without Secondary Guarantee .....			
3.8. Indexed Life Without Secondary Guarantee .....			
3.9. Aggregate Write-Ins for Other Products			
4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)	120,082,851	148,303,138	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	59,449	100,839	XXX
DETAILS OF WRITE-INS			
1.901. ....			
1.902. ....			
1.903. ....			
1.998. Summary of remaining write-ins for Line 1.9 from overflow page .....			
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)			
3.901. ....			
3.902. ....			
3.903. ....			
3.998. Summary of remaining write-ins for Line 3.9 from overflow page .....			
3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)			

## VM-20 RESERVES SUPPLEMENT – PART 1B

Life Insurance Reserves Valued According to VM-20 by Product Type  
For The Year Ended December 31, 2022  
(To Be Filed by March 1)  
(\$000 Omitted for Face Amounts)

[illegible]

456-2



SUPPLEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**VM-20 RESERVES SUPPLEMENT – PART 2**

Life PBR Exemption  
For The Year Ended December 31, 2022  
(To Be Filed by March 1)

Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)	
1. Has the company been allowed a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? .....	Yes [   ] No [ X ]
2. If the response to Question 1 is "Yes", then check the source of the "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)	
2.1 NAIC Adopted VM   [   ]	
2.2 State Statute (SVL) [   ] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? .....	Yes [   ] No [   ]
b. If the answer to "a" above is "Yes", provide the criteria the state has used to allow the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM): .....	
2.3 State Regulation       [   ] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Regulation different from the NAIC adopted VM? .....	Yes [   ] No [   ]
b. If the answer to "a" above is "Yes", provide the criteria of the state's Life PBR Exemption that the company has met and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM): .....	
3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply: 1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2, 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or 3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed: .....	

**VM-20 RESERVES SUPPLEMENT – PART 3**

Other Exclusions from Life PBR  
For The Year Ended December 31, 2022  
(To Be Filed by March 1)

1A. Has the company filed and been granted a Single State Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? .....	Yes [   ] No [ X ]
1B. If the answer to question 1A is "Yes" please discuss any business not covered under the Single State Exemption. .....	
2A. If the answer to question 1A is "Yes", does the company have risks for policies issued outside its state of domicile? .....	
2B. If the answer to question 2A is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks. .....	
3. Is all of the company's individual ordinary life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? .....	Yes [   ] No [ X ]



SUPPLEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

**SCHEDULE O SUPPLEMENT**

For The Year Ended December 31, 2022  
(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		Cumulative Net Amounts Paid Policyholders				
		1 2018	2 2019	3 2020	4 2021	5 2022(a)
1.	Prior .....	458	150	156	127	2
2.	2018 .....	309	103	46		8
3.	2019 .....	XXX	165	210	35	15
4.	2020 .....	XXX	XXX	107	101	54
5.	2021 .....	XXX	XXX	XXX	85	109
6.	2022 .....	XXX	XXX	XXX	XXX	164

**Section B - Other Accident and Health**

1.	Prior .....	172	120	102	107	82
2.	2018 .....	66	59	12	13	12
3.	2019 .....	XXX	65	57	13	12
4.	2020 .....	XXX	XXX	67	161	13
5.	2021 .....	XXX	XXX	XXX	189	63
6.	2022 .....	XXX	XXX	XXX	XXX	61

**Section C - Credit Accident and Health**

1.	Prior .....					
2.	2018 .....					
3.	2019 .....	XXX				
4.	2020 .....	XXX	X			
5.	2021 .....	XXX	XX	XXX		
6.	2022 .....	XXX	XX	XXX	XXX	

**Section D -**

1.	Prior .....					
2.	2018 .....					
3.	2019 .....	XXX				
4.	2020 .....	XXX	X			
5.	2021 .....	XXX	XX	XXX		
6.	2022 .....	XXX	XX	XXX	XXX	

**Section E -**

1.	Prior .....					
2.	2018 .....					
3.	2019 .....	XXX				
4.	2020 .....	XXX	X			
5.	2021 .....	XXX	XX	XXX		
6.	2022 .....	XXX	XX	XXX	XXX	

**Section F -**

1.	Prior .....					
2.	2018 .....					
3.	2019 .....	XXX				
4.	2020 .....	XXX	X			
5.	2021 .....	XXX	XX	XXX		
6.	2022 .....	XXX	XX	XXX	XXX	

**Section G -**

1.	Prior .....					
2.	2018 .....					
3.	2019 .....	XXX				
4.	2020 .....	XXX	X			
5.	2021 .....	XXX	XX	XXX		
6.	2022 .....	XXX	XX	XXX	XXX	

(a) See the Annual Audited Financial Reports 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 2022 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 2018	2 2019	3 2020	4 2021	5 2022
1.	2018 .....	1,135	501	234	XXX	XXX
2.	2019 .....	XXX	942	423	40	XXX
3.	2020 .....	XXX	XXX	972	400	144
4.	2021 .....	XXX	XXX	XXX	862	318
5.	2022 .....	XXX	XXX	XXX	XXX	939

Section B - Other Accident and Health

1.	2018 .....	254	199	106	XXX	XXX
2.	2019 .....	XXX	250	197	107	XXX
3.	2020 .....	XXX	XXX	252	300	104
4.	2021 .....	XXX	XXX	XXX	372	199
5.	2022 .....	XXX	XXX	XXX	XXX	242

Section C - Credit Accident and Health

1.	2018 .....				XXX	XXX
2.	2019 .....	XXX				XXX
3.	2020 .....	XXX				
4.	2021 .....	XXX	XX	XXX		
5.	2022 .....	XXX	XX	XXX	XXX	

Section D -

1.	2018 .....				XXX	XXX
2.	2019 .....	XXX				XXX
3.	2020 .....	XXX				
4.	2021 .....	XX	XX	XXX		
5.	2022 .....	XXX	XX	XXX	XXX	

Section E -

1.	2018 .....				XXX	XXX
2.	2019 .....	XXX				XXX
3.	2020 .....	XXX				
4.	2021 .....	XX	XX	XXX		
5.	2022 .....	XXX	XX	XXX	XXX	

Section F -

1.	2018 .....				XXX	XXX
2.	2019 .....	XXX				XXX
3.	2020 .....	XXX				
4.	2021 .....	XX	XX	XXX		
5.	2022 .....	XXX	XX	XXX	XXX	

Section G -

1.	2018 .....				XXX	XXX
2.	2019 .....	XXX				XXX
3.	2020 .....	XXX				
4.	2021 .....	XX	XX	XXX		
5.	2022 .....	XXX	XX	XXX	XXX	

SUPPLEMENT FOR THE YEAR 2022 OF THE NATIONWIDE LIFE INSURANCE COMPANY

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 2018	2 2019	3 2020	4 2021	5 2022
1. 2018 .....	1,135	501	234	188	194
2. 2019 .....	XXX	942	423	40	20
3. 2020 .....	XXX	XXX	972	400	144
4. 2021 .....	XXX	XXX	XXX	862	318
5. 2022 .....	XXX	XXX	XXX	XXX	939

Section B - Other Accident and Health

1. 2018 .....	254	199	106	111	104
2. 2019 .....	XXX	250	197	107	108
3. 2020 .....	XXX	XXX	252	300	104
4. 2021 .....	XXX	XXX	XXX	372	199
5. 2022 .....	XXX	XXX	XXX	XXX	242

Section C - Credit Accident and Health

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XXX				
5. 2022 .....	XXX	XX	XXX	XXX	

Section D -

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XXX				
5. 2022 .....	XXX	XX	XXX	XXX	

Section E -

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XXX				
5. 2022 .....	XXX	XX	XXX	XXX	

Section F -

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XXX				
5. 2022 .....	XXX	XX	XXX	XXX	

Section G -

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XXX				
5. 2022 .....	XXX	XX	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 .....	183,198
3. Individual Annuity .....			
4. Supplementary Contracts .....			
5. Credit Life .....			
6. Group Life .....			
7. Group Annuities .....			
8. Group Accident and Health .....			
9. Credit Accident and Health .....			
10. Other Accident and Health .....			
11. Total .....			183,198