

Nationwide[®] Life Insurance Company Agent Disclosure Statement

The following disclosure is provided so that the Contractholder may fully understand the financial interest of the Investment Professional(s) in the sale of Nationwide[®] Life Insurance Company contracts to the Plan (herein referred to as the Transaction).

PART I DISCLOSURE

A. Name of Plan: _____

B. Name of Investment Professional(s): _____

C. Name of Authorized Representative: _____

D. Contract: Group Annuity Contract(s) _____

E. Affiliation of Investment Professional(s) with Nationwide[®] Life Insurance Company:

Independent Contractor.

There are limitations in the ability of the Investment Professional(s) to recommend life and annuity contracts of other insurance companies by reason of an agreement with Nationwide[®] Life Insurance Company.

F. Commission paid to Investment Professional(s):

Retirement Advisor Variable Contract

<u>CONTRACT YEAR</u>	<u>ON ALL TRANSFERS</u>	<u>ON ALL NEW DEPOSITS</u>	<u>ON ALL ASSETS</u>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10 and Later			

OR

<u>PERIOD</u>	<u>ON ALL TRANSFERS</u>	<u>ON ALL NEW DEPOSITS</u>	<u>ON ALL ASSETS</u>
1			
2			
3 and Later			

**Retirement Advisor Fixed Contract, Retirement Advisor Indexed Fixed Contract,
Nationwide Fixed Select, or Retirement Advisor Short Term Indexed Fixed Contract**

<u>CONTRACT YEAR</u>	<u>ON ALL TRANSFERS</u>	<u>ON ALL NEW DEPOSITS</u>	<u>ON ALL ASSETS</u>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10 and Later			

OR

<u>PERIOD</u>	<u>ON ALL TRANSFERS</u>	<u>ON ALL NEW DEPOSITS</u>	<u>ON ALL ASSETS</u>
1			
2			
3 and later			

G. Administrative Service Fee Paid to Authorized Representative:

Retirement Advisor Variable Contract

AND

**Retirement Advisor Fixed Contract, Retirement Advisor Indexed Fixed Contract,
Nationwide Fixed Select, or Retirement Advisor Short Term Indexed Fixed Contract**

<u>CONTRACT/PROGRAM YEAR</u>	<u>ON ALL TRANSFERS</u>	<u>ON ALL NEW DEPOSITS</u>	<u>ON ALL ASSETS</u>
1	<i>On the first \$100,000</i>		
	<i>On the next \$650,000</i>		
	<i>On the next \$1,250,000</i>		
	<i>On the next \$3,000,000</i>		
	<i>On amounts over \$5,000,000</i>	0.00%	0.05%
2 and Later	<i>On the first \$100,000</i>		
	<i>On the next \$650,000</i>		
	<i>On the next \$1,250,000</i>		
	<i>On the next \$3,000,000</i>		
	<i>On amounts over \$5,000,000</i>	0.00%	0.05%

OR

<u>PROGRAM YEAR</u>	<u>ON ALL TRANSFERS</u>	<u>ON ALL NEW DEPOSITS</u>	<u>ON ALL ASSETS</u>
1	%	%	%
2 and Later	%	%	%

Nationwide pays fees to the Authorized Representative for performing certain administrative services which may include, but are not necessarily limited to; preparing proposals, assisting in the enrollment process, processing transactions, training Investment Professional(s), and communicating with Contractholders and/or Participants. These fees may be offset by certain fees paid by the Authorized Representative to Nationwide.

H. Charges: All Contract charges are disclosed in the Contract proposal and/or prospectus delivered to the Plan Fiduciary.

Investment Professional(s) Signature

Date

Authorized Representative Signature

Date

Part II ACKNOWLEDGMENT AND APPROVAL BY FIDUCIARY

I acknowledge receipt of the disclosure information, proposal, and prospectus, if any, prior to the approval and execution of the above Transaction. I have read and understand the information disclosed, and understand the compensation being paid to the Investment Professional and/or Authorized Representative for their services provided to the Plan and have determined that the compensation being paid is reasonable.

I am not affiliated with the Investment Professional or with Nationwide[®] Life Insurance Company. I will receive no compensation, directly or indirectly, in connection with the above Transaction.

I have authority to, and hereby approve the above Transaction, on behalf of the Plan.

Contractholder/Trustee Signature

Date

Contractholder Title