Image# 202105149446817644				05/14/2021 17 : 46
	STATEMEN			PAGE 1 / 5
FEC	ORGANIZA	_		
FORM 1				
1. NAME OF	(Check if name	Example:If typing, type	12FE4M5	Office Use Only
COMMITTEE (in full)	is changed)	over the lines.	TSLEAMO	
Nationwide Mutual Ir	surance Company F	Financial & Investme	nts Political	Action Committee
	One Nationwide Plaza, 1-32-40	04		
ADDRESS (number and street)				
 (Check if address is changed) 				
	Columbus		OH 43	215
	CITY A		STATE 🔺	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	pac@nationwide.com			
is changed)	Optional Second E-Mail Add	ress		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
is changed)				
	D / Y Y Y Y			
2. DATE 05 14	4 2021			
		0406215		
3. FEC IDENTIFICATION N				
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined the	his Statement and to the best of	of my knowledge and belief it	is true, correct and	a complete.
Type or Print Name of Treasure	r Brewster, Ben, , Mr.,			
			M	/ D D / Y Y Y Y
Signature of Treasurer	ster, Ben, , Mr.,	[Electronically Filed]	Date 05	14 2021
NOTE: Submission of false, error	acus or incomplete information of	nay subject the person signing the	is Statement to the	a nenalties of 2 LISC 81274
		ON SHOULD BE REPORTED WI		, ponanies of 2 0.3.0. 94379.
Office		For further information co Federal Election Commissio		FEC FORM 1
Use Only		Toll Free 800-424-9530 Local 202-694-1100		(Revised 06/2012)

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FEC Form 1 ((Revised 02/2009)	Page 2
TYPE OF COMMI	ITTEE	
Candidate Con	nmittee:	
(a) This	committee is a principal campaign committee. (Complete the candidate information below.)	
. ,	committee is an authorized committee, and is NOT a principal campaign committee. (Complermation below.)	ete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c) This	committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committe	ee:	
(d) This		emocratic, epublican, etc.) Par
Political Action	n Committee (PAC):	
(e) X This	committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is
×	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	s committee supports/opposes more than one Federal candidate, and is NOT a separate segr mittee. (i.e., nonconnected committee)	regated fund or par
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraisi	ng Representative:	
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two mittees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two mittees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committee	es Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Nationwide Mutual Insurance Company Financial & Investments Political Action Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N	lationwide Mutual Ins	urance Company												
	Mailing Address	One Nationwide Plaza												
		Columbus						ОН	432	15		-		
		,	CITY					STATE		Z	IP CC	DDE		
	Relationship: 🗴 Connected Organization 🚺 Affiliated Committee 🚺 Joint Fundraising Representative 🚺 Leadership PAC Sponsor													
7.	Custodian of Records: Ider books and records.	ntify by name, address (pl	hone number	0	ptiona	l) and	positi	on of the pe	erson ir	ı poss	ession	ı of co	ommittee	e
	L													

LUCKE, EII	<i>i</i> l, , ,
Full Name	
	One Nationwide Plaza, 1-32-301
Mailing Address	
	[
	Columbus OH 43215
Title or Position	CITY STATE ZIP CODE
Custodian of Records	Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Brewster, Ben, , Mr.,
Mailing Address	601 Thirteenth Street NW
	Suite 390 South
	Washington DC 20005 -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 202 347 5914

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Prolago, Natosha, , ,
Mailing Address	One Nationwide Plaza
	1-32-301
	Columbus OH 43215 - - -
	CITY STATE ZIP CODE
Title or Position	Irer 614 - 249 - 5470

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Н			
Mailing Address	41 South High Street		
	Columbus		43215
	CITY	STATE	ZIP CODE
Name of Bank, Depo	ository, etc.		
L			
Mailing Address			
	CITY	STATE	ZIP CODE

				Optio	nal
FEC Form	1 S	(Revised	02/2017) for L	ine

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g)	or (h). Joint Fundraising	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.	-	Organization, Affiliated Committee, Joint Fundra I Insurance Company Political Action	aising Representative, or Leadership PAC Sponso	or
	Mailing Address	One Nationwide Plaza		
		1-32-301		
		Columbus	OH 43215	
	Relationship:	CITY ▲	STATE A ZIP CODE A	
	Connected	Organization X Affiliated Committee Joint	Fundraising Representative Leadership PAC Spo	onsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION		STATE ▲ ZIP CODE ▲	
		I I I I I I I I I I I I I I I I Tel	lephone Number	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																					
Mailing Address																					
																			•		
				С	ITY	^					S	ΓAT	Έ			ZIP	C	DC	E		