

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214501375

1.) CORPORATION NAME:

**NATIONAL WESTERN LIFE INSURANCE COMPANY**

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**BRADFUTE W. DAVENPORT, JR.  
1001 HAXALL POINT, 15TH FL  
POST OFFICE BOX 1122**

SCC ID NO: **F0328999**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	7,500,000
COMB	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**CO**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1675 BROADWAY #1200

CITY/ST/ZIP: DENVER, CO 80202

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: ROSS R MOODY  OFFICER  DIRECTOR  
 TITLE: PRESIDENT  
 ADDRESS: 850 E ANDERSON LANE  
 CITY/ST/ZIP/CO: AUSTIN, TX 78752

NAME: FABIOLA A BEST  OFFICER  DIRECTOR  
 TITLE: VICE PRESIDENT  
 ADDRESS: 850 E ANDERSON LANE  
 CITY/ST/ZIP/CO: AUSTIN, TX 78752

NAME: JAMES D EGAN  OFFICER  DIRECTOR  
 TITLE: VICE PRESIDENT  
 ADDRESS: 850 E ANDERSON LANE  
 CITY/ST/ZIP/CO: AUSTIN, TX 78752

NAME: GARY L FISCHER  OFFICER  DIRECTOR  
 TITLE: VICE PRESIDENT  
 ADDRESS: 850 E ANDERSON LANE  
 CITY/ST/ZIP/CO: AUSTIN, TX 78752

NAME: LUIS V FREIRE  OFFICER  DIRECTOR  
 TITLE: VICE PRESIDENT  
 ADDRESS: 850 E ANDERSON LANE  
 CITY/ST/ZIP/CO: AUSTIN, TX 78752

NAME: PAUL T GAROFOLI  OFFICER  DIRECTOR  
 TITLE: VICE PRESIDENT  
 ADDRESS: 850 E ANDERSON LANE  
 CITY/ST/ZIP/CO: AUSTIN, TX 78752

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK D GULAS VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KITTY S KENNEDY VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS F KOPETIC VP/CONT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DORIS KRUSE VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARLOS A MARTINEZ VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL J MARTINSEN VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RACHEL REGA PAULSON VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES P PAYNE SR VP/S 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	REYNALDO PEREZ, JR VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN M PRIBYL SR VP/T 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONNA L RICHARDSON VICE PRESIDENT 850 E ANDERSON LANE AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	LAWRENCE G SCOTT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	850 E ANDERSON LANE		
CITY/ST/ZIP/CO:	AUSTIN, TX 78752		
NAME:	ANTHONY J ZAGAR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	850 E ANDERSON LANE		
CITY/ST/ZIP/CO:	AUSTIN, TX 78752		
NAME:	CHARLES D MILOS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SR. VICE PRESID		
ADDRESS:	2302 POSTOFFICE STREET		
CITY/ST/ZIP/CO:	STE 702 GALVESTON, TX 77550		
NAME:	ROBERT L MOODY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	2302 POSTOFFICE STREET, STE. 702		
CITY/ST/ZIP/CO:	GALVESTON, TX 77550		
NAME:	STEPHEN C JOHNSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR. VICE PRESID		
ADDRESS:	850 E ANDERSON LANE		
CITY/ST/ZIP/CO:	AUSTIN, TX 78752		
NAME:	PATRICIA L SCHEUER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR. VICE PRESID		
ADDRESS:	850 E ANDERSON LANE		
CITY/ST/ZIP/CO:	AUSTIN, TX 78752		
NAME:	STEPHEN E GLASGOW	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2302 POSTOFFICE STREET		
CITY/ST/ZIP/CO:	STE 702 GALVESTON, TX 77550		
NAME:	ERLE D MCLEOD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2302 POSTOFFICE STREET		
CITY/ST/ZIP/CO:	STE 702 GALVESTON, TX 77550		
NAME:	FRANCES A MOODY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2302 POSTOFFICE STREET		
CITY/ST/ZIP/CO:	STE 702 GALVESTON, TX 77550		
NAME:	RUSSELL S MOODY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2302 POSTOFFICE STREET		
CITY/ST/ZIP/CO:	STE 702 GALVESTON, TX 77550		

NAME: LOUIS E PAULS, JR TITLE: DIRECTOR ADDRESS: 2302 POSTOFFICE STREET STE 702 CITY/ST/ZIP/CO: GALVESTON, TX 77550	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: ELVIN J PEDERSON TITLE: DIRECTOR ADDRESS: 2302 POSTOFFICE STREET STE 702 CITY/ST/ZIP/CO: GALVESTON, TX 77550	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: ROBERT SWEENEY TITLE: VICE PRESIDENT ADDRESS: 850 E ANDERSON LANE CITY/ST/ZIP/CO: AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: CARY DAVID GOGGIN TITLE: VICE PRESIDENT ADDRESS: 850 E ANDERSON LANE CITY/ST/ZIP/CO: AUSTIN, TX 78752	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ ROSS R MOODY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ROSS R MOODY, PRESIDENT PRINTED NAME AND CORPORATE TITLE	12/17/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		