
AMENDED FILING EXPLANATION

The reason for the amended filing is to correct affiliate values for other invested assets on line 47.



ANNUAL STATEMENT

For the Year Ended December 31, 2017
of the Condition and Affairs of the

NATIONWIDE ASSURANCE COMPANY

NAIC Group Code.....	0140,	0140	NAIC Company Code.....	10723	Employer's ID Number.....	95-0639970
	(Current Period)	(Prior Period)				
Organized under the Laws of OH			State of Domicile or Port of Entry OH		Country of Domicile	US
Incorporated/Organized.....	February 13, 1942		Commenced Business.....	April 15, 1942		
Statutory Home Office			ONE WEST NATIONWIDE BLVD., 1-04-701.....	COLUMBUS OH US 43215-2220		
			(Street and Number)	(City or Town, State, Country and Zip Code)		
Main Administrative Office			ONE WEST NATIONWIDE BLVD.....	COLUMBUS OH US..... 43215-2220	614-249-7111	
			(Street and Number)	(City or Town, State, Country and Zip Code)	(Area Code)	(Telephone Number)
Mail Address			ONE WEST NATIONWIDE BLVD., 1-04-701.....	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., 1-04-701.....	COLUMBUS ... OH ... US ... 43215-2220	614-249-1545	
			(Street and Number)	(City or Town, State, Country and Zip Code)	(Area Code)	(Telephone Number)
Internet Web Site Address			WWW.NATIONWIDE.COM			
Statutory Statement Contact			CHERYL M. DENNIS		614-249-1545	
			(Name)		(Area Code)	(Telephone Number)
			FINRPT@NATIONWIDE.COM		866-315-1430	
			(E-Mail Address)		(Fax Number)	

OFFICERS

Name	Title	Name	Title
1. MARK ALLEN BERVEN	PRESIDENT & COO	2. ROBERT WILLIAM HORNER III	VP & SECRETARY
3. WENDELL PAUL CROSSER	VP & TREASURER		
OTHER			
DAVID GERARD ARANGO	SVP - P&C PERSL LINES	PAMELA ANN BIESECKER	SVP- HEAD OF TAXATION
MICHAEL ALOYSIUS BOYD	SVP-ENTERPRISE BRAND MRKT	MARTHA LOVETTE FRYE #	SR REG VP-SOUTHEAST DIST

DIRECTORS OR TRUSTEES

DAVID GERARD ARANGO	MARK ALLEN BERVEN	MICHAEL PATRICK LEACH	AMY TAYLOR SHORE
ERIC EUGENE SMITH			

State of..... OHIO
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.

(Signature)	(Signature)	(Signature)
MARK ALLEN BERVEN	ROBERT WILLIAM HORNER III	WENDELL PAUL CROSSER
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
PRESIDENT & COO	VP & SECRETARY	VP & TREASURER
(Title)	(Title)	(Title)
Subscribed and sworn to before me	a. Is this an original filing?	Yes [] No [X]
This _____ day of _____ 2018	b. If no	1. State the amendment number
		2. Date filed
		3. Number of pages attached
		2