FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFI	CIAL OWNE	RSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
l	Estimated average burd	len							
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>ESKEW MICHAEL L</u>					2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL]									nship appli Directo	,				
(Last) (First) (Middle) C/O THE ALLSTATE CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2019									Officer pelow)	(give title		Other (s below)	specify	
2775 SANDERS ROAD				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) NORTHBROOK IL 60062													X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	tate) (Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4		and Securiti Benefic		es Fo ially (D) Following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	, ,	Amount	(A) o (D)	r Price	Tr	ansac	etion(s) and 4)			(Instr. 4)	
		Т							uired, Dis s, options					y Owi	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	Code (In				6. Date Exercisa Expiration Date (Month/Day/Yea		Amount		f g Security	8. Prid Deriv Secui (Instr.	ative ity	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Exp Date	oiration e	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	06/01/2019			A		1,623		(1)		(1)	Common Stock	1,623	\$)	1,623		D	

Explanation of Responses:

1. Restricted Stock Units (RSUs) granted under The Allstate Corporation 2017 Equity Compensation Plan for Non-Employee Directors providing that each RSU represents the right to receive one share of Allstate common stock following either a standard restriction period or a deferred period of restriction if elected. The RSUs reported will convert into common stock the day following the date on which the reporting person's Board service with Allstate terminates, except in the event of the reporting person's death or disability, which will cause the RSUs to convert on the day following the date of death or disability.

/s/ Efie Vainikos, attorney-infact for Mr. Eskew 06/04/2019

** Signature of Reporting Person

Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.