## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

heck this box if no longer subject to
ection 16. Form 4 or Form 5
oligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  Shapiro Glenn T					2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ ALL ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Volter (specify						
	(Fi E ALLSTAT NDERS RO	TE CORPORAT	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/05/2019									below)  Pres Allstate Personal Lines					
(Street)	BROOK IL		60062		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	tate) (	Zip)																	
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Trans Date (Month/			saction	ar) if	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Tra	3. 4. Secur Transaction Dispose Code (Instr. 5)			f, or Be ies Acquiro Of (D) (Ins	ed (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct of Indirect In	7. Nature of Indirect Beneficial Ownership			
										le V	An	Amount (		Price	Report Transa (Instr. 3	tion(s)		[	(Instr. 4)	
Common Stock			04/0	5/2019				N			6,964		\$0(1	) 15	15,169		D			
Common Stock			04/05/2019		)			F			3,086	D	\$96.0	07 12	12,083		D			
Common Stock			04/05/2019		)			N			2,212	A	\$0 <sup>(1</sup>	) 14	14,295		D			
Common	Stock			04/0	5/2019	)			F			980	D	\$96.0	07 13	13,315		D		
Common Stock														250 <sup>(2)</sup>			I	By 401(K) Plan		
		Т											or Ben		Owned					
1. Title of Derivative Security  1. Title of Derivative Conversion or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)			4. Transaction Code (Instr. 8)		5. Number of		Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)			1		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exerci	sable	Expira Date		Title	Amount or Number of Shares							
Restricted Stock Units	(1)	04/05/2019			М			6,964	04/05/	2019	04/05/	5/2019	Common Stock	6,964	\$0	0		D		
Restricted Stock Units	(1)	04/05/2019			М			2,212	04/05/	2019	04/05/	5/2019	Common Stock	2,212	\$0	0		D		

## **Explanation of Responses:**

- 1. Conversion of previously awarded restricted stock units into equal number of common shares, without the payment of any consideration, pursuant to The Allstate Corporation 2013 Equity Incentive Plan.
- 2. Reflects acquisition of 136 shares of The Allstate Corporation common stock since April 4, 2018, under the Allstate 401(k) Savings Plan, pursuant to the most recent plan statement, dated April 5, 2019.

/s/ Efie Vainikos, attorney-infact for Mr. Shapiro

04/09/2019

\*\* 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.