Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|
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| Estimated average burden | | | | | | | | | |
| hours per response. | 0.5 | | | | | | | | |

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>KEANE MARGARET M</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL] | | | | | | | | | | ationship k all app Direc | , | ng Pe | rson(s) to Is | |
|--|--|---------|---|----------|---|---|-------------------------------|---|--|--------|---|------------------------|----------------------------------|--|--|--|---|-------------------|---------|
| (Last) 2775 SA | (Fir | , | /liddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2020 | | | | | | | | | | Officer (give title below) | | Other (below) | specify |
| C/O THE ALLSTATE CORPORATION | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) NORTHBROOK IL 60062 | | | | | | | | | | | | | | X | • | | | | |
| (City) | (Sta | ate) (Z | ip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Benefi | cially | / Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date | | | 3. Transaction Code (Instr. 8) 4. Securitie Disposed Code (Society Code Code Code Code Code Code Code Code | | | | 4 and Securi Benefi | | ties cially Following | Forn (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | v | Amount | (A) or (D) | | ce | Transa | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock 07/01/2 | | | | ′2020 | | | | A | | 327(1) | A | \$9 | 95.53 | 3 2,906 | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | /e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | 4. Transaction Code (Instr. 8) | | of Deriv | r osed) r. 3, 4 | Expiration Da (Month/Day/Y | | te Amour ear) Securi Under Deriva | | int of rities rlying ative rity (Inst 4) | De See (In: | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Ownership | Beneficial Ownership t (Instr. 4) | | |
| | | | | | Code | v | (A) (D) | | Date Exercis | able | Expiration Date | Title | Number of Shares | | | | | | |

Explanation of Responses:

1. Stock acquired pursuant to election to receive stock in lieu of cash compensation under The Allstate Corporation 2017 Equity Compensation Plan for Non-Employee Directors.

/s/ Efie Vainikos, attorney-infact for Ms. Keane

07/02/2020

** 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.