SEC For	m 4																			
FORM 4 UNITE				D STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549													OMB APPROVAL			
Section 16. Form 4 or Form 5 obligations may continue. See					ed pur	NT OF CHANGES IN BENEFICIAL OWNERSHI d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										OMB Number: 3235-0287 Estimated average burden 1 hours per response: 0.5				
1. Name and Address of Reporting Person* Sherrill Gregg M									er or Tradii RP [AL]		ymbol	(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify				vner			
(Last) (First) (Middle) C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD					Date o		st Trans	action (Mor	nth/D	Day/Year)		below) below)								
(Street) NORTHBROOK IL 60062					4.1	Line) X Fo									al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person form filed by More than One Reporting terson			ו		
(City)	(S		(Zip)																	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transi Date (Month/L)					sactio	n 'ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr		4. Securities Acquired (And Disposed Of (D) (Instr. 3		ed (A) or	5. Amour Securitie Beneficia Owned F Reported	s For ally (D) ollowing (I) (I		: Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock 06/0				1/201	/2021			Code	v	Amount	(D)		Transaction(s) (Instr. 3 and 4)		D					
Common	Slock		Table II - I	Deriva	tive	Seci			uired, Di		,	or Ben					U			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	l. Transaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisat Expiration Date (Month/Day/Year)		e Amount o		of s ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s dly g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)					
Restricted Stock Units	(1)	06/01/2021			М			1,652	06/01/202	1	06/01/2021	Common Stock	1,652	\$0	0		D			
Restricted Stock Units	(2)	06/01/2021			A		1,124		(2)		(2)	Common Stock	1,124	\$0	1,124	4	D			

Explanation of Responses:

1. Conversion of previously awarded restricted stock units into an equal number of common shares, without the payment of any consideration, pursuant to The Allstate Corporation 2017 Equity Compensation Plan for Non-Employee Directors.

2. 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 upon the earlier of (i) the third anniversary of the date of grant, (ii) the day following the date on which the reporting person's Board service terminates, and (iii) the day following the date of the reporting person's death or disability.

<u>/s/ Efie Vainikos, attorney-in-</u> fact for Mr. Sherrill	<u>06/03/2021</u>
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** 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.