FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

| | tion 1(b). | | | File | | | | | a) of the Secu Investment (| | | | 934 | | llouis | peries | sporise. | 0.5 | |
|--|---|--|--|--------|--|---|--|-----------------|--|----------------|--------------|---|--|---|--|---|--|---------------------------------------|--|
| Name and Address of Reporting Person* Dugenske John E | | | | | 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 X Other (specify below) Pres, Invest. & Fin. Prod. | | | | | | |
| (Last) (First) (Middle) C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/17/2022 | | | | | | | | | | | | | |
| (Street) NORTHBROOK IL 60062 (City) (State) (Zip) | | | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | Individual or Joint/Group Filing (Check Applicable Line) Y Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | Tab | le I - Non | -Deriv | /ativ | e Se | curities | s Ac | quired, D | ispos | ed o | f, or Be | neficiall | y Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date) | | | | | Execution Date, | | | Code (Instr. 5) | | | tr. 3, 4 and | 5. Amour Securitie Beneficia Owned F Reported Transact | es Form ally (D) o following (I) (Ir | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | - | | | | | | | uired, Dis | pose | | | | Owned | and 4) | | | | |
| 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, | 4. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expira Date | ation | Title | Amount or Number of Shares | | | | | | |
| Employee Stock Option (Right to Buy) | \$122.64 | 02/17/2022 | | | A | | 50,810 | | (1) | 02/17/ | /2032 | Common Stock | 50,810 | \$0 | 50,810 | 0 | D | | |

Explanation of Responses:

1. Option exercisable in three increments, with one third vesting on February 17, 2023, February 17, 2024, and February 17, 2025, with any fractional shares to be rounded as provided for in award agreement.

/s/ Daniel G. Gordon, attorneyin-fact for John E. Dugenske

02/22/2022

** Signature of Reporting Person

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.