FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Vashington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

| STATEMENT                               | OF | <b>CHANGES</b> | IN BEN | NEFICIAL | <b>OWNERSI</b>                        | HIP |
|---|----|----------------|--------|----------|---------------------------------------|-----|
| • · · · · · · · · · · · · · · · · · · · | •  | 0              |        |          | · · · · · · · · · · · · · · · · · · · |     |

| OMB APP                  | OMB APPROVAL |  |  |  |  |  |  |  |  |
|--------------------------|--------------|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287    |  |  |  |  |  |  |  |  |
| Estimated average burden |              |  |  |  |  |  |  |  |  |
| 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>Crawford Kermit R</u>  |     |            |  |                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol ALLSTATE CORP [ ALL ] |   |       |  |  |   |                |  |  | all applic  | able)<br>r  | g Pers   | son(s) to Issi<br>10% Ow | ner  |  |
|--|-----|------------|--|-----------------|--|---|-------|--|--|---|----------------|--|--|---|---|--|--------------------------|--|--|
| (Last) (First) (Middle) C/O THE ALLSTATE CORPORATION   |     |            |  |                 |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2021 |       |  |  |   |                |  |  |   | Officer<br>below)   | (give title  |                          | Other (s<br>below)   | pecify   |
| 2775 SANDERS ROAD  (Street)  NORTHBROOK IL 60062  (City) (State) (Zip)   |     |            |  |                 |  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |       |  |  |   |                |  |  | Indivine)   | · ·   |  |                          |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |     |            |  |                 |  |   |       |  |  |   |                |  |  |   |   |  |                          |  |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/E   |     |            |  | Execution Date, |  | 3. 4. Securi<br>Transaction Disposed<br>Code (Instr. 5)     |       | rities Acquired (A) or<br>ed Of (D) (Instr. 3, 4 a |  | 5. Amount<br>Securities<br>Beneficiall<br>Owned Fol<br>Reported |                | s Forn<br>ally (D) o<br>following (I) (Ir  |  | : Direct<br>r Indirect<br>str. 4)                   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |                          |  |  |
|  |     |            |  |                 | Code V Amount (A) or Pr  |   | Price |  | Transaction(s)<br>(Instr. 3 and 4)                             |   |                |  | msu. 4)                                |   |   |  |                          |  |  |
|  |     | Т          |  |                 |  |   |       |  | uired, Dis<br>s, options                                       |   |                |  |  | y O   | wned  |  |                          |  |  |
| 1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise (Instr. 3)  Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year) |     |            |  | Date,           | Code (Instr  |   | n of  |  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |   |                | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Securi<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) |   | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | ly                       | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |     |            |  |                 | Code   | v   | (A)   | (D)  | Date<br>Exercisable  | Ex<br>Da  | piration<br>te | Title  | Amount<br>or<br>Number<br>of<br>Shares | Number<br>of  |   |  |                          |  |  |
| Restricted<br>Stock<br>Units   | (1) | 06/01/2021 |  |                 | A  |   | 1,124 |  | (1)  |   | (1)            | Common<br>Stock  | 1,124                                  |   | \$0   | 1,124  |                          | D  |  |

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. Crawford

06/03/2021

\*\* 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.