SEC Form 4	
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## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
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

-					01 360	tion 30(h) of the	ennves	sunen	COII	ipany Act	0119	40							
1. Name and Address of Reporting Person <sup>*</sup> DeBiase Christine M.				2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ ALL ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
												Directo			10% O				
,					3. Date of Earliest Transaction (Month/Day/Year)								X Officer below)	(give title		Other ( below)	specify		
(Last)	`	,	(Middle)		02/21/2024							'		GC &	Secretary	,			
C/O THE ALLSTATE CORPORATION														2	., 020, 0				
3100 SANDERS ROAD 4					4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
,														X Form filed by One Reporting Person					
(Street) NORTH	BROOK II	_	60062											Form f Persor		re thar	n One Repo	orting	
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication														
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ed to								
		Tab	le I - No	n-Deriv	ative Se	ecurities A	cquir	red,	Disp	osed o	of, o	r Ben	eficial	ly Owned	k				
1. Title of Security (Instr. 3) 2. Trans: Date (Month/L			action Day/Year)	Execution Date,			Code (Instr. 5)					I Securiti Benefici Owned I	5. Amount of Securities Beneficially Owned Following		r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							с	Code	v	Amount		(A) or (D)	Price Price (Instr. 3 and 4)						
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Instr 8)		Expiration Date				A 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)	

## Explanation of Responses:

\$159.17

(2)

Employee Stock

Option (Right to

Buy) Restricted

Stock Units

1. Option exercisable in three increments, with one third vesting on February 21, 2025, February 21, 2026, and February 21, 2027, with any fractional shares to be rounded as provided for in award agreement. 2. Award of Restricted Stock Units (RSUs) granted on February 21, 2024, under The Allstate Corporation 2019 Equity Incentive Plan. Each RSU represents the right to receive, without payment of any consideration, one share of Allstate common stock on the conversion date, with any fractional RSU to be rounded as provided for in award agreement. The RSUs will convert in three equal increments on February 21, 2025, February 21, 2026, and February 21, 2027.

Date Exercisable

(1)

(2)

Expiration Date

02/21/2034

02/21/2027

Title

Commor

Stock

Commor

Stock

/s/ Meghan E. Jauhar, attorney-

Amount or Number

Shares

9.494

2,300

\$<mark>0</mark>

\$<mark>0</mark>

of

in-fact for Christine M.

DeBiase

\*\* Signature of Reporting Person Date

9,494

2,300

02/23/2024

D

D

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).

02/21/2024

02/21/2024

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code v

Α

Α

(A)

9,494

2,300

(D)

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.