FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| | OMB APPROVAL | | | | | | | | | |
|-----|--------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| - 1 | 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

| | | | | | | Occiic | // JOC (1 | 1) 01 11 | CHIVES | Stillelit | Company Ac | . 01 13-10 | | | | | | | |
|--|---|--|---------|-------------------------------------|---------|--|---|--|--------------|---------------------------------|---|--------------------------------|--|---|---|---|--|---|--|
| 1. Name and Address of Reporting Person* Merten Jesse E | | | | | | | 2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL] | | | | | | | | nip of Report oplicable) ector | ing Per | ng Person(s) to Issue | | |
| | | | | | | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | icer (give title | | | specify | |
| (Last) | | 02/16/2024 | | | | | | | | | elow) b VP & Chief Financial | | below) icial Office | er | | | | | |
| C/O THE ALLSTATE CORPORATION 3100 SANDERS ROAD | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | | | | | | | | | | | | | | | m filed by O | | • | | |
| NORTHBROOK IL 60062 | | | | | | | | | | | | | | | m filed by Merson | ore thai | n One Repo | rting | |
| (City) (State) (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. | | | | | | | | | | | | | | | | | |
| | | Tab | ole I - | Non-Der | ivativ | e Sec | urit | ies A | cquir | red, C | Disposed (| of, or E | Beneficia | lly Owr | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | | | Execuear) if any | | eemed ution Date, :h/Day/Year) | | action Instr. | 4. Securities Acquired Of (D) (Instr. 3, 4 and 5 | | | | 5. Amount of Securities Beneficially Owned Following | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Trai | orted nsaction(s) tr. 3 and 4) | | | (Instr. 4) | |
| Common | Stock | | | 02/16/2 | 16/2024 | | | | M | | 19,458 | A | \$105.0 | 8 | 36,179 | | D | | |
| Common Stock | | | | 02/16/2024 | | | | | S | | 11,090 | D | \$162.007 | 7 ⁽¹⁾ | 25,089 | | D | | |
| Common Stock 02/ | | | | 02/16/2 | 6/2024 | | | | S | | 7,668 | D | \$162.811 | 9(2) | 17,421 | ,421 | | | |
| Common Stock 02/16/2024 | | | | | 024 | .4 | | | S | | 700 | D | \$163.637 | 1(3) | 16,721 | 6,721 | | | |
| Common Stock 02/18/2024 | | | | | 024 | 4 | | | Α | | 2,006(4) | Α | \$ <mark>0</mark> | | 18,727 | | D | | |
| Common Stock 02/18/2024 | | | | | 024 | 4 | | F | | 612(5) | D | \$161.7 | 8 | 18,115 | | D | | | |
| Common Stock | | | | | | | | | | | | | | | 7,131 | | I | By 401(k) Plan | |
| | | | Table | | | | | | | | sposed of s, convert | | | y Owne | d | , | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu | eemed Ition Date, h/Day/Year) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5) | | /ative irities iired ir osed) (Instr | Expi (Mor | ate Exe iration I nth/Day | | of Secu Underli Derivati | | 8. Price Derivat Securit (Instr. 5 | ive derivativ y Securiti | ve es ially ng d tion(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exer | rcisable | Expiration Date | Title | Amount or Number of Shares | er | | | | | |
| Employee Stock Option (Right to Buy) | \$105.08 | 02/16/2024 | | | M | | | 19,458 | 02/1 | 18/2024 | 02/18/2031 | Commo | | \$0 | 9,7. | 30 | D | | |

Explanation of Responses:

- 1. Reflects weighted average sale price for open-market sales transaction reported herein. Actual sale prices ranged from \$161.610 to \$162.600. The reporting person provided the issuer, and will provide any security holder of The Allstate Corporation or member of the SEC staff, full information regarding the number of shares sold at each separate price upon request.
- 2. Reflects weighted average sale price for open-market sales transaction reported herein. Actual sale prices ranged from \$162.610 to \$163.480. The reporting person provided the issuer, and will provide any security holder of The Allstate Corporation or member of the SEC staff, full information regarding the number of shares sold at each separate price upon request.
- 3. Reflects weighted average sale price for open-market sales transaction reported herein. Actual sale prices ranged from \$163.610 to \$163.660. The reporting person provided the issuer, and will provide any security holder of The Allstate Corporation or member of the SEC staff, full information regarding the number of shares sold at each separate price upon request.
- 4. Shares acquired upon conversion of 2021 performance stock award, pursuant to The Allstate Corporation 2019 Equity Incentive Plan.
- 5. Shares withheld to satisfy tax withholding obligations incident to the conversion of performance stock award.

/s/ Meghan E. Jauhar, attorneyin-fact for Jesse E. Merten 02/21/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).