

OMB APPROVAL	
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**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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>Ferguson Rhonda S</u>			2. Issuer Name and Ticker or Trading Symbol <u>ALLSTATE CORP [ ALL ]</u>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) _____ Other (specify below) _____ <b>X</b> <u>EVP &amp; General Counsel</u>		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <u>10/05/2020</u>			6. Individual or Joint/Group Filing (Check Applicable Line) <b>X</b> Form filed by One Reporting Person Form filed by More than One Reporting Person		
<u>C/O THE ALLSTATE CORPORATION</u> <u>2775 SANDERS ROAD</u>			4. If Amendment, Date of Original Filed (Month/Day/Year)					
(Street) <u>NORTHBROOK IL</u> <u>60062-6127</u>								
(City) (State) (Zip)								

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 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 Amount of Securities Underlying Derivative Security (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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
<u>Employee Stock Option (Right to Buy)</u>	<u>\$93.68</u>	<u>10/05/2020</u>		<u>A</u>		<u>13,350</u>		<u>(1)</u>	<u>10/05/2030</u>	<u>Common Stock</u>	<u>13,350</u>	<u>\$0</u>	<u>13,350</u>	<u>D</u>	
<u>Restricted Stock Units</u>	<u>(2)</u>	<u>10/05/2020</u>		<u>A</u>		<u>21,349</u>		<u>(2)</u>	<u>10/05/2022</u>	<u>Common Stock</u>	<u>21,349</u>	<u>\$0</u>	<u>21,349</u>	<u>D</u>	

**Explanation of Responses:**

- Option exercisable in three increments, with one third vesting on October 5, 2021, October 5, 2022, and October 5, 2023, with any fractional shares to be rounded as provided for in award agreement.
- Award of Restricted Stock Units (RSUs) granted on October 5, 2020, under The Allstate Corporation 2019 Equity Incentive Plan. Each RSU represents the right to receive, without the payment of any consideration, one share of Allstate common stock (on the conversion date), with any fractional shares to be rounded as provided for in award agreement. Half of the RSUs will convert on October 5, 2021, and the remaining half will convert on October 5, 2022.

/s/ Effe Vainikos, attorney-in-fact for Ms. Ferguson 10/07/2020

\*\* 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.