FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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

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1. Name and Address of Reporting Person* Ferren Eric K					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					
(Last)	ast) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/05/2024							Officer (give title below)  SVP, Controller, and CAO					
3100 SANDERS ROAD				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NORTHBROOK IL 60062											Form filed by One Reporting Person Form filed by More than One Reporting Person						
(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	le I - Non-De	erivativ	e Se	curitie	s Ac	quired, D	isposed	of, or Be	neficial	ly Owne	d				
Date				ransaction e onth/Day/Ye	Execution Date,		Code (Instr. 5)			Benefic Owned	es ially Following	Form (D) o	r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	Amou	nt (A) o	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)			(		
		Т	able II - Der (e.g					uired, Dis s, options				Owned					
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	Code	Transaction Code (Instr.		າ of		cisable and ate Year)	7. Title an Amount of Securities Underlyin Derivative (Instr. 3 a	of s g e Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiratio Date	n Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$163.3	06/05/2024		A		1,964		(1)	06/05/203	4 Common Stock	1,964	\$0	1,964	ŀ	D		
Restricted Stock Units	(2)	06/05/2024		A		4,563		(2)	06/05/202	7 Common Stock	4,563	\$0	4,563		D		

## **Explanation of Responses:**

- 1. Option exercisable in three increments, with one third vesting on June 5, 2025, June 5, 2026, and June 5, 2027, with any fractional shares to be rounded as provided for in award agreement.
- 2. Award of Restricted Stock Units (RSUs) granted on June 5, 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. 736 RSUs will convert in three equal increments on June 5, 2025, June 5, 2026, and June 5, 2027, and 3,827 RSUs will convert on June 5, 2027.

/s/ Meghan E. Jauhar, attorney-06/07/2024 in-fact for Eric K. Ferren

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.