| SEC F | Form 4 |
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Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPRO | VAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |

| hours per response: | 0.5 |
|--------------------------|-----|
| Estimated average burden | |

| 1. Name and Address of Reporting Person [*] CIVGIN DON | | | 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 Officer (give title V Other (specify | | | | |
|--|---|----------------|--|---|--|--|--|--|
| | st) (First) (Middle) O THE ALLSTATE CORPORATION 75 SANDERS ROAD | | 3. Date of Earliest Transaction (Month/Day/Year) 02/09/2017 | below) X below) Pres Emerging Businesses - AIC | | | | |
| | | 60062 (Zip) | 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 Form filed by More than One Reporting Person | | | | |

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

| | | | • | , | <u> </u> | , | | | | | |
|---------------|--------------------|--|---|-----------------------------|----------|---|---------------|-------|---|-----------------------------------|---|
| 1. Title of S | ecurity (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 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. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and | ive ies ied ed nstr. | Expiration Date (Month/Day/Year) | | Expiration Date | | of Securities | | 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 | Amount or Number of Shares | | | | | | |
| Employee Stock Option (Right to Buy) | \$78.35 | 02/09/2017 | | A | | 64,596 | | (1) | 02/09/2027 | Common Stock | 64,596 | \$0 | 64,596 | D | | | |

Explanation of Responses:

1. Option exercisable in three increments, with one third vesting on February 9, 2018, February 9, 2019, and February 9, 2020, with any fractional shares to be rounded as provided for in award agreement.

| <u>/s/ Efie Vainikos, attorney-in-</u> <u>fact for Mr. Civgin</u> | <u>02/13/2017</u> |
|--|-------------------|
| ** 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.