FORM 4

## **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								

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

					OI	r Sect	ion 30(n)	or the i	nvestmen	t Con	npany Act o	DI 1940							
1. Name and Address of Reporting Person* Sherrill Gregg M						2. Issuer Name <b>and</b> Ticker or Trading Symbol ALLSTATE CORP [ ALL ]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BHCITII	i Giegg IV	1			$\vdash$									Directo	r		10% Ov	ner	
(Last)	(F	rst) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2024								Officer below)			Other (s below)	pecify	
C/O THI	E ALLSTAT	TE CORPORAT	ION		4	If Ame	endment	Date of	f Original I	Filed	(Month/Day	v/Year)	6.1	ndividual or .l	oint/Group	Filing	(Check Ann	licable	
3100 SANDERS ROAD				"	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
	TID LITE ITE	,,,,,			_									Form fi	led by One	Repor	rting Persor	۱ ا	
(Street)	DDOOK II		60062											Form fi Person		e than	One Repor	ting	
NORTHBROOK IL 60062			P	Rule 10b5-1(c) Transaction Indication															
(City)	) (State) (Zip)				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.														
		Tal	ole I - Nor	ı-Deri	ivativ	re Se	curitie	es Acc	quired,	Dis	posed o	f, or Be	neficial	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,		3. Transaction Code (Instr. 3, 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Beneficia Owned F	s ally ollowing	Form:	Direct Indirect It. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) o (D)	Price	Reported Transact (Instr. 3 a	ction(s)			Instr. 4)	
Common Stock 06/01/				01/202	1/2024		М		1,124	1,124 A		7,0	7,089		D				
			Table II -								osed of, onvertib			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 D if any (Month/Day/	ate,	4. Transa Code ( 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)		9	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	y C F D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
										$\top$			Amount	]	Transaction (Instr. 4)	)11(S)			
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Number of Shares						
Restricted Stock Units	(1)	06/01/2024			M			1,124	06/01/202	24 (	06/01/2024	Common Stock	1,124	\$0	0		D		
Restricted Stock Units	(2)	06/01/2024			Α		1,045		(2)		(2)	Common Stock	1,045	\$0	1,045		D		

## **Explanation of Responses:**

- 1. Conversion of previously awarded restricted stock units into an equal number of common shares, without the payment of any consideration, pursuant to The Allstate Corporation 2017 Equity Compensation Plan for Non-Employee Directors.
- 2. Restricted Stock Units (RSUs) granted under The Allstate Corporation 2017 Equity Compensation Plan for Non-Employee Directors providing that each RSU represents the right to receive one share of Allstate common stock following either a standard restriction period or a deferred period of restriction if elected. The RSUs reported will convert into common stock upon the earlier of (i) the third anniversary of the date of grant, (ii) the day following the date on which the reporting person's Board service terminates, and (iii) the day following the date of the reporting person's death or disability.

/s/ Meghan E. Jauhar, attorneyin-fact for Gregg M. Sherrill

\*\* Signature of Reporting Person Date

06/04/2024

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.