SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

	Address of Reporting F	Person*	2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>SPRIESE</u>	<u>ER JUDITH A</u>			X	Director	10% Owner			
	(First)	(Middle) ORATION	3. Date of Earliest Transaction (Month/Day/Year) 06/01/2017	1	Officer (give title below)	Other (specify below)			
2775 SANDERS ROAD			4. If Amendment, Date of Original Filed (Month/Day/Year) 06/05/2017	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NORTHBROOK IL 60062-6127		60062-6127	_	X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)							
		Table I - Non-Der	ivative Securities Acquired. Disposed of, or Bene	ficially	Owned				

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)	n Date, Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (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)		Derivative		6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following	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		Reported Transaction(s) (Instr. 4)		
Restricted Stock Units	(1)	06/01/2017		A		1,783 ⁽²⁾		(1)	(1)	Common Stock	1 ,783 ⁽²⁾	\$0	1,783 ⁽²⁾	D	

Explanation of Responses:

1. 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. 2. Clerical error resulted in reporting person's original Form 4 incorrectly reporting the number of RSUs granted as 1,726. The correct number of RSUs granted was 1,783.

> /s/ Efie Vainikos, attorney-infact for Judith A. Sprieser

12/14/2017

** 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.