ALLSTATE CORP Form 4

March 09, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * Greffin Judith P

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(City)

ROAD

(First) (Middle) ALLSTATE CORP [ALL]

(Check all applicable)

C/O THE ALLSTATE

CORPORATION, 2775 SANDERS

(Zip)

3. Date of Earliest Transaction

(Month/Day/Year) 03/05/2015

Director 10% Owner Officer (give title __X_ Other (specify below)

below) EVP & CIO Allstate Ins. Co.

(Street)

4. If Amendment, Date 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

NORTHBROOK, IL 60062-6127

(State)

(010)	(State)	Tabl	le I - Non-I	Jerivative	Secur	ities Acqu	ured, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	03/05/2015		A	57,096 (1)	A	\$0	110,041.922	D	
Common Stock	03/05/2015		F	26,093 (2)	D	\$ 69.56	83,948.922	D	
Common Stock							3,872 (3)	I	By 401(k) Plan

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

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(9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	Ç
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amou	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	•		Securities	(Instr. 5)]	
	Derivative				Securities			(Instr.	3 and 4)		(
	Security			Acquired							J
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
							Expiration Date	Title	Number		
									of		
				Code V	(A) (D)				Shares		
				Code v	(11) (D)				Silaics		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Date

Greffin Judith P C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD NORTHBROOK, IL 60062-6127

EVP & CIO Allstate

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Ins. Co.

Signatures

/s/ Efie Vainikos, attorney-in-fact for Judith P.
Greffin 03/09/2015

**Signature of Reporting Person

Explanation of Responses:

- * 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).
- (1) Shares acquired from conversion of performance stock awards pursuant to The Allstate Corporation 2013 Equity Incentive Plan.
- (2) Shares withheld to satisfy tax withholding obligations incident to the conversion of performance stock awards.
- (3) Reflects acquisition of 16 shares of The Allstate Corporation common stock since February 9, 2015 under the Allstate 401(k) Savings Plan, pursuant to the most recent plan statement, dated March 3, 2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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