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ALLSTATE CO Form 4	ORP										
June 03, 2015											
FORM	4								PPROVAL		
Washington, D.C. 20549								N OMB Number:	3235-0287		
Check this box if no longer CTLATED (EDUTE OF CHANCES DUPED) (EDUTED) (EDUTED)							Expires:	January 31, 2005			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI Section 16. Form 4 or							WNEKSHIP OF	Estimated burden hou response	nours per		
Form 5 obligations may continu <i>See</i> Instructi 1(b).	e. Section 170	(a) of the I	Public U	tility Hol	lding Coi		nge Act of 1934, of 1935 or Section 940				
(Print or Type Resp	ponses)										
1. Name and Add HENKEL HE	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer						
			ALLSTATE CORP [ALL]				(Check all applicable)				
(Last)	(First) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)				X Director 10% Owner					
C/O THE ALL CORPORATIO ROAD		NDERS	06/01/2	-			Officer (giv below)		ner (specify		
Filed(Mc				(Month/Day/Year) Aj			Applicable Line) _X_ Form filed by	 D. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
NORTHBROO	OK, IL 60062						Person		1 0		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	Transaction Date onth/Day/Year)	Execution any	Date, if	Code (Instr. 8)		(A) or of (D) 4 and 5) (A) or	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(D) Price					
Reminder: Report	on a separate line	e for each cl:	ass of sec	urities bene	Perso inforr requi	ons who res nation cont red to respo ays a curre	or indirectly. Spond to the colle ained in this form and unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					sposed of, or convertible s	Beneficially Owner securities)	1			

1. Title of
Derivative2.3. Transaction Date3A. Deemed4.5. Number6. Date Exercisable and
Expiration Date7. Title and Amount of
Underlying Securities8. Pr1. Title of
Derivative(Month/Day/Year)Execution Date, if
Execution Date, ifTransaction of DerivativeExpiration Date7. Title and Amount of
Underlying Securities8. Pr

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Security (Instr. 3)	2		any (Month/Day/Year)	Code (Instr. 8)	Securitie Acquirec (A) or Disposed (D) (Instr. 3, and 5)	l l of	(Month/Day/Year)		(Instr. 3 and 4)		Secu (Inst
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	06/01/2015		А	2,242		<u>(1)</u>	(1)	Common Stock	2,242	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
HENKEL HERBERT L C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD NORTHBROOK, IL 60062	Х						
Signatures							
/s/ Efie Vainikos, attorney-in-fact for Mr. Henkel		06/03/20	15				
**Signature of Reporting Person		Date					

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).

Restricted Stock Units (RSUs) are granted under The Allstate Corporation 2006 Equity Compensation Plan for Non-Employee Directors, as amended and restated. Each RSU represents the right to receive one share of Allstate common stock upon the earlier of the day following (i) the date of the reporting person's death or disability, or (ii) the date on which the reporting person is no longer serving as a

director of Allstate. 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.