#### Edgar Filing: Rizzo Mario - Form 4

Rizzo Mario Form 4											
February 21,	2018										
FORM	14								OMB AF	PPROVAL	
	UNITE	D STATES		ATTIES A hington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5	6.								Expires: January 2 Estimated average burden hours per response		
obligation may conti <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the	Public Ut	• •	ling Con	npan	y Act of	1935 or Section	n		
(Print or Type R	Responses)										
Rizzo Mario Symb			Symbol	Name and			ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chee					ck all applicable)			
				Day/Year)				Director       10% Owner         X Officer (give title       Other (specify below)         below)       below)         EVP & Chief Financial Officer			
Filed(Mon				endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
NORTHBR	OOK, IL 60062	2						Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	02/18/2018			М	3,447	А	\$ 0 <u>(1)</u>	11,019	D		
Common Stock	02/18/2018			F	1,020	D	\$ 95.04	9,999	D		
Common Stock								1,172 <u>(2)</u>	I	By 401(K) Plan	

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

Persons who respond to the collection of information contained in this form are not (9-02) required to respond unless the form

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# displays a currently valid OMB control number.

# 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. Transacti Code (Instr. 8)	Transaction of Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	02/18/2018		М		3,447	02/18/2018	02/18/2018	Common Stock	3,447

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Rizzo Mario C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD NORTHBROOK, IL 60062			EVP & Chief Financial Officer				

## Signatures

/s/ Mario Rizzo 02/20/2018 <u>\*\*</u>Signature of Date 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) Conversion of previously awarded restricted stock units representing the right to receive one share of Allstate common stock, without the payment of any consideration, pursuant to The Allstate Corporation 2013 Equity Incentive Plan.
- (2) Reflects acquisition of 105 shares of The Allstate Corporation common stock since January 3, 2018 under the Allstate 401(k) Savings Plan, pursuant to the most recent plan statement, dated February 16, 2018.

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.