ALLSTATE CORP Form 3 July 22, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB ODDE ON

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> ESKEW MICHAEL L	 Date of Event Requiring Statement (Month/Day/Year) 	3. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL]				
(Last) (First) (Middle) C/O THE ALLSTATE CORPORATION, 2775	07/21/2014	4. Relationship Person(s) to Is (Check a		Filed(Month/Day/Year)		
SANDERS ROAD (Street) NORTHBROOK, IL 60062		X Director Officer (give title below	Other	of marriadar of yound Group		
				Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I - I	Non-Derivati	ive Securiti	ies Beneficially Owned		
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)	Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock	190		D	Â		
Reminder: Report on a separate line for owned directly or indirectly.	each class of securities benefic	cially SE	EC 1473 (7-02	2)		
Persons who re information cor required to resp	spond to the collection of tained in this form are not ond unless the form disp OMB control number.	t				

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response ...

Estimated average burden hours per

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Date Exercisable	Expiration T	Amount or Number of	Security	Direct (D) or Indirect
Enereisuole	Dute	Shares		(I)
				(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships				
		Director	10% Owner	Officer	Other	
ESKEW MICHAEL L C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD NORTHBROOK, IL 60062		ÂX	Â	Â	Â	
Signatures						
Michael L. Eskew	07/22/2014					
**Signature of Reporting Person	Date					

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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. 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.