## Edgar Filing: TRAQUINA PERRY M - Form 4

TRAQUINA PE Form 4	ERRY M										
July 03, 2018											
FORM 4		статес	SECU	DITIES	AND EV	CHANCE	COMMISSIO		PPROVAL		
Washington, D.C. 20549									3235-0287		
Check this box if no longer								Expires:	January 31, 2005		
subject to Section 16. Form 4 or						ICIAL O	WNEKSHIP OF	Estimated burden hou response	average Jrs per		
Form 5 obligations may continue <i>See</i> Instruction 1(b).	Section 17(	(a) of the H	Public U	Itility Ho	lding Cor		nge Act of 1934, of 1935 or Secti 940				
(Print or Type Resp	onses)										
TRAQUINA PERRY M Symb				er Name <b>an</b> ΓΑΤΕ CC		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (	Middle)	3. Date of Earliest Transaction				(Chi	eck all applicabl	6)		
(Month/Da 2775 SANDERS ROAD, C/O THE ALLSTATE CORPORATION				h/Day/Year) $ \underbrace{-X}_{below}$				rector 10% Owner ficer (give title Other (specify below)			
	(Street)		4. If Am	endment, D	ate Origina	ıl	6. Individual or Joint/Group Filing(Check				
NORTHBROO	K, IL 60062		Filed(Mo	onth/Day/Yea	ar)			One Reporting P More than One R			
(City)	(State)	(Zip)	Tak	la I Non	Donivotivo	Securities A	Person	of on Donoficio	lly Owned		
•	ransaction Date	-		3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
	onth/Day/Year)	Execution			onAcquired	(A) or	Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Da	w/Vear)	Code (Instr. 8)	Disposed (Instr. 3, 4		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
			ly/ I cal)	(msu: 0)	(11301.5),	(A)	Following Reported	(Instr. 4)	(Instr. 4)		
				a		or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	``````````````````````````````````````				
Reminder: Report of	on a separate line	e for each cla	ass of sec	urities bene	-	-					
					inforn requi	nation cont red to response ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					posed of, or convertible	Beneficially Owner securities)	d			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	:
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	]
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Share Unit	\$0	07/01/2018		А		342.391 (1)		<u>(1)</u>	<u>(1)</u>	Common Stock	342.391

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
TRAQUINA PERRY M 2775 SANDERS ROAD C/O THE ALLSTATE CORPORATION NORTHBROOK, IL 60062	Х					
Signatures						
/s/ Efie Vainikos, attorney-in-fact for Mr. Traquina		07/03/20	018			
**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).

These common share units were acquired pursuant to The Allstate Corporation Amended and Restated Deferred Compensation Plan for Non-Employee Directors and represent the director's fees deferred under the Plan and converted into units based on the fair market value

(1) of The Allstate Corporation's common shares. The units are credited with amounts representing dividends on common shares, as declared, which are also converted into units. For the period of April 2, 2018 through July 1, 2018, the reporting person acquired 10.553 of common share units representing those dividends.

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.