FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF C
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to \$

## HANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Winter Matthew E						2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ ALL ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Vother (specify					
	(Fi E ALLSTAT NDERS RO		3. Date of Earliest Transaction (Month/Day/Year) 07/01/2013										below)  Pres Allstate Auto, Home, Agenc.								
2773 3A	INDERS KC	JAD —————	_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable							
(Street) NORTHBROOK IL 60062-6127																X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)														11				
		Tab	le I - No	n-Deriv	/ative	Se	curit	ies Ad	cqu	uired,	Dis	posed o	of, oı	r Ben	eficial	ly Owne	t				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		Executi Year) if any		eemed ition Date, h/Day/Year)		3. Transaction Code (Instr. 8)					Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	t (A) or (D) Pri		Price	Transac	Reported ransaction(s) Instr. 3 and 4)			(Instr. 4)				
Common Stock				07/0	1/2013	3				M		6,600	00 A		\$29.6	34 27	27,502		D		
Common Stock			07/0	07/01/2013					S		6,600	0	D	\$48.3	34 20	20,902		D			
Common Stock			07/02/2013					M		1,785		A	\$29.6	34 22	22,687		D				
Common Stock																754			I	By 401(k) Plan	
	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. Deeme Execution if any (Month/Da	ed Date,	4. Transa Code (I 8)	saction of (Instr. D S A (#		5. Number 6 of E		. Date Exercisabl Expiration Date Month/Day/Year)		able and	Amou Secur Under		Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Da Ex	ate kercisab		Expiration Date	Title		Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$29.64	07/01/2013			М			6,600		(1)	1	1/02/2019	Com Sto		6,600	\$0	18,555	5	D		
Employee Stock Option (Right to Buy)	\$29.64	07/02/2013			М			1,785		(1)	1	1/02/2019	Com Sto		1,785	\$0	16,770	)	D		

## **Explanation of Responses:**

1. Stock option award granted to reporting person on November 2, 2009 with incremental vesting over four year period; remaining increment to vest on November 2, 2013.

Transactions reported on this Form reflect the execution of an "exercise and sell to cover" transaction pursuant to a 10b5-1 plan that became effective on May 7, 2013.

/s/ Katherine A. Smith, attorney-in-fact for Matthew E. 07/03/2013 Winter

\*\* Signature of Reporting Person Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.