FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number: 3235-								
l	Estimated average burden								
	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>Cripe Frederick F</u>						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					
(Last) C/O THI	,	iirst) ΓΕ CORPORAT		3. Date of Earliest Transaction (Month/Day/Year) 02/20/2007								below) SVP Allstate Insurance Company							
2775 SANDERS ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street) NORTHBROOK IL 60062-6127					(iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii							Line	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)													i cisori						
		Та	ble I - Non-D	erivati	ve Se	curitie	s A	cquired, D	Disp	osed of	, or Ben	eficially	/ Owned						
1. Title of Security (Instr. 3) 2. Trans Date (Month/I					action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (In:	Transaction Disposed Of (D) (Inst Code (Instr. 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
			Table II - Dei (e.ç					quired, Dis s, options					Owned						
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/Yea	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e Owner s Form: Direct or Indi g (I) (Ins	Ownership	Beneficial Ownership ect (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Exp Dat	oiration te	Title	Amount or Number of Shares							
Employee Stock Option (right to buy)	\$62.24	02/20/2007		A		28,900		(1)	02	2/20/2017	Common Stock	28,900	\$0	28,90	00	D			
Restricted Stock Units	\$0 ⁽²⁾	02/20/2007		A		4,000		02/20/2011	02/	20/2011 ⁽²⁾	Common Stock	4,000	\$0	4,00	0	D			

Explanation of Responses:

- 1. Option exercisable in four increments, each for one-fourth of the total number of said shares, such installments to vest on February 20, 2008, February 20, 2009, February 20, 2010 and February 20, 2011, respectively.
- 2. Award of Restricted Stock Units (RSUs) granted under The Allstate Corporation Amended and Restated 2001 Equity Incentive Plan. Each RSU represents the right to receive, without the payment of any consideration, one share of Allstate common stock at the end of the period of restriction. The total number of RSUs will convert to common stock on February 20, 2011.

FREDERICK F CRIPE

02/22/2007

** 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.