FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

asıllığlur,	D.C. 20549		

OMB APP	OMB APPROVAL							
OMB Number:	3235-0287							

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

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OMB Number:	3235-0287					
Estimated average bu	ırden					
hours per response:	0.5					

Name and Address of Reporting Person* SPRIESER JUDITH A					2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)													
OI IXIE	FRIESER JUDITITA))	Directo			10% Ov	vner
	E ALLSTAT	irst) ΓΕ CORPORAT	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/28/2010								Officer below)	give title		Other (s below)	specify
2775 SA	NDERS RO	JAD			4.	If Ame	endment	t, Date c	of Origina	al File	ed (Month/Day	y/Year)		dividual or J	oint/Group	Filing	(Check App	licable
(Street)					_								Line		ed by One	Reno	rting Persor	1
	BROOK IL		60062-6	127	_										•		One Repor	
(City)	(S	itate)	(Zip)															
		Та	ble I - N	on-Der	rivativ	/e Se	curiti	es Ac	quired	l, Di	sposed o	f, or Be	neficiall	/ Owned				
Date		2. Trans Date (Month/i		Execution Date, //Year) if any				s Acquired (A) or of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following				7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock 05/2				05/28	3/2010	010		M		3,000	A	\$27.44	4,2	244		D		
Common Stock 05/			05/28	3/2010				S		3,000	D	\$30.864	1,244			D		
			Table II								posed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,		5. Number of Derivative		Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	Ownersh S Form: Direct (D or Indirect (I) (Instr.		Beneficial Ownership (Instr. 4)		
				•	Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	on(s)		
Non- employee Director Stock Option (Right to Buy)	\$27.44	05/28/2010			M			3,000	06/01/2	2003	06/01/2010	Common Stock	3,000(2)	\$0	0		D	
Restricted	(2)				_		1		(2)		(2)	Common	F 050				_	

Explanation of Responses:

Stock

Units

- 1. Reflects weighted average sale price for open-market sales transactions reported herein. Actual sale prices ranged from \$30.861 to \$30.865. The reporting person provided the issuer, and will provide any security holder of The Allstate Corporation or member of the SEC staff, full information regarding the number of shares sold at each separate price upon request.
- 2. Relects exercise of expiring options.

(3)

3. Restricted Stock Units (RSUs) are granted under The Allstate Corporation 2006 Equity Compensation Plan for Non-Employee Directors, as amended and restated. Each RSU represents the right to receive one share of Allstate common stock upon the earlier of (i) the date of the reporting person's death or disability, or (ii) the date on which the reporting person is no longer serving as a director of Allstate.

(3)

(3)

/s/ Katherine A. Smith,

5,058

06/02/2010 attorney-in-fact for Judith A.

Sprieser

Stock

** 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).

06/01/2010

** 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.