SEC	Form	4
-----	------	---

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Addre	1 0	erson*	2. Issuer Name and Ticker or Trading Symbol <u>ALLSTATE CORP</u> [ALL]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
LIDDY EDV	<u>ARD M</u>			X	Director	10% Owner			
(Last) 2775 SANDERS	(First) (Middle) RS ROAD		3. Date of Earliest Transaction (Month/Day/Year) 02/06/2004	X	Officer (give title below) Chairman, Preside	Other (specify below) nt and CEO			
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filin	g (Check Applicable			
NORTHBROOD	K IL	60062		X	Form filed by One Rep	orting Person			
(City)	(State)	(Zip)	-		Form filed by More tha Person	n One Reporting			
		Table I - Non-Deri	vative Securities Acquired, Disposed of, or Benefi	cially (Dwned				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities A Disposed Of (I			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)
Common Stock	02/06/2004		A		40,000(1)	Α	\$ <mark>0</mark>	393,002	D	
Common Stock								3,104.381	Ι	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		Derivative		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 of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$ 45.96	02/06/2004		A		272,000		(2)	02/06/2014	Common Stock	272,000	\$0	272,000	D	

Explanation of Responses:

1. Award of restricted stock with tax withholding rights to reporting person pursuant to The Allstate Corporation 2001 Equity Incentive Plan; such restricted stock to vest on February 14, 2008.

2. Grant to reporting person of option to purchase 272,000 shares of common stock exercisable in four increments, each for one-fourth of the total number of said shares, such installments to vest on February 6, 2005, February 6, 2006, February 6, 2007 and February 6, 2008, respectively.

Remarks:

Reflects acquisition of 231.291 shares of The Allstate Corporation common stock since January 9, 2004 under The Savings and Profit Sharing Fund of Allstate Employees, a 401(k) plan, pursuant to the most recent plan statement, dated February 5, 2004.

Liddy Edward M.

** Signature of Reporting Person

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.

02/1<u>0/2004</u>

Date