FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
l	Estimated average but	rden							
l	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

Name and Address of Reporting Person* CROCKETT JOAN M				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				ner			
	E ALLSTA	First)	(Middle)		3. Date of Earliest Transaction (Mo 08/21/2006				onth/C	ray/Year)			below) SVP Allstate Insurance Company				·
2775 SANDERS ROAD (Street) NORTHBROOK IL 60062-6127			7	4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person												
(City)	(5	State)	(Zip)														
1. Title of S	Security (Ins		able I - Noi	n-Deriva 2. Transa		ecuriti		quired,	, Dis	posed of,			Owned 5. Amount	of	6. Ow	nership	7. Nature of
1. Title of Security (Instr. 3)			Date (Month/Day/Year)		Execution Date,		Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4 a		3, 4 and 5)	Securities Beneficial Owned Fo	s lly ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect Istr. 4)	Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Transaction	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 08/3		08/21/	/2006			М		40,000	A	\$33.38	81,589(1)			D			
Common Stock			08/21/	2006			F ⁽²⁾		5,720	D	\$58.08	75,869(1)			D		
Common Stock			08/21/	2006			F ⁽³⁾		22,988	22,988 D \$5		52,881(1)			D		
Common Stock			08/21/	2006			S		23,420	D	\$58.38	29,461(1)		D			
Common Stock												7,684.5	5368(4)			oy 401(k) Plan	
										osed of, o			wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Cod	nsaction le (Instr.	5. Number of 6. Dat ction Derivative Expire		Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	e es ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Employee Stock Option (right to buy)	\$33.38	08/21/2006		М			40,000	02/07/2	2006	02/07/2012	Common Stock	40,000	\$33.38	60,00	00	D	
Employee Stock Option (right to	\$58.08	08/21/2006		A		22,988		08/21/20	007 ⁽⁵⁾	02/07/2012	Common Stock	22,988	\$58.08	22,98	38	D	

Explanation of Responses:

- 1. The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1(c) trading plan adopted by the reporting person on June 6, 2006.
- 2. Delivery of shares to issuer to pay minimum tax withholding liability incurred in connection with the exercise.
- 3. Delivery of already-owned stock to issuer in payment of option exercise price.
- 4. Reflects acquisition of 225.5266 shares of The Allstate Corporation common stock since August 31, 2005 under The Savings and Profit Sharing Fund of Allstate Employees, a 401(k) plan, pursuant to the most recent plan statement, dated August 21, 2006.
- 5. The option vests in four increments, each one-fourth of the total number of said shares, such installments to vest on August 21, 2007, August 21, 2008, August 21, 2009 and August 21, 2010.

JOAN M CROCKETT

08/23/2006

** 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.