SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

Check this box if no longer subject 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

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

1. Name and Address of Reporting Person [*] <u>PIKE ROBERT W</u>			2. Issuer Name and Ticker or Trading Symbol <u>ALLSTATE CORP</u> [ALL]		tionship of Reporting Pe all applicable) Director	erson(s) to Issuer 10% Owner	
(Last) (Eirst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)	x	Officer (give title below)	Other (specify below)	
(Last) (First) (Middle) THE ALLSTATE CORPORATION			04/29/2005		Vice President and Secretary		
2775 SANDE	ERS ROAD						
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Filir	ng (Check Applicable	
(Street)				X	Form filed by One Re	porting Person	
NORTHBRC	OK IL	60062-6127	_		Form filed by More the Person		
(City)	(State)	(Zip)					

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

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1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)				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)			
Common Stock	04/29/2005		М		93,480	A	\$35	153,988(1)	D			
Common Stock	04/29/2005		S		93,480	D	\$ <mark>56</mark>	60,508 ⁽¹⁾	D			
Common Stock	04/29/2005		М		100	A	\$35	60,608(1)	D			
Common Stock								2,343.3163 ⁽²⁾	I	by 401(k) Plan		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(- 3)	,		,		, - I ,			,				
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)		of Deri Sec Acq (A) Disp of (I	umber ivative urities uired or oosed O) (Instr. and 5)	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 Transaction(s) (Instr. 4)	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				
Employee Stock Option (right to buy)	\$35	04/29/2005		М			93,480	08/12/2000	08/12/2009	Common Stock	93,480	\$35	100	D	
Employee Stock Option (right to buy)	\$35	04/29/2005		М			100	08/12/2000	08/12/2009	Common Stock	100	\$35	0	D	

Explanation of Responses:

1. The transaction reported in this Form 4 was effected pursuant to a Rule 10b5-1(c) trading plan adopted by the reporting person on February 25, 2005.

2. Reflects acquisition of 11.8615 shares of The Allstate Corporation common stock since February 7, 2005 under The Savings and Profit Sharing Fund of Allstate Employees, a 401(k) plan, pursuant to the most recent plan statement, dated April 29, 2005.

ROBERT W PIKE

05/03/2005

Date

** 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.