FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C 20540	
wasiiiigton,	D.C. 20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours por rosponso:	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*						2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL]										c all applic	onship of Reporting all applicable) Director		son(s) to Iss 10% Ov		
(Last) (First) (Middle) C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/11/2010										below)	(give title		Other (s		
					- 4. I ¹	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NORTH	BROOK IL		60062-61	127											X		led by Mor		orting Perso orting Perso		
(City)	(Si	tate)	(Zip)																		
		Tab	le I - No	n-Deri	vative	e Se	curit	ies A	cqı	uired,	Dis	posed o	of, or Be	nefici	ally	Owned					
Date			2. Trans Date (Month/I		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (Ir 8)	tion Disposed		ties Acquired (A) o d Of (D) (Instr. 3, 4		ıd 5)	Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Ī	Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock 0				05/11	L/2010	/2010				M		3,000) A \$2		.44	8,500		D			
Common Stock 05/11/			L/2010	2010			S		2,430	D \$33		064	6,070			D					
		-	Гable II -										, or Ben ible sec			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transactior Code (Instr 8)				6. Date Exercisa Expiration Date (Month/Day/Yea				7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		D	3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)		ate kercisable		xpiration ate	Title	Amoun or Numbe of Shares							
Non- employee Director Stock Option (Right to	\$27.44	05/11/2010			М			3,000	06	6/01/2003	0	6/01/2010	Common Stock	3,000	1)	\$0	0		D		

Explanation of Responses:

1. Reflects the exercise of expiring options.

/s/ Ronald T. LeMay

05/13/2010

** 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.