FORM 4

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMEN
Section 16. Form 4 or Form 5 obligations may continue. See	

NT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* RUEBENSON GEORGE E				2. I	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						
(Last) (First) (Middle) THE ALLSTATE CORPORATION 2775 SANDERS ROAD					05/	3. Date of Earliest Transaction (Month/Day/Year) 05/17/2005								Officer (give title X Other (specify below) SVP Allstate Insurance Company					
(Street) NORTHBROOK IL 60062-6127				_	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												ı		
(City) (State) (Zip)													<u> </u>						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				saction	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Secur Transaction Dispose Code (Instr. 5)		4. Securit	ies Acquire Of (D) (Inst	d (A) or	5. Amou Securitie Beneficia Owned F	nt of s ally following	Form (D) or	: Direct c	7. Nature of Indirect Beneficial Ownership		
							Code V		Amount	(A) or (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock			05/17	7/2005	5			М		15,20	1 A	A \$26.6		54.117 ⁽¹⁾		D			
Common Stock			05/17	05/17/2005				M		11,118	8 A	\$36.	64 43,67	2.117(1)		D			
Common Stock			05/17	05/17/2005				F ⁽²⁾		3,183	D	\$56 .	89 40,48	9.117 ⁽¹⁾		D			
Common Stock			05/17	05/17/2005				F ⁽²⁾		1,561	D \$56		89 38,92	38,928.117(1)		D			
Common Stock			05/17	17/2005				S		9,470	70 D \$5		64 29,45	29,458.117(1)		D			
Common Stock 0			05/17	7/2005				S		11,928	8 D	\$56.	69 17,53	17,530.117 ⁽¹⁾		D			
Common Stock													441.	441.2325		I 4	oy 401(k) Plan		
		7									osed of,			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercis Expiration Date (Month/Day/Ye		е	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	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 Exercisat		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$26.69	05/17/2005			М			15,201	05/18/200	01	05/18/2010	Common Stock	15,201	\$26.69	0		D		
Employee Stock Option (right to buy)	\$36.64	05/17/2005			М			11,118	08/14/199	98	08/14/2007	Common Stock	11,118	\$36.64	0		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 May 2, 2005.
- 2. Delivery of shares to issuer to pay minimum tax withholding liability incurred in connection with the exercise.

GEORGE E RUEBENSON 05/19/2005

** 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.