SEC	Form	4
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(Street)

(City)

FORM 4

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

OMB APPROVAL

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

Form filed by One Reporting Person

Person

Form filed by More than One Reporting

10% Owner

Other (specify

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMEN	NT OF CHANGES IN BENEFICIAL OWNE	Estimated average burden hours per response:			
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]	5. Relationship of Re (Check all applicable	eporting Person(s) to Issuer e)		
MCNEIL RONALD D			Director		10% Own	
			Officer (giv	e title X	Other (spe	
(Last) (First) (M	1iddle)	3. Date of Earliest Transaction (Month/Day/Year)	below)		below)	

SVP Allstate Insurance Company 02/22/2005 THE ALLSTATE CORPORATION 2775 SANDERS ROAD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Х NORTHBROOK IL 60062-6127 (State) (Zip)

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

······································										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)

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

	(-3) [,,,,,,														
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)		n of		6. Date Exerci Expiration Dat (Month/Day/Ye	e	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)	\$ 52.57	02/22/2005		A		39,368		02/22/2006 ⁽¹⁾	02/22/2015	Common Stock	39,368	\$0	39,368	D	
Restricted Stock Units	\$0 ⁽²⁾	02/22/2005		А		6,009		02/22/2009	(2)	Common Stock	6,009	\$0	6,009	D	

Explanation of Responses:

1. Grant to reporting person of option to purchase 39,368 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 22, 2006, February 22, 2007, February 22, 2008 and February 22, 2009.

2. Award of Restricted Stock Units (RSUs) with tax withholding rights granted under The Allstate Corporation 2001 Equity Incentive Plan. Each RSU represents the right to receive, without the payment of any consideration, one share of Allstate common stock at the end of the restricted period (the conversion date), which is February 22, 2009.

RONALD DEAN MCNEIL

02/24/2005

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.