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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 APPROVAL									
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1. Name and Address <u>SYLLA CAS</u>	1 0	*	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) THE ALLSTATE 2775 SANDERS	(First) (Middle) ALLSTATE CORPORATION SANDERS ROAD		3. Date of Earliest Transaction (Month/Day/Year) 07/22/2005	Officer (give title X Other (specify below) President Allstate Financial
(Street) NORTHBROOK (City)	IL (State)	60062-6127 (Zip)	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

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

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	07/22/2005		М		35,511	Α	\$42.5	113,114	D		
Common Stock	07/22/2005		М		40,000	A	\$39.19	153,114	D		
Common Stock	07/22/2005		S		75,511	D	\$61.05	77,603	D		
Common Stock	07/25/2005		М		91,020	A	\$35	168,623	D		
Common Stock	07/25/2005		F ⁽¹⁾		15,422	D	\$61.35	153,201	D		
Common Stock	07/25/2005		S		73,612	D	\$61.3179	79,589	D		
Common Stock								1,974.8345 ⁽²⁾	I	by 401(k) Plan	

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

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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)	6. Date Exercisable and 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	07/25/2005		М			91,020	08/12/2000	08/12/2009	Common Stock	91,020	\$35	0	D	
Employee Stock Option (right to buy)	\$39.19	07/22/2005		М			40,000	01/04/2000	01/04/2009	Common Stock	40,000	\$39.19	0	D	
Employee Stock Option (right to buy)	\$42.5	07/22/2005		М			35,511	08/13/1999	08/13/2008	Common Stock	35,511	\$42.5	0	D	

Explanation of Responses:

1. Delivery of shares to issuer to pay minimum tax withholding liability incurred in connection with the exercise.

2. Reflects acquisition of 18.4968 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 July 25, 2005.

CASEY J SYLLA

07/26/2005 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.