FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

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1. Name and Address of Reporting Person*  ANDRESS JAMES G					2. Issuer Name <b>and</b> Ticker or Trading Symbol ALLSTATE CORP [ ALL ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					THE COME [ THE ]										X	Direc	tor		10% O	wner	
(Last) 1381 NOI	•	First) I TREE ROAD	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/01/2003										Office	er (give title v)		Other ( below)	(specify	
					4. If	Ame	ndment	. Date o	of O	riginal F	iled	(Month/Da	av/Yea	ar)	6	. Individ	dual o	r Joint/Group	Filing	(Check A	pplicable
(Street) LAKE FOREST IL 60045					4. If Amendment, Date of Original Filed (Month/Day/Year)											Line)  X Form filed by One Reporting Person					
LAKE FC	JREST II	L	60045												Form	n filed by More than One Reporting on					
(City)	(5	State)	(Zip)																		
		Та	ble I - No	n-Deriv	ative	Se	curitie	s Ac	qui	ired, I	Dis	posed o	f, oı	Ben	efici	ally O	wne	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ar)	P.A. Deemed Execution Date, f any Month/Day/Year)		·,	Transaction Dispos Code (Instr. 5)		Dispose	rities Acquired (A ed Of (D) (Instr. 3,			4 and Second Sec		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Pric	, lī	Reported Transaction(s) (Instr. 3 and 4)				(111501.4)	
Common Stock accompanied by tax-offset right 12/0				1/2003					A <sup>(1)</sup>		1,000		A	\$0		9,000			D		
			Table II - I									sed of, onvertib				y Ow	ned				
	2. Conversior or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior r) if any (Month/Da	Date,	Date, Transaction Code (Inst				Ex	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price Deriva Secur (Instr.	vative ırity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O Fe D OI (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Da Ex	ite ercisabl		Expiration Date	Title	or Nur of	ount nber res						

## **Explanation of Responses:**

1. Exempt grant to reporting person pursuant to the terms of The Allstate Corporation Equity Incentive Plan for Non-Employee Directors.

Andress James G.

11/18/2003

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.