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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

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			or Section So(n) of the investment Company Act of 1940	
1. Name and Address of Reporting Person* Winter Matthew E			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 Officer (give title X Other (specify
(1.100)		· · · ·	3. Date of Earliest Transaction (Month/Day/Year) 02/24/2014	below) A below) Pres Allstate Personal Lines
(Street) NORTHBROOK (City)			4. If Amendment, Date of Original Filed (Month/Day/Year) 02/25/2014	 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)	Transaction Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	02/24/2014		М		14,774 ⁽¹⁾	Α	\$31.41	57,227	D	
Common Stock	02/24/2014		S		14,774 ⁽¹⁾	D	\$53.884 ⁽²⁾	42,453	D	
Common Stock								892	Ι	By 401(k) Plan

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

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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 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	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		Transaction(s) (Instr. 4)		
Employee Stock Option (Right to Buy)	\$31.41	02/24/2014		М			14,774 ⁽¹⁾	(3)	02/22/2020	Common Stock	14,774	\$0	19,697 ⁽¹⁾	D	

Explanation of Responses:

1. Clerical error resulted in reporting person's Form 4 incorrectly reporting the number of options exercised and sold as 14,474 and the amount of derivative securities beneficially owned following the transaction as 19,997. The correct number of options exercised and sold was 14,774 and the amount of securities owned following the reported transaction is 19,697.

2. Reflects weighted average sale price for open-market sales transaction reported herein. Actual sale prices ranged from \$53.41 to \$54.29. The reporting person provided the issuer, and will provide any security holder of The Allstate Corporation or member of the SEC staff, full information regarding the number of shares sold at each separate price upon request.

3. Stock option award granted to reporting person on February 22, 2010. The remaining increment vested on February 22, 2014.

/s/ Matthew E. Winter

** Signature of Reporting Person

03/04/2014

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.