Edgar Filing: ALLSTATE CORP - Form 4

ALLSTATE Form 4	ECORP											
February 20), 2007											
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMMISSION	OMB APPROVAL			
Washington, D.C. 20549									OMB Number:	3235-0287		
Check the check	nger STATEN 16.	DOX								Expires: January 31 2005 Estimated average burden hours per response 0.5		
Form 5 obligation may cor <i>See</i> Inst 1(b).	ons Section 17(Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section										
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Cripe Frederick F			2. Issuer Name and Ticker or Trading Symbol ALLSTATE CORP [ALL]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (l							(Check all applicable) Director 10% Owner				
	ALLSTATE ATION, 2775 SAN	IDERS	02/15/2	-				Officer (give below)	titleX Oth below) e Insurance Co	er (specify		
	(Street) 4. If Ame Filed(Mor				ate Origina r)	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NORTHB	ROOK, IL 60062-	6127						Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	rity (Month/Day/Year) Execution Date,			Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	02/15/2007			Code V $F(1)$	Amount 1,683	(D) D	Price \$ 61.71	(Instr. 3 and 4) 15,947	D			
Common Stock								3,613.3016 (2)	I	by 401(k) Plan		

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

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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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Tran (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Officer Other Director 10% Owner

Cripe Frederick F C/O THE ALLSTATE CORPORATION 2775 SANDERS ROAD NORTHBROOK, IL 60062-6127

SVP Allstate Insurance Company

Relationships

Signatures

FREDERICK F CRIPE

**Signature of Reporting

02/19/2007 Date

Person **Explanation of Responses:**

- * 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).
- Reflects acquisition of 170.0514 shares of The Allstate Corporation common stock under The Savings and Profit Sharing Fund of Allstate (2)Employees, a 401 (k) plan since January 1, 2007, pursuant to the most recent plan statement, dated February 14, 2007.
- Delivery of shares to issuer to pay minimum tax withholding liability incurred in connection with the unrestriction of shares on February (1) 15, 2007.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.