Shebik Steven E Form 3/A June 28, 2012

FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number:

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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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person *

Shebik Steven E

(Last)

(First)

(Middle)

(Zip)

Statement

(Month/Day/Year)

02/27/2012

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ALLSTATE CORP [ALL]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year) 03/07/2012

(Check all applicable)

CORPORATION, Â 2775 SANDERS ROAD

C/O THE ALLSTATE

(Street)

10% Owner Director _X__ Officer

Other (give title below) (specify below) EVP & Chief Financial Officer 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

Form filed by More than One Reporting Person

NORTHBROOK, ILÂ 60062

(City) (State)

1. Title of Security (Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities

Beneficially Owned (Instr. 4)

3.

Ownership Form:

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

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

SEC 1473 (7-02)

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 control number.

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

5. Conversion or Exercise

Price of

6. Nature of Indirect Ownership Beneficial Ownership Form of (Instr. 5) Derivative

Expiration Exercisable Date

Title

Amount or Number of Derivative Security: Security Direct (D)

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				Shares		or Indirect (I) (Instr. 5)	
Restricted Stock Units	(1)	(1)	Common Stock	7,265	\$ <u>(1)</u>	D	Â
Employee Stock Option (Right to Buy)	(2)	02/21/2022	Common Stock	26,446	\$ 31.56	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Shebik Steven E					
C/O THE ALLSTATE CORPORATION	â	â	EVP & Chief Financial Officer	â	
2775 SANDERS ROAD	А	Α	A EVP & Chief Financial Officer	Α	
NORTHBROOK, IL 60062					

Signatures

/s/ Steven E.
Shebik

**Signature of Reporting Person

O6/28/2012

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- Reporting Person's Form 3 incorrectly reported grant date of restricted stock units (RSUs) as February 22, 2012, with respective increments converting on February 22, 2014, February 22, 2015, and February 22, 2016. This amended Form 3 is to correct the grant date to February 21, 2012, with 50% of the total number of RSUs converting on February 21, 2014, 25% converting on February 21, 2015, and 25% converting on February 21, 2016.
- Reporting Person's Form 3 incorrectly reported stock option grant date as February 22, 2012, and vesting dates as February 22, 2014 (20), February 22, 2015 (25%), and February 22, 2016 (25%). This amended Form 3 is to correct the grant date to February 21, 2012 with vesting dates February 21, 2014 (50%), February 21, 2015 (25%), and February 21, 2016 (25%).

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.

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