Edgar Filing: Roche Michael John - Form 4

Roche Mich Form 4	ael John										
December 1	9, 2006										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION						OMMISSION	OMB APPROVAL			
		Washington, D.C. 20549								3235-0287	
Check th if no lon	aor	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								January 31, 2005	
subject t Section Form 4 o Form 5	o 16. or Filed put									verage rs per 0.5	
obligatic may con <i>See</i> Instr 1(b).	tinue. Section 17(tility Hol	•	· ·		935 or Section	l		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Roche Michael John			8					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) ((Middle) 3. Date of Earliest Transaction (Chec						ck all applicable)			
C/O THE A CORPORA ROAD	ALLSTATE TION, 2775 SAN	NDERS	(Month/I 12/15/2	Day/Year) 2006			- - t	pelow)	itle 10% X Otho below)		
Rond	(Street)		4 If Am	endment, D	ate Origina	1	ť	5. Individual or Joi	nt/Group Filin	g(Check	
NODTUDE		6107		nth/Day/Yea	-	-	I	Applicable Line) X_Form filed by O Form filed by M	ne Reporting Per	rson	
	COOK, IL 60062-						I	Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acqui	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	saction Date 2A. Deemed /Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code V	Amount	(D)	Price		_		
Stock	12/15/2006			М	37,836	А	\$ 33.38	49,679	D		
Common Stock	12/15/2006			F <u>(1)</u>	6,075	D	\$ 65.115	43,604	D		
Common Stock	12/15/2006			S	27,500	D	\$ 65.45	16,104	D		
Common Stock								1,663.9752 (2)	Ι	by 401(k) Plan	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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. Transactic Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 33.38	12/15/2006		М		37,836	02/07/2006	02/07/2012	Common Stock	37,836

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other Roche Michael John C/O THE ALLSTATE CORPORATION **SVP** Allstate Insurance Company 2775 SANDERS ROAD NORTHBROOK, IL 60062-6127 Signatures

MICHAEL J ROCHE 12/19/2006

**Signature of Reporting Person Date

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 aquisition of 518.4664 shares of The Allstate Corporation common stock since June 1, 2005 under The Savings and Profit (2)Sharing Fund of Allstate Employees, a 401(k) plan, pursuant to the most recent plan statement, dated December 15, 2006.
- (1) Delivery of shares to issuer to pay minimum tax withholding liability incurred in connection with the exercise.

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.