MARCHIO MICHAEL J

Form 4

August 16, 2005

FORM 4

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

OMB Number: 3235-0287

Estimated average

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Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

0.5

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue. See Instruction

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

response...

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MARCHIO MICHAEL J			2. Issuer Name and Ticker or Trading Symbol CHUBB CORP [CB]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)		
			(Month/Day/Year)	Director 10% Owner		
15 MOUNTAIN VIEW ROAD, P.O. BOX 1615			08/15/2005	X Officer (give title Other (specify below) below) Executive Vice President		
				Executive vice President		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person		
WARREN, N	NJ 0706116	15		Form filed by More than One Reporting Person		

(City)	(State) (Zi	Table 1	I - Non-De	rivative S	ecurit	ies Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)		4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
COMMON	08/15/2005		X	5,355		\$ 60.75	24,229	D	
COMMON	08/15/2005			5,355				D	
COMMON	08/15/2005		X	1,672	A	\$ 59.78	20,546	D	
COMMON	08/15/2005		F				19,410	D	
COMMON	08/15/2005		X	5,253	A	\$ 59.78	24,663	D	

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COMMON	08/15/2005	F	3,571	D	\$ 87.92	21,092	D	
COMMON	08/15/2005	F	731	D	\$ 87.92	20,361	D	
COMMON						2,966.53	I	By ESOP

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

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(9-02)

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)	5. Numb orDerivative Securities Acquired Disposed (Instr. 3, 5)	es d (A) or d of (D)	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	Amo or Num of Shar
STOCK OPTION	\$ 60.75	08/15/2005		C		5,355	03/06/1999	03/05/2007	COMMON	5,3
STOCK OPTION	\$ 59.78	08/15/2005		C		1,672	03/11/2001	03/10/2009	COMMON	1,6
STOCK OPTION	\$ 59.78	08/15/2005		C		5,253	03/11/2001	03/10/2009	COMMON	5,2
STOCK OPTION	\$ 87.92	08/15/2005		A	3,571		08/15/2005	03/10/2009	COMMON	3,5
STOCK OPTION	\$ 87.92	08/15/2005		A	1,136		08/15/2005	03/10/2009	COMMON	1,1

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				

Reporting Owners 2

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MARCHIO MICHAEL J 15 MOUNTAIN VIEW ROAD P.O. BOX 1615 WARREN, NJ 070611615

Executive Vice President

Signatures

By: Nancy J. 08/16/2005 Obremski, POA

**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).
- (1) All Stock Options are granted in tandem with tax withholding rights.

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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