CHUBB CORP Form 4/A August 24, 2005

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 OF **SECURITIES**

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 * MARCHIO MICHAEL J

2. Issuer Name and Ticker or Trading Symbol

CHUBB CORP [CB]

(Last) (First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year)

15 MOUNTAIN VIEW ROAD, P.O. 08/15/2005 **BOX 1615**

(Street)

4. If Amendment, Date Original

Filed(Month/Day/Year) 08/16/2005

5. Relationship of Reporting Person(s) to

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

Issuer

(Check all applicable)

Director 10% Owner X_ Officer (give title Other (specify

below) **Executive Vice President**

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

WARREN, NJ 070611615

(City)	(State) (Zi	Table 1	I - Non-De	rivative So	ecurit	ies Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acc Transaction(A) or Disposed Code (Instr. 3, 4 and 5 (Instr. 8)		d of (D)	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	or	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						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. Number of or 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 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		С		1,672	03/11/2001	03/10/2009	COMMON	1,6
STOCK OPTION	\$ 59.78	08/15/2005		С		5,253	03/11/2001	03/10/2009	COMMON	5,2
STOCK OPTION	\$ 87.92	08/15/2005		A	4,302		08/15/2005	03/10/2009	COMMON	4,3
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	Keiationsinps							
	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.
Obremski, POA
08/24/2005

**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.

Signatures 3