## Edgar Filing: CHUBB CORP - Form 4

| Form 4  | -                               |               |  |   |                          |  |  |  |   |  |
|---|---------------------------------|---------------|--|---|--------------------------|--|--|--|---|--|
| October 12, 2005  |                                 |               |  |   |                          |  |  |  | PPROVAL   |  |
| FORM 4  | UNITED                          | STATES        |  | RITIES A<br>shington                                  |                          |  | COMMISSIO  |  | 3235-0287   |  |
| Check this box<br>if no longer<br>subject to STATEMENT OF CHANGES         |                                 |               |  |   | ·                        |  | Expires:   | urs per  |   |  |
| Form 5<br>obligations<br>may continue.<br><i>See</i> Instruction<br>1(b). | Section 17(                     | (a) of the l  | Public U   | tility Hol  | ding Coi                 |  | nge Act of 1934,<br>of 1935 or Section<br>940                                      | ·  |   |  |
| (Print or Type Respo  | onses)                          |               |  |   |                          |  |  |  |   |  |
| 1. Name and Address of Reporting Person <u>*</u><br>BAIRD ZOE             |                                 |               | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>CHUBB CORP [CB] |   |                          |  | 5. Relationship of Reporting Person(s) to Issuer                                   |  |   |  |
| (Last)  | (First) (                       | Middle)       |  | f Earliest T  |                          |  | (Che   | eck all applicabl  | e)  |  |
| THE MARKLE<br>ROCKEFELLE<br>FLOOR   | FOUNDAT                         | ION, 10       |  | Day/Year)   | Tansaction               |  | X Director<br>Officer (giv<br>below)   |  | % Owner<br>her (specify   |  |
| Filed(Month.  |                                 |               |  | Ionth/Day/Year) Applicable Line)<br>_X_ Form filed by |                          |  | oint/Group Filing(Check<br>One Reporting Person<br>More than One Reporting         |  |   |  |
| NEW YORK, N   | Y 10020                         |               |  |   |                          |  | Person   |  |   |  |
| (City)  | (State)                         | (Zip)         | Tab  | le I - Non-l  | Derivative               | Securities A                               | cquired, Disposed  | of, or Beneficia   | lly Owned   |  |
|   | ansaction Date<br>nth/Day/Year) | Execution     | Date, if   | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V      | Disposed<br>(Instr. 3, 4 | (A) or<br>of (D)                           | Securities<br>Beneficially<br>Owned  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Reminder: Report of   | n a separate line               | e for each cl | ass of sec   | urities bene  | ficially ow              | ned directly of                            | or indirectly.   |  |   |  |
|   |                                 |               |  |   | inforr<br>requi          | nation cont<br>red to respo<br>ays a curre | spond to the colle<br>ained in this form<br>ond unless the fo<br>ntly valid OMB co | n are not<br>rm  | SEC 1474<br>(9-02)  |  |
|   | Tab                             |               |  |   |                          | posed of, or<br>convertible                | Beneficially Owner<br>securities)  | 1  |   |  |

| 1. Title of | 2.         | 3. Transaction Date | 3A. Deemed         | 4.        | 5. Number | 6. Date Exercisable and | 7. Title and Amount of | 8. I |
|-------------|------------|---------------------|--------------------|-----------|-----------|-------------------------|------------------------|------|
| Derivative  | Conversion | (Month/Day/Year)    | Execution Date, if | Transacti | onof      | Expiration Date         | Underlying Securities  | Der  |

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| Security<br>(Instr. 3)                  | or Exercise<br>Price of<br>Derivative<br>Security |            | any<br>(Month/Day/Year) | Code Derivati<br>(Instr. 8) Securiti<br>Acquire<br>(A) or<br>Dispose<br>of (D)<br>(Instr. 3<br>and 5) |       | rities<br>nired<br>or<br>osed<br>0)<br>r. 3, 4, | es<br>d<br>d          |                    | (Instr. 3 and 4) |  | Sec<br>(In: |
|---|---|------------|-------------------------|---|-------|---|-----------------------|--------------------|------------------|--|-------------|
|   |   |            |                         | Code V  | / (A) | (D)   | ) Date<br>Exercisable | Expiration<br>Date | Title            | Amount<br>or<br>Number<br>of<br>Shares |             |
| MARKET<br>VALUE<br>UNITS <sup>(1)</sup> | (2)   | 10/11/2005 |                         | А   | 13.2  | 2   | <u>(1)</u>            | <u>(1)</u>         | COMMON           | 13.2                                   | \$          |

## **Reporting Owners**

| Reporting Owner Name / Address   |            | Relationships |         |       |  |  |  |
|--|------------|---------------|---------|-------|--|--|--|
|  | Director   | 10% Owner     | Officer | Other |  |  |  |
| BAIRD ZOE<br>THE MARKLE FOUNDATION<br>10 ROCKEFELLER PLAZA, 16TH<br>NEW YORK, NY 10020 | H FLOOR    | X             |         |       |  |  |  |
| Signatures   |            |               |         |       |  |  |  |
| By: Patricia S.<br>Tomczyk, POA  | 10/12/2005 | 5             |         |       |  |  |  |
| **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) Market Value Units in The Chubb Corporation Directors Deferred Compensation Plan. Units are payable in common stock only and the value of such units are based on the market value of the Coporation's common stock.
- (2) Variable Pricing

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.