**CHUBB CORP** 

Form 4 November 29, 2005

FORM 4

#### **OMB APPROVAL**

**OMB** 3235-0287 Number: January 31,

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

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)	1. Name and Address of Reporting Person * SCHRAM HENRY B	2. Issuer Name and Ticker or Trading Symbol CHUBB CORP [CB]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
15 MOUNTAIN VIEW ROAD, P.O. 11/28/2005  BOX 1615  (Street)  4. If Amendment, Date Original Filed(Month/Day/Year)  Filed(Month/Day/Year)  WARREN NI 070611615  (Street)  7. Officer (give titleOther (specify below) Senior 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	(Last) (First) (Middle)	3. Date of Earliest Transaction	(Check an applicable)		
Filed(Month/Day/Year)  Applicable Line)  _X_ Form filed by One Reporting Person  Form filed by More than One Reporting	15 MOUNTAIN VIEW ROAD, P.O. BOX 1615	• •	X_ Officer (give title below) Other (specify below)		
WARREN NIU/Uniini)	(Street)	,	Applicable Line)		
	WARREN, NJ 070611615		, , ,		

(City)	(State) (Z	Table	I - Non-De	rivative Se	ecuriti	es Acqui	ired, Disposed of,	or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction	4. Securit or(A) or Di (Instr. 3,	isposed	of (D)	5. Amount of Securities Beneficially	6. Ownership Form:	7. Nature of Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)  Code V	Amount	(A) or (D)	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
COMMON	N 11/28/2005		G	12	D	\$ 97.54	33,505	D	
COMMON	1						4.651.31	I	By ESOP

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)

### Edgar Filing: CHUBB CORP - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		•		Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					4, and 5)						
					.,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SCHRAM HENRY B 15 MOUNTAIN VIEW ROAD P.O. BOX 1615 WARREN NI 070611615			Senior Vice President					

# **Signatures**

By: Nancy J.
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).

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.

Reporting Owners 2