OREILLY MICHAEL

Form 4

March 11, 2003

SEC Form 4

FORM 4		UNI	TED STATES S C	OMB APPROVAL						
[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			Was TEMENT OF CHA Int to Section 16(a) of the	OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response 0.5						
(Print or Type Responses)		-	ompany Act of 1935 or S							
Name and Address of Reporting Person* O'Reilly, Michael		The Ch	r Name and Ticker or Tr ubb Corporation CB . Identification		6. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner					
(Last) (First) (Middle) 15 Mountain View Road		Number of Reporting Person, if an entity (voluntary)		Month/Day/Year March 06, 2003		X Officer Other Vice Chairman				
(Street) Warren, NJ 07061-615 (City) (State) (Zip)		-		5. If Amendment, Date of Original (Month/Day/Year)		7. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivat	ive Securit	ies Acquir	ed, Disposed of, or Ben	eficially Owne	d					
1. Title of Security 2. Transactio				3. Transaction Code and Voluntary Code (Instr. 8)	4. Securities Acqu (A) or Disposed (I Of (Instr. 3, 4, and	Securities Beneficially	6. Owner-ship Form: Direct(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					A/D Price					
COMMON 03/06/2003		3		FI	653.00 D \$46.05		D			
COMMON 03/06/2003		3		F	350.00 D \$46.05		D			
COMMON 03/06/2003		3		A	5191.00 A	Λ	D			
COMMON 03/06/2003		3		FI	\$46.05)	D			
COMMON 03/06/2003		3		A	12161.00 \$46.05	A 75943.0	0 D			
COMMON						3560.3	9 I	By ESOP		
	<u> </u>									

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

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

respond unless the form displays a currently valid OMB control number.

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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Form 4 (continued)

Table II - Deriv		•	d, Disposed of, ions, convertib		•						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/ Day/ Year)	Execution Date, if any (Month/ Day/	4. Transaction Code and Voluntary (V) Code (Instr.8)	of Derivative	6. Date Exercisable(DE) and Expiration Date(ED) (Month/Day/Year)	Amount of Underlying Securities	8. Price of Derivative Security (Instr.5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions (Instr.4)	10. Owner- ship Form of Deriv- ative Security: Direct (D) or Indirect (I) (Instr.4)	11. Na Inc Be Ov (In
PERFORMANCE SHARE	\$0.00	03/06/2003		CI	(D) 13,288.50		COMMON - 13,288.50	\$47.97	28,032.00	D	
STOCK OPTION (1)	\$46.05	03/06/2003		A	(A) 38,037.00	03/06/2004 03/06/2008	COMMON - 38,037.00	\$46.05	38,037.00	D	
STOCK OPTION (1)	\$46.05	03/06/2003		A	(A) 38,036.00	03/06/2005 03/06/2008	COMMON - 38,036.00	\$46.05	38,036.00	D	
STOCK OPTION (1)	\$46.05	03/06/2003		A	(A) 38,037.00	03/06/2004 03/06/2013	COMMON - 38,037.00	\$46.05	38,037.00	D	
STOCK OPTION (1)	\$46.05	03/06/2003		A	(A) 38,036.00	03/06/2005 03/06/2013	COMMON - 38,036.00	\$46.05	38,036.00	D	
STOCK OPTION (1)	\$0.00						COMMON - 374,792.00		374,792.00	D	

Explanation of Responses :

** 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. By: Nancy J. Obremski, POA

03-11-2003

** Signature of Reporting Person
Date

Power of Attorney

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FOOTNOTE Descriptions for The Chubb Corporation CB

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Michael O'Reilly 15 Mountain View Road P.O. Box 1615 Warren, NJ 07061-615

Explanation of responses:

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