ARCH CAPITAL GROUP LTD.

Form 4 May 17, 2007

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box							Expires:	January 31,			
if no longer subject to Section 16. Form 4 or  STATEMENT OF CHANGES IN BENEFICIAL OWNERSH SECURITIES					NERSHIP OF	Estimated a burden hou response	ırs per				
Form 5 obligations may continue.  See Instruction 1(b).  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)										
Hutchings W Preston Symb			er Name <b>and</b>			_	5. Relationship of Reporting Person(s) to Issuer				
		[ACGI		L GROU	PLI	. D.	(Check all applicable)				
			of Earliest Ti Day/Year)	ransaction			Director 10% Owner X Officer (give title Other (specify below)				
WESSEX F	2007				below) below) SVP & Chief Investment Officer						
	nendment, Day/Year	_	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting						
	N, D0 HM 12  (State) (Zip	`					Person				
(City)	(State) (Zip	) Tal	ole I - Non-I	<b>Derivative</b>	Secui	rities Acq	uired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	(Month/Day/Year) Example and an	2. Transaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)				cquired d of (D) 5)	5. Amount of Securities Ownersh Beneficially Owned (D) or Following Indirect ( Reported (Instr. 4) Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Shares, \$.01 par value per share	05/16/2007		P	1,000 (1)	A	\$ 69.11	2,516 <u>(1)</u>	I	By Company (1)		
Common Shares, \$.01 par value per share							18,416	D			

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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 number.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	<ol><li>Date Exerc</li></ol>	cisable and	7. Title a	and	8. Price of	
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amount	of	Derivative	
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlyi	ing	Security	
(Instr. 3) Price of Derivative Security		Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securities (Instr. 3 and 4)		(Instr. 5)	
		Derivative				Securities						
		Security				Acquired						
						(A) or						
						Disposed						
						of (D)						
						(Instr. 3,						
						4, and 5)						
									Δ	mount		
									or			
						Date	Expiration	Title N				
							Exercisable Date	Date	of			
					Code V	(A) (D)				hares		
						(1-)			- 01			

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Hutchings W Preston WESSEX HOUSE, 4TH FLOOR 45 REID STREET HAMILTON, D0 HM 12

SVP & Chief Investment Officer

## **Signatures**

/s/ W. Preston Hutchings 05/17/2007

\*\*Signature of Reporting Date
Person

## **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) The shares are held by a company which is owned by a family trust; beneficiaries of the family trust are the Reporting Person, his spouse and thier minor children.

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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