Lyons Mark Donald Form 4 February 27, 2007

# FORM 4

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

**OMB APPROVAL OMB** 

Check this box if no longer subject to

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

Person

3235-0287 Number: January 31, Expires:

2005

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Section 16. Form 4 or Form 5 obligations

may continue.

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

Estimated average burden hours per response...

See Instruction 1(b).

(Print or Type Responses)

| (Fillit of Type R   | esponses) |  |   |   |  |  |  |
|---|-----------|--|---|---|--|--|--|
| 1. Name and Address of Reporting Person * Lyons Mark Donald                       |           |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol ARCH CAPITAL GROUP LTD. [ACGL] | 5. Relationship of Reporting Person(s) to<br>Issuer  (Check all applicable)                       |  |  |  |
| (Last) (First) (Middle)  ARCH INSURANCE GROUP INC., ONE LIBERTY PLAZA, 53RD FLOOR |           |  | 3. Date of Earliest Transaction (Month/Day/Year) 02/23/2007                       | Director 10% Owner _X_ Officer (give title Other (specify below)  Officer of Subsidiary           |  |  |  |
| (Street)  |           |  | 4. If Amendment, Date Original Filed(Month/Day/Year)                              | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person |  |  |  |
| NEW YORK NY 10006   |           |  |   | Form filed by More than One Reporting   |  |  |  |

#### NEW YORK, NY 10006

| (City)   | (State)                                 | (Zip) Tabl  | e I - Non-D                            | erivative                      | Secur                        | rities Acq  | uired, Disposed o  | f, or Beneficial   | ly Owned  |
|--|---|---|--|--------------------------------|------------------------------|-------------|--|--|---|
| 1.Title of<br>Security<br>(Instr. 3)                 | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transactic<br>Code<br>(Instr. 8) | 4. Securion(A) or D (Instr. 3, | ispose<br>4 and<br>(A)<br>or | ed of (D)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| Common<br>Shares,<br>\$.01 par<br>value per<br>share | 02/23/2007                              |   | F                                      | 351                            | D                            | \$<br>66.04 | 46,109   | D  |   |
| Common<br>Shares,<br>\$.01 par<br>value per<br>share | 02/26/2007                              |   | F                                      | 325                            | D                            | \$<br>65.26 | 45,784   | 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.         | 6. Date Exerci      | isable and      | 7. Titl      | le and       | 8. Price of | 9 |
|----------|-------------|-------------|---------------------|--------------------|-------------|------------|---------------------|-----------------|--------------|--------------|-------------|---|
|          | Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transaction | orNumber   | Expiration Da       | te              | Amou         | ınt of       | Derivative  | J |
|          | Security    | or Exercise |                     | any                | Code        | of         | (Month/Day/Y        | (ear)           | Under        | lying        | Security    | , |
|          | (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8)  | Derivative | e                   |                 | Securi       | ities        | (Instr. 5)  | ] |
|          |             | Derivative  |                     |                    |             | Securities |                     |                 | (Instr.      | 3 and 4)     |             | ( |
| Security |             |             |                     |                    |             | Acquired   |                     |                 |              |              |             | ] |
|          |             |             |                     |                    |             | (A) or     |                     |                 |              |              |             | J |
|          |             |             |                     |                    |             | Disposed   |                     |                 |              |              |             | - |
|          |             |             |                     |                    |             | of (D)     |                     |                 |              |              |             | ( |
|          |             |             |                     |                    |             | (Instr. 3, |                     |                 |              |              |             |   |
|          |             |             |                     |                    |             | 4, and 5)  |                     |                 |              |              |             |   |
|          |             |             |                     |                    |             |            |                     |                 |              | Amount       |             |   |
|          |             |             |                     |                    |             |            |                     |                 |              |              |             |   |
|          |             |             |                     |                    |             |            | Date<br>Exercisable | Expiration Date | Title        | or<br>Number |             |   |
|          |             |             |                     |                    |             |            |                     |                 |              |              |             |   |
|          |             |             |                     | Code V             | (A) (D)     |            |                     |                 | of<br>Charac |              |             |   |
|          |             |             |                     |                    | Code V      | (A) (D)    |                     |                 |              | Shares       |             |   |

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Lyons Mark Donald ARCH INSURANCE GROUP INC. ONE LIBERTY PLAZA, 53RD FLOOR NEW YORK, NY 10006

Officer of Subsidiary

### **Signatures**

/s/ Louis T. Petrillo Attorney

in Fact 02/27/2007

\*\*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.

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