ARCH CAPITAL GROUP LTD.

Form 4 June 12, 2007

	, , = =								OMR AF	PPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287					
Check this box				,					Expires:	January 31,			
if no long subject to Section 1 Form 4 c	F CHAN	GES IN 1 SECUR		ICIA	L OW	NERSHIP OF	Estimated average burden hours per response 0.						
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 l	Responses)												
RATHGEBER JOHN F			Symbol	Name and				5. Relationship of Reporting Person(s) to Issuer					
	[ACGL]	CAPITAI]	. GROU	PLI	. D.	(Check all applicable)							
				FEarliest Tr Pay/Year)	ansaction			Director 10% Owner Officer (give titleX Other (specify below)					
C/O ARCH COMPANY AVENUE	007				below) below) Officer of subsidiary								
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
	OWN, NJ 07962							Form filed by M Person	lore than One Re	porting			
(City)		(Zip)					_	uired, Disposed of					
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8) (A) or				d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Shares, \$.01 par value per share	06/11/2007			Code V	Amount 644	(D)	Price \$ 71.72	16,060	D				
Common Shares, \$.01 par value per share	06/11/2007			S	762	D	\$ 71.73	15,298	D				

Edgar Filing: ARCH CAPITAL GROUP LTD. - Form 4

Common Shares, \$.01 par value per share	06/11/2007	S	194	D	\$ 71.75	15,104	D
Common Shares, \$.01 par value per share	06/11/2007	S	300	D	\$ 71.76	14,804	D
Common Shares, \$.01 par value per share	06/11/2007	S	100	D	\$ 71.77	14,704	D

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 Exerc	isable and	7. Titl	e and	8. Price of	1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if Transaction		orNumber	Expiration Date		Amou	nt of	Derivative	Į
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	i
	Derivative		Securities		(Instr.			3 and 4)			
	Security				Acquired						1
				(A) or							1
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
						Exercisable	le Date	Title	Number		
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

RATHGEBER JOHN F C/O ARCH REINSURANCE COMPANY 55 MADISON AVENUE MORRISTOWN, NJ 07962

Officer of subsidiary

Reporting Owners 2

Edgar Filing: ARCH CAPITAL GROUP LTD. - Form 4

Signatures

/s/ John F. 06/12/2007 Rathgeber

**Signature of Date
Reporting 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).

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.

Signatures 3