#### IORDANOU CONSTANTINE

Form 4

February 18, 2011

Preferred Shares

(non-convertible)

FORM 4									OMB APP	ROVAL		
	ONITEDSIAII	ES SECURITIES Washingto				GE (	COM	MISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or	STATEMENT (		IN BE			OW	NER	SHIP OF	Expires:  Estimated averaged burden hours response			
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Section 17(a) of the	o Section 16(a) of e Public Utility H n) of the Investme	lolding	g Co	mpany	Act o	of 193					
(Print or Type Respo	nses)											
1. Name and Address IORDANOU CO	s of Reporting Person * ONSTANTINE	Symbol						5. Relationship of Reporting Person(s) to Issuer				
		[ACGL]	ARCH CAPITAL GROUP LTD. [ACGL]					(Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earlies (Month/Day/Year	3. Date of Earliest Transaction  _X_ Director  (Month/Day/Year)  _X_ Officer (give to						wner specify			
WESSEX HOUS REID STREET	SE, 4TH FLOOR, 4		,				belov		below) President & CE	О		
(	Street)	4. If Amendment, Filed(Month/Day/Y		rigiı	nal		Appl	icable Line)	nt/Group Filing( ne Reporting Person			
HAMILTON, D	0 HM 12						I Perso		re than One Repo	rting		
(City)	(State) (Zip)	Table I - No	n-Deriv	ativ	e Securit	ies Ac	quired	, Disposed of,	or Beneficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	r) Execution Date, if TransactionAcquired (A) or any Code Disposed of (D) Ber (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Ow Foll (A) Rep Tra		5. Amount of Securities Beneficially Owned Following Reported Transaction(s	Ownership Form: Direct (D) or Indirect (I) ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
Common Shares \$.01 par value pe			Code G		Amount 150	(D) D	Price (1)	(Instr. 3 and 4 152,585	D			
share												
Series B Non-Cumulative Preferred Shares (non-convertible								67,273.386	2 I	By GRAT		
Series A Non-Cumulative								11 224 425	-	BY		

GRAT

11,224.4855 I

### Edgar Filing: IORDANOU CONSTANTINE - Form 4

Common Shares, \$.01 par value per share	129,415	I	By Limited Liability Company
Series B Non-Cumulative Preferred Shares (non-convertible)	1,400	I	By spouse
Common Shares, \$.01 par value per share	7,744	I	By children

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)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	<b>:</b>	ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

# **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
IORDANOU CONSTANTINE WESSEX HOUSE, 4TH FLOOR 45 REID STREET HAMILTON, D0 HM 12	X		Chairman, President & CEO	

Reporting Owners 2

#### Edgar Filing: IORDANOU CONSTANTINE - Form 4

## **Signatures**

/s/ Constantine 02/18/2011 Iordanou

\*\*Signature of Reporting 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).
- (1) Represents a bona fide gift to a family members.
- (2) The shares are owned by Mathiatis LLC, a limited liability company. The reporting person owns all of the membership interests in Mathiatis LLC and serves as its sole managing member.

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