Edgar Filing: ASSURED GUARANTY LTD - Form 4

Form 4	GUARANTY L'	ГD											
June 05, 20													
FORM	M 4 _{UNITED}	STATES						N	GE CO	OMMISSION	OMB AP	2235-0287	
Check t	this box		W	ashing	gtoi	n, D.C. 20	549				Number:	January 31,	
if no lo	- NIATH	MENT O	F CHA	NGES	IN	N BENEF	[CIA	L	OWN	ERSHIP OF	Expires:	2005	
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Section 16. Form 4 or								Estimated av burden hour response	•				
Form 5 obligati may co <i>See</i> Inst 1(b).	ntinue. Section 17	(a) of the	Public 1	Utility	Ho		ipany	y A	Act of	Act of 1934, 1935 or Section)			
(Print or Type	e Responses)												
1. Name and Address of Reporting Person <u>*</u> FREDERICO DOMINIC			2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer			
		ASSU [AGC				ARANTY	LTI)		(Check all applicable)			
			(Month	3. Date of Earliest Transaction (Month/Day/Year)						_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below)			
30 WOOD	BOURNE AVEN	NUE	06/04/	2014						· · · · · · · · · · · · · · · · · · ·	O/Deputy Cha	irman	
				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			
HAMILTO	ON, D0 HM08								Ī	Form filed by Mc Person	re than One Rep	oorting	
(City)	(State)	(Zip)	Та	ble I - N	lon	-Derivative	Secur	itie	es Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	Code (Instr.	8)	4. Securitie onor Disposed (Instr. 3, 4)	of (E and 5) (A) or))		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares	06/04/2014			Code A	v	Amount 186.6814 (1)	(D) A	9	Price \$ 25.08	980,991.6229	D		
Common Shares										9,400	I	By Wife	
Common Shares										200	Ι	By Daughter	
Common Shares										345,000	Ι	By Family Limited Partnership	

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

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

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 Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					4, and 5)						
					.,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Exclusione	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
FREDERICO DOMINIC 30 WOODBOURNE AVENUE HAMILTON, D0 HM08	Х		President/CEO/Deputy Chairman					
Signatures								
By: Ling Chow								

Attorney-in-fact	06/05/2014		
<u>**Signature of Reporting Person</u>	Date		

**Signature of 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).
- Represents accrual of dividend equivalents on restricted stock units granted pursuant to the Assured Guaranty Ltd. 2004 Long-Term (1) Incentive Plan which meets the requirements of Rule 16b-3.

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.