Edgar Filing: ASSURED GUARANTY LTD - Form 4

ASSURED Form 4 December (GUARANTY L7 05, 2014	٢D										
	ЛЛ								OMB AP	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287		
Check this box							Expires:	January 31, 2005				
	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							ERSHIP OF	Estimated average			
	Section 16. SECURITIES								burden hours per			
Form 4 Form 5		report to	Section	16(a) of t	ha Sacurit	ios Fr	vehanga	Act of 1934,	response	0.5		
obligati	ons Section 17						•	1935 or Section				
may con See Inst	nunue.			•	it Compan	- ·						
1(b).												
(Print or Type	Responses)											
		- *								<i>.</i> .		
	Address of Reporting	Person _		r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
A				Symbol ASSURED GUARANTY LTD [AGO]								
								(Check all applicable)				
(Last)	(First)	(Middle)	L _		Fransaction			_X_ Director	10%	Owner		
			3. Date of Earliest Transaction (Month/Day/Year)					Officer (give title Other (specify				
LANDMA MILL PON	RK PARTNERS JD LANE	INC., 10	12/03/2	-				below)	below)			
			4. If Am	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				led(Month/Day/Year)				Applicable Line)				
								X Form filed by Or				
SIMSBUR	Y, CT 06070-242	29						Form filed by Mo Person	ore than One Rep	borung		
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative	Securi	ties Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securitie	s Acq	uired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if	Transaction Disposed of (D)				Securities	Ownership	Indirect		
(Instr. 3)		any (Month/Day/Year)		Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially Owned Following	Form: Direct (D)	Beneficial Ownership		
				· · · ·				Reported	or Indirect	(Instr. 4)		
						(A) or		Transaction(s)	(I) (Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)	(Instr. 4)			
Common Shares	12/03/2014			А	28.8697 (1)	А	\$ 25.56	186,903.1438	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.

 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BORGES FRANCISCO L LANDMARK PARTNERS INC. 10 MILL POND LANE SIMSBURY, CT 06070-2429	Х						
Signatures							
By: Ling Chow, Attorney-in-fact	12/05	5/2014					
**Signature of Reporting Person	Da	ate					

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 accrual of dividend equivalents on restricted stock units granted pursuant to the Assured Guaranty Ltd. 2004 Long Term 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.