FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	ourden							

0.5

hours per response:

	Check this box if no longer subject to
\neg	Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* BOYD JAMES R				2. Issuer Name and Ticker or Trading Symbol ARCH COAL INC [ACI]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ROID	JAIVIES.	<u>K</u>			1				L		•				X Direc	tor		10% O	wner
(Last) (First) (Middle) ONECITYPLACE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2011									Office	er (give title w)		Other (below)	specify	
UNECIT	YPLACEI	DKIVE												_					
					4. If	f Amer	ndmen	t, Date	of Origin	nal File	d (Month	'Day/Ye	ar)	6. Lir		r Joint/Group	Filin	g (Check Ap	plicable
(Street)	TC NA		201 //1											[]	-,	n filed by One	e Repo	orting Perso	on
ST. LOU	JIS M		63141													n filed by Mor			
(City)	(Si	tate) ((Zip)																
		Tab	le I - Non-	-Deriva	ıtive	Sec	uritie	es Ac	cquire	d, Dis	sposed	of, o	r Ber	neficia	lly Owne	ed :			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar) E	Execution f any	a. Deemed recution Date, any lonth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5)			ed (A) or tr. 3, 4 an	d Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	e V	Amou	nt	(A) or (D)		Transa	action(s) 3 and 4)		_	(Instr. 4)
		T	able II - D	Derivati e.g., pu					• ′			•			y Owned				
		1	· `			Lails	í		<u>′ </u>			_			1	T			1
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date, Ti	4. Transaction Code (Ins 8)				6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
													- 1	Amount or					
				c	ode	v	(A)	(D)	Date Exercisa		Expiration Date	Title	- 1	Number of Shares					
Phantom Stock	(1)	03/15/2011		o	Α		290		(2)	$\overline{}$	(2)	Comi		290	\$33.67	97,811	\Box	D	

Explanation of Responses:

- 1. Each share of phantom stock represents a right to receive the value in cash of one share of Arch Coal, Inc. common stock. The shares of phantom stock are held by the director through the Arch Coal, Inc. Deferred Compensation Plan for Non-Employee Directors (the "Plan"). The shares of phantom stock acquired by the director represent dividends attributable to amounts that the director elected to defer under the Plan into a hypothetical investment in shares of Arch Coal, Inc. common stock.
- 2. Shares of phantom stock are payable in cash following termination of the director's service as a director of Arch Coal, Inc. The director may transfer amounts held in the phantom stock account into an alternative investment account at any time.

Remarks:

/s/ Jon S. Ploetz, Attorney-in-

Fact ** Signature of Reporting Person

Date

03/16/2011

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

- * 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.

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 Number.