Edgar Filing: AFFILIATED MANAGERS GROUP, INC. - Form 4

AFFILIATED MANAGERS GROUP, INC. Form 4

December 20), 2013											
FORM	14									OMB A	PPROVAL	
	UNITE	D STATES				ND EXC D.C. 205		NGE (COMMISSION	OMB Number:	3235-0287	
Check thi if no long								Expires:	January 31,			
subject to Section 1 Form 4 or	6. SIAIE	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									2005 average Irs per 0.5	
Form 5 obligation may cont <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the		ility H	old	ing Com	pany	Act o	ge Act of 1934, f 1935 or Section 40	response n		
(Print or Type F	Responses)											
1. Name and A KINGSTON	2. Issuer Name and Ticker or Trading Symbol AFFILIATED MANAGERS						5. Relationship of Reporting Person(s) to Issuer					
			GROUP						(Chec	k all applicable	e)	
(Last)	(Last) (First) (Middle) 3. Dat (Mon					nsaction			Director 10% Owner X Officer (give title Other (specify			
	ATED MANA C., 600 HALE		12/18/20	-					below) Vice Chair	below) man & Gen. C	ounsel	
	(Street)		4. If Amer Filed(Mon			e Original			6. Individual or Jo Applicable Line) _X_ Form filed by 0			
PRIDES CR	OSSING, MA	01965							Form filed by M Person	Iore than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Noi	n-De	erivative S	ecuri	ties Ac	quired, Disposed of	, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	emed on Date, if /Day/Year)	3. Transa Code (Instr.		4. Securi nAcquired Disposed (Instr. 3,	l (A) o l of (D)	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	10/18/2013			G	V	2,000	D	\$0	14,250	D		
Common	12/13/2013			G	V	1,215	D	\$0	14,250	D		

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

Stock

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.

Edgar Filing: AFFILIATED MANAGERS GROUP, INC. - Form 4

 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	ionof Derivative Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Prico Deriva Securit (Instr.
				Code V	(A) ((D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Units	<u>(1)</u>	12/18/2013		А	4,393		(1)	(1)	Common Stock	4,393	\$ (

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
KINGSTON JOHN III C/O AFFILIATED MANAGERS GROUP, INC. 600 HALE STREET PRIDES CROSSING, MA 01965			Vice Chairman & Gen. Counsel					
Signatures								
/s/ John 12/20/2013								

Kingston, III 12/20/2013 <u>**Signature of Date</u> 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).

Following the satisfaction of certain performance criteria, the award (issued under the Company's Executive Incentive Plan and 2013 Incentive Stock Award Plan) will vest over 8 years, from 2014 to 2021. In the event performance criteria are met, no shares will be

(1) Incentive stock Award Flah) will vest over 8 years, from 2014 to 2021. In the event performance criteria are iner, no shares will be distributed until 2017, as all shares vesting from 2014 to 2017 will be held by the Company and distributed at that time; shares that vest from 2018 to 2021 will be distributed at the time of vesting.

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.