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

AFFILIATED MANAGERS GROUP, INC. Form 4 December 20, 2013

December 20	, 2015												
FORM	Λ									-	PPROVAL		
	UNITED	STATES				ND EX().C. 205		NGE (COMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 10 Form 4 or	er STATEN 5.	SECU	JRI	TIES			NERSHIP OF Estimated burden ho response		irs per				
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17(a) of the		ility H	oldi	ng Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	'n			
(Print or Type R	esponses)												
HEALEY SEAN M Symbol			Symbol	2. Issuer Name and Ticker or Trading ymbol FFILIATED MANAGERS					5. Relationship of Reporting Person(s) to Issuer				
				GROUP, INC. [AMG]						(Check all applicable)			
	(First) (1 ATED MANAC C., 600 HALE S		3. Date of (Month/Da 12/18/20	ay/Year		nsaction			X Director X Officer (give below) CEC		6 Owner er (specify		
				mendment, Date Original /onth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
PRIDES CR	OSSING, MA 0	1965								More than One Ro			
(City)	(State)	(Zip)	Table	e I - Noi	1-De	rivative S	Securi	ties Aco	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Execution any	med on Date, if Day/Year)	Code (Instr.	8)	4. Securi Acquired Disposed (Instr. 3, Amount	l (A) o l of (D 4 and (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 Stock	10/17/2013			G	V	3,000	D	\$0	45,024	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Units	<u>(1)</u>	12/18/2013		А	34,382	<u>(1)</u>	(1)	Common Stock	34,382	\$

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Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
HEALEY SEAN M C/O AFFILIATED MANAGERS GROUP, 1 600 HALE STREET PRIDES CROSSING, MA 01965	INC. X		CEO and Chairman					
Signatures								
/s/ John Kingston, III, Attorney-in-Fact	12/20/2013							
**Signature of Reporting Person	Date							
E								

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

Incentive stock Award Flah) will vest over 8 years, from 2014 to 2021. In the event performance criteria are met, 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.