| SEC For | m 4 | | | | | | | | | | | | | | | | | | |
|---|---|--|--|--------|------------------------------|--|--|--|--|-------------------------|-----------------------------|---|---|--|--|---------------------------------------|--|--|--|
| FORM 4 UNITED S | | | |) STA | TE | s se | | | ES AND | SSION | OMB APPROVAL | | | | | | | | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | | | NT OF CHANGES IN BENEFICIAL OWNE d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | CMB Number: 3235- Estimated average burden hours per response: | | | 3235-0287 | | |
| 1. Name and Address of Reporting Person* DALTON NATHANIEL (Last) (First) (Middle) C/O AFFILIATED MANAGERS GROUP, INC. | | | | , | Al | FFIL MG] | <u>LIATE</u> | DN | ker or Tradir ANAG | ËRS | S GRO | [(Che | telationship of Reporting Person(s) to Issuer eck all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Executive V.P. and COO | | | /ner | | | |
| 600 HALE STREET | | | | | | 12/14/2010 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filed | | | | | | | | | | Filina | (Check App | licable | |
| (Street) PRIDES CROSSING MA 01965 | | | 01965 | | , | Line) X Form filed | | | | | | | | | ed by One Reporting Person ed by More than One Reporting | | | | |
| (City) | / | ative Securities Acquired, Disposed of, or Benefic | | | | | | | | ially Owned | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Tran: Date (Month | | | | action | n 1 I 'ear) i | 2A. Deemed Execution Date if any (Month/Day/Yes | | e, Transaction Dispos Code (Instr. 5) | | 4. Securiti Disposed | ies Acquire Of (D) (Inst | d (A) or | 5. Amour Securitie Beneficia Owned F Reported | s For ally (D) following (I) (I | | : Direct I r Indirect I str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | v | Amount | (A) or (D) | Price | Transact (Instr. 3 a | on(s) nd 4) | | | | |
| | | | Table II - I (| | | | | | រុuired, Di s, option៖ | | | | | Owned | | | | | |
| 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/ | ate, T | I. Fransa Code (}) | | 5. Number of Derivative 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 Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | c | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Employee Stock Option (Right to Buy) | \$95.82 | 12/14/2010 | | | A | | 75,000 | | 12/31/2014 ⁽ | 1) 1 | 2/14/2017 | Common Stock | 75,000 | \$95.82 | 75,00 | 0 | D | | |

Explanation of Responses:

1. This option is exercisable in 25% increments on each of December 31, 2011, 2012, 2013 and 2014. The exercisability of this option would be accelerated upon change of control of the Company.

/s/ John Kingston, III, Attorney-12/16/2010 <u>in-Fact</u>

** Signature of Reporting Person Date

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.