FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.O.	20070

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average burden								
- 1	hours per respense:	0.5							

Check this box if no longer subject to 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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol AFFILIATED MANAGERS GROUP, INC.									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Churchill Dwight D.						MG				الدر	-2 5110	<u> </u>	X Directo	er (give title Other		10% Ov	·			
(Last)	(Last) (First) (Middle) C/O AFFILIATED MANAGERS GROUP, INC.						Earli	est Tran	saction (N	lonth	Day/Year)		Officer below)			Other (s below)	specify			
777 SOUTH FLAGLER DRIVE				4. If	f Amer	ndmer	nt, Date	of Origina	l Filed	d (Month/D		6. Individual or Joint/Group Filing (Check Applicable								
				-							اا	Line) X Form filed by One Reporting Person								
(Street)	(Street) WEST PALM													Form filed by More than One Reporting Person						
BEACH	F1. 33401				R	1 مار	Ωh	5-1(c	\ Trans	220	tion Inc		reisu	· · · · · · · · · · · · · · · · · · ·						
(City)	City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - No	n-Deriv	ative	Sec	uriti	ies Ac	quired,	Dis	posed o	of, or Be	neficia	Illy Owned						
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				action	2A Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amou Securiti Benefic	int of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership				
							, , , ,		Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common	Stock			03/28	/2024	2024			М		1,787	A	\$110	.02 21	21,807		D			
Common Stock			03/28	/2024	/2024			M	м 2,661		A	\$86.	78 24	24,468		D				
Common Stock 03				03/28	/2024	2024		M		2,958	A	\$82.	07 27	,426 D		D				
Common Stock 03/2				03/28	/2024	2024			M		1,679	A	\$69.	63 29	29,105		D			
Common Stock 03/28/				/2024	2024		F		4,702	D	\$167	.47 24	,403		D					
		T	able II -									, or Ben ble secu		y Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ned n Date,	4. Transaction Code (Instr. 8)		5. Number 6		6. Date Expiration	6. Date Exercisa Expiration Date (Month/Day/Year		7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	d f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amount or Number of Shares							
Director Stock Option (Right to Buy)	\$110.02	03/28/2024			M			1,787	01/01/202	23	02/05/2026	Common Stock	1,787	\$0	0		D			
Director Stock Option (Right to Buy)	\$86.78	03/28/2024			M			2,661	01/01/202	23	07/30/2026	Common Stock	2,661	\$0	0		D			
Director Stock Option (Right to Buy)	\$82.07	03/28/2024			М			2,958	01/01/202	24	02/04/2027	Common Stock	2,958	\$0	0		D			
Director Stock Option (Right to Buy)	\$69.63	03/28/2024			М			1,679	08/15/202	23	07/28/2027	Common Stock	1,679	\$0	560		D			

Explanation of Responses:

/s/ Kavita Padiyar, Attorney-in-03/28/2024

Fact

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).