Instruction 1(b).

## FORM 4

1. Name and Address of Reporting Person\*

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

5. Relationship of Reporting Person(s) to Issuer

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

2. Issuer Name **and** Ticker or Trading Symbol

NUTT WILLIAM J						AFFILIATED MANAGERS GROUP INC [ AMG ]								X Director 10% Owner					
(Last) (First) (Middle) C/O AFFILIATED MANAGERS GROUP, INC. 600 HALE STREET						3. Date of Earliest Transaction (Month/Day/Year) 05/08/2007								Office below		X irman	below)	pecify	
(Street) PRIDES CROSSING MA 01965				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				n		
(City) (State) (Zip)													. 0.00	•					
		Tak	ole I - No	n-Deri	vativ	e Se	curit	ties Ac	quired	, Dis	posed o	f, or Be	neficia	lly Owned	ı				
Date				nsaction h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			Benefic Owned Reporte	es ially Following d	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	and 4)				
Common Stock				05/0	05/08/2007				M		13,865	_	1			,104 D			
					6/08/2007				M		2,801	_	\$23.		1,104		D D		
					05/08/2007				S <sup>(1)</sup>		16,666	_	+			,104			
Common Stock         05/09/2           Common Stock         05/09/2						_			M S <sup>(1)</sup>		16,666				131,104		D D		
Common Stock 05/10/2									M		16,668	_	\$123 \$23.		131,104		D		
Common Stock 05/10/2									S <sup>(1)</sup>		16,668		\$122	_	,104		D		
		•	Table II -											y Owned			<u> </u>		
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	ed Date,	4. Transactio		5. Number of		6. Date Exercisable an Expiration Date (Month/Day/Year)		sable and e	1		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)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$15.67	05/08/2007			M			13,865	11/26/20	04	11/26/2007	Common Stock	13,865	\$15.67	0		D		
Employee Stock Option (Right to Buy)	\$23.09	05/08/2007			M			2,801	04/16/20	002	04/16/2008	Common Stock	2,801	\$23.09	33,951	1	D		
Employee Stock Option (Right to Buy)	\$23.09	05/09/2007			M			16,666	04/16/20	002	04/16/2008	Common Stock	16,666	\$23.09	33,951	1	D		
Employee Stock Option (Right to Buy)	\$23.09	05/10/2007			M			16,668	04/16/20	02	04/16/2008	Common Stock	16,668	\$23.09	33,951	1	D		
xplanatio	n of Respons	ses:	•				•					•	•	•				,	

1. The sales of Common Stock reported on this Form 4 were effected pursuant to a Rule 10b5-1 Plan dated December 8, 2006.

/s/ John Kingston, III, Attorney-in-Fact

05/10/2007

\*\* 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.