Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

| 1 | ess of Reporting Pers | | 2. Issuer Name and Ticker or Trading Symbol AFFILIATED MANAGERS GROUP INC | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|------------------------------|-----------------------|-------------|--|---|-----------------------------------|--------------------------|--|--|
| MEYERMAN HAROLD J | | | AMG] | X | Director | 10% Owner | | |
| (Last) | (First) | (Middle) | | | Officer (give title below) | Other (specify below) | | |
| C/O AFFILIAT 600 HALE STF | ED MANAGERS REET | GROUP, INC. | 3. Date of Earliest Transaction (Month/Day/Year) 07/27/2004 | | | | | |
| (Street) PRIDES | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | vidual or Joint/Group Filing | | | |
| CROSSING | MA | 01965 | | | Form filed by More that Person | 0 | | |
| (City) | (State) | (Zip) | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1 | 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | if any 🤺 | 3. Transa Code (8) | ction | Disposed Of (D) (Instr. 3, 4 and | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---|---------------------------------|--|----------|------------------------------|-------|----------------------------------|---------------|-------|---|---|---|
| | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 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. Transa Code (8) | | of | | 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) |
|---|---|--|---|------------------------------|---|-------|-----|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Director Stock Option (Right to Buy) | \$45.27 | 07/27/2004 | | A | | 5,625 | | 12/31/2007 ⁽¹⁾ | 07/27/2011 | Common Stock | 5,625 | \$45.27 | 60,000 | D | |

Explanation of Responses:

1. This option is exercisable in 25% increments on each of December 31, 2004, 2005, 2006 and 2007. The exercisability of this option would be accelerated upon change of control of the Company.

<u>/s/ John Kingston, III,</u> <u>Attorney-in-Fact</u> 07/29/2004

** 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.