CME GROUP INC.

Form 4

March 17, 2015

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

**OMB APPROVAL** 

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

Section 16.
Form 4 or
Form 5
obligations
may continue.
See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response...

1(b).

(Print or Type Responses)

Stock Class 03/15/2015

Stock Class 03/16/2015

A

Α

Common

1. Name and A Sammann D	2. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [CME]					ng	5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First)	(Middle)	3 Date of	3. Date of Earliest Transaction					(Check all applicable)			
20 S. WACI	(Critation)	(Month/Day/Year) 03/14/2015						Director 10% Owner Selfont (give title Other (specify below) Sr MD Commodity & Options Prod				
		4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check				
CHICAGO		Filed(Month/Day/Year)						Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
CHICAGO, IL 60606									Person			
(City)	(State)	(Zip)	Table	e I - No	n-D	erivative :	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		n Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4)	Indirect Beneficial Ownership	
~				Code	V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock Class A	03/14/2015			F		235 (1)	D	\$ 96.83	20,808	D		
Common								¢				

98 (2)

1,312

(3)

20,710

22,022

\$0

D

D

F

A

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

#### Edgar Filing: CME GROUP INC. - Form 4

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerci	isable and	7. Titl	le and	8. Price of	9.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Date		Amount of	Derivative	D	
Security	or Exercise		any	Code	of	(Month/Day/Y	Year)	Under	rlying	Security	S
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	•		Secur	ities	(Instr. 5)	В
	Derivative			Securities				(Instr.	3 and 4)		0
	Security				Acquired						F
					(A) or						R
					Disposed						T
					of (D)						(I
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title			
						Exercisable Date		of			
				Code V	(A) (D)				Shares		
				Couc v	(II)				Dilaics		

### **Reporting Owners**

**Relationships** Reporting Owner Name / Address

> Director 10% Owner Officer Other

Sammann Derek 20 S. WACKER DRIVE CHICAGO, IL 60606

Sr MD Commodity & Options Prod

03/17/2015

### **Signatures**

By: Margaret Austin Wright For: Derek Louis Sammann

\*\*Signature of Reporting Person Date

#### **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).
- Mr. Sammann surrendered shares to the Company in order to fulfill tax withholding obligations upon the vesting of restricted stock on **(1)** March 14, 2015.
- Mr. Sammann surrendered shares to the Company in order to fulfill tax withholding obligations upon the vesting of restricted stock on **(2)** March 15, 2015.
- Represents shares from an incremental promotional award granted on March 16, 2015.

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.

Reporting Owners 2

9. Nu Deriv Secu Bene

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