## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.0	C. 20549
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*     MELAMED LEO						2. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [ CME ]											ip of Reporting Person(s) to Issue plicable) ctor 10% Owne				
(Last) (First) (Middle) 20 S. WACKER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 05/28/2008											er (give title			(specify	
(Street) CHICAGO IL 60606  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indiv ne) X	Form	al or Joint/Group Filing (Check Applicable form filed by One Reporting Person form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Da			3. Transa Code (I 8)						d 5)	Securi Benefi Owner	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A (D	) or )	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock Class	s A		05/28/	2008				S		2,000		D	\$428	28.06 1,466 D						
		Та						•			sed of, onvertib			-	y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) or Exercise (Month/Day/Year) Perice of Derivative Execution Date, if any (Month/Day/Year)		n Date, Day/Year)		(A) control of Deri Section (A) control of Deri Section (A) control of (I) contro		sed 3, 4	6. Date Expiratic (Month/L	Amount of		ount	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

**Explanation of Responses:** 

By: Margaret C. Austin For: Leo Melamed

05/30/2008

\*\* 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.