Instruction 1(b).

FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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OMB APPROVAL									
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to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>GEPSMAN MARTIN J</u>				2. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [CME]									ck all app	ionship of Reportin all applicable) Director		rson(s) to Is			
(Last) (First) (Middle) 20 S. WACKER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 12/07/2021									Office below	cer (give title ow)		Other (below)	specify
(Street) CHICAC		ate) (Z	0606 Zip)									Line)	Form filed by One Reporting Person Form filed by More than One Reporting Person				on		
			1 - 1101			_				סוס					_			1	
			2. Transad Date (Month/Da	Day/Year) Exec		a. Deemed lecution Date, any onth/Day/Year)				es Acquired (A Of (D) (Instr. 3,			5. Amo Securit Benefic Owned Report	ies cially Following	Forn (D) c	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or F	Price	Transa	action(s) . 3 and 4)			(11301. 4)
Common Stock Class A				12/07/	2021			S		500	I)	\$231	23	23,468		D		
		Tal									osed of, onvertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	4. Transa Code (8)	Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Ins: 3 and 4) Amou or Numb of Title Share		str. Disconnection of the content o	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

By: Margaret Austin Wright For: Martin J. Gepsman

12/08/2021

** 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.