SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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 Add <u>Hertshten (</u>	Date of Event equiring Staten Month/Day/Year 5/24/2017	nent 🛛 🕻 🕻	3. Issuer Name and Ticker or Trading Symbol <u>CME GROUP INC.</u> [ CME ]									
(Last) (First) (Middle) 20 S. WACKER DR.		5/24/2017			tionship of Reporting Perso all applicable) Director Officer (give title	con(s) to Issuer 10% Owner Other (specify		(Mor 6. Inc	<ul> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check</li> </ul>			
(Street) CHICAGO	IL	60606				below)	below)	speeny	Appli X		y One Reporting Person y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock Class A						132,278	D					
Common Stock Class B1					4 D		D					
Common Stock Class B2					4		D					
Common Stock Class B3					4 D		D					
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Secur Underlying Derivative Securi				ercise		6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title		Amou or Numb of Share	nt Deriv Secu er	ative	or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

## By: Margaret Austin Wright For: Gedon Hertshten

06/01/2017

\*\* Signature of Reporting Person

on 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 5 (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.