

CME GROUP INC. Reported by SHEPARD WILLIAM R

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 09/27/18 for the Period Ending 09/25/18

Address 20 S. WACKER DR

CHICAGO, IL, 60606

Telephone 3129301000

CIK 0001156375

Symbol CME

SIC Code 6200 - Security and Commodity Brokers, Dealers, Exchanges and Services

Industry Financial & Commodity Market Operators

Sector Financials

Fiscal Year 12/31





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

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. I	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SHEPARD WILLIAM R					CI	CME GROUP INC. [CME]								nedole)		201.0		
(Last)	(First)) (M	(Middle)			3. Date of Earliest Transaction (MM/DD/YYYY)							X _ Director	X _ Director10% Owner Officer (give title below) Other (specify below)				
20 S. WACKER DRIVE						9/25/2018							Officer (giv	e title below	,0	uici (specify	below)	
(Street)				4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)						6. Individual or Joint/Group Filing (Check Applicable Line)							
CHICAGO, IL 60606 (City) (State) (Zip)													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
			Table I	- Non	-Der	ivati	ve Secu	rities Acc	quire	ed, Di	sposed o	f, or	Bei	neficially Owne	d		_	
1.Title of Security (Instr. 3)			2. Trans. Date				3. Trans. Co (Instr. 8)	de V	or Dis	orities Acqueosed of (D 3, 4 and 5) (A) oritinating (D)) `	(. Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)				7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock Class A 9/25/			9/25/20	018			A		173	- ` ′	\$0.0	0	194864.695			I	by Trust	
	Tabl	le II - Der	ivative S	Securi	ties I	Bene	ficially	Owned (e.g. ,	puts,	calls, w	arrai	nts,	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	or Exercise Price of Derivative	3. Trans. Date	3A. Deen Execution Date, if an	ecution (Ins		Code 5. Number of Derivative Sect Acquired (A) o Disposed of (D (Instr. 3, 4 and		e Securities (A) or of (D)	ecurities Expir (D)		te Exercisable and ration Date		ities ative			9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	Beneficial
	Security			(Code	V	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Am Sha	nount or Number of ares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) Incremental grant made pursuant to the CME Group Director Stock Plan, as amended and restated, as a result of an increase to Board compensation.

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SHEPARD WILLIAM R							
20 S. WACKER DRIVE	X						
CHICAGO, IL 60606							

Signatures

By: Margaret Austin Wright For: William R. Shepard	9/27/2018
** 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 control number.