FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasnington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

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

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* OLIFF JAMES E						2. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [CME]									neck all a	nip of Reportir oplicable) ector	ng Pers	son(s) to Is	
(Last) (First) (Middle) 20 S. WACKER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 06/27/2016										Off bel	cer (give title ow)		Other (below)	(specify
(Street) CHICAGO IL 60606 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									e) X Fo	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution D			Code (4. Secur Dispose ode (Instr. 5)		ties Ac I Of (D)	quired (Instr.	(A) or 3, 4 an	d Secu Bene	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	(/	A) or D)	Price	Tran	saction(s) r. 3 and 4)			(
Common Stock Class A 06/2						/2016		A ⁽¹⁾		1,075		A	\$ 0 .	0	36,761		I	by Trust	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Durity or Exercise (Month/Day/Year) if any			Date, Transaction Code (Instr					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		D O (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

 $1. \ Granted \ pursuant \ to \ the \ CME \ Group \ Director \ Stock \ Plan, \ as \ amended \ and \ restated.$

By: Margaret Austin Wright For: James E. Oliff

06/29/2016

** 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.