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

STATEMENT OF CHANGES IN BI	ENEFICIAL O	WNERSHIP

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

SHEPARD WILLIAM R					CME GROUP INC. [CME]									k all app	olicable)	10%	Owner	
(Last) 20 SOUT	(Last) (First) (Middle) 20 SOUTH WACKER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 06/25/2015									Offic below	er (give title v)	Othe belov	r (specify v)
(Street) CHICAG			50606		4. If	Amer	ndment,	Date o	f Original	Filed	(Month/Da	ay/Year)		6. Ind Line)	Forn	n filed by One n filed by Mor	Filing (Check Reporting Pe e than One Re	rson
(City)	(5)		Zip)	- Deriv	ativo	Soc	ritio	- Λ c σ	nuired	Die	nosed o	f or F	Ponof	icially	Οννη	ad		
1. Title of Security (Instr. 3)				2. Transa Date			3. Transa Code (Transaction Disposed 5)		ities Acquired (A) d Of (D) (Instr. 3, 4		a) or	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock Class A 06/2					/2015			A ⁽¹⁾		1,702	- ` 		\$0.00	1	37,129	D		
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)	titive Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of rivative curity str. 5)		10. 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	of Share	s				

Explanation of Responses:

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

Remarks:

By: Margaret Austin Wright for William R. Shepard

06/29/2015

** 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.