FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

## Washington, D.C. 20049

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

1. Name and Address of Reporting Person*  GOBLE NANCY W  (Last) (First) (Middle)  20 S. WACKER DRIVE				3. D	S. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [ CME ]  3. Date of Earliest Transaction (Month/Day/Year) 01/08/2008										ck all applic Directo	cable)		10% Ov Other (s below)	vner	
(Street) CHICAC	GO IL		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(3)		(Zip)	n-Deriv	ztive		curiti	Δς Δ	can	ired	Die	nosed o	of or B		 	Owned				
1. Title of Security (Instr. 3)			2. Transa Date	2. Transaction		2A. Deemed Execution Date,		, 3 T	3. Transaction Code (Instr.					or 5. Amou Securiti Benefic Owned		nt of s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Ownership	
								c	Code	v	Amount	(A) (D)	r Pr	ice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock Class A				01/08/	/2008					M		100	00 A		63.01	913		D		
Common Stock Class A 01				01/08/	/2008					S		100(1)	D	\$	511.71	. 8	13		D	
Common Stock Class A 01/0					/2008					M		900	A		\$1 <mark>27</mark>	1,7	1,713		D	
Common Stock Class A				01/08/	01/08/2008					S		900(1)	D	\$	511.71	. 8	313		D	
		٦	Table II -									osed of,				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed A	4. Transa	ransaction		5. Number 6.		6. Date Exercisa Expiration Date (Month/Day/Yea		ble and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer			Expiration Date	Title	Am or Nu of Sha						
Non- Qualified Stock Option (right to buy)	\$63.01	01/08/2008			М			100	06/0	06/2007 <sup>1</sup>	(2)	06/06/2013	Commo Stock Class A		00	\$0	1,050		D	
Non- Qualified Stock Option (right to	\$127	01/08/2008			М			900	06/1	14/2007 <sup>l</sup>	(3)	06/14/2014	Commo Stock Class A		00	\$0	2,100		D	

## **Explanation of Responses:**

- 1. This sale was completed pursuant to the terms of a pre-arranged trading plan established in accordance with Rule 10b5-1.
- 2. On June 6, 2007, this option vested with respect to 80% of the granted number of shares covered by the option. On the anniversary of that date in the subsequent year, the option will vest with respect to an additional 20% of the shares covered by the option, subject to acceleration or termination in certain circumstances.
- 3. On June 14, 2007, this option vested with respect to 60% of the granted number of shares covered by the option. On the anniversary of that date in each of the two subsequent years, the option will vest with respect to an additional 20% of the shares covered by the option, subject to acceleration or termination in certain circumstances.

By: Margaret C. Austin For: Nancy W. Goble 01/09/2008

\*\* 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.