FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

UNID APPROVAL								
OMB Number:	3235-028							
Estimated average k	ourdon							

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

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

1. Name and Address of Reporting Person*

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

2. Issuer Name and Ticker or Trading Symbol

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OLIFF JAMES E					CME GROUP INC. [CME]									(0		all applicable) Director		10% Owner		
(Last) 20 S. WA	(Fi	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/25/2012									Offic belo	cer (give title w)		Other (specify below)			
(Street) CHICAC			50606 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ine) X Fori Fori	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson				
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed c	f, or	Bene	eficia	ally Own	ed				
1. Title of Security (Instr. 3)				Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		urities Acquired (A sed Of (D) (Instr. 3,			nd Secur Benef	icially d Following	Form:	nership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(1	A) or D)	Price	Trans	action(s) 3 and 4)			(111501. 4)			
Common	non Stock Class A 06/25/2012 A ⁽¹⁾ 281 A \$0.0						.0	5,550		D										
		Та									sed of, onvertib				y Owned	I				
1. Title of Derivative Security (Instr. 3)	erivative courity or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Price of Derivative Security Execution Date, if any (Month/Day/Year) 8)				of	r osed (, 3, 4	6. Date E Expiratio (Month/D	n Dat					8. Price of Derivative Security (Instr. 5)		/ Ox For Di or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. Granted pursuant to the CME Group 2005 Director Stock Plan, as amended and restated.

By: Margaret Austin Wright For: James E. Oliff

06/27/2012

** 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.