FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* GLICKMAN DANIEL R						2. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [CME]									Relationsh heck all ap	plicable)	ng Person(s) 10	to Issuer % Owner	
(Last) 20 S. WA	(Last) (First) (Middle) 20 S. WACKER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 06/25/2018									Officer (give title below)		Other (specify below)		
(Street) CHICAG	CHICAGO IL 60606					4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Forr Forr	,			
		Tabl	e I - Nor	n-Deriv	/ative	Se	curitie	s Acc	quired,	Dis	posed o	of, or l	Bene	ficia	lly Own	ed			
Date				Date	2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			nd Secur Benef	icially d Following	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	t of Indirect	
										v	Amount	(A (C	() or ()	Price	Trans	action(s) 3 and 4)		(111501.4)	
Common Stock Class A 06/25						3					601		Α	\$0	0 1	14,400			
Common Stock Class A															2,100		I	by Trust	
		Та									sed of, onvertib				/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr) 8)		n of		6. Date Expiration (Month/D	е	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (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: Daniel R. Glickman

06/27/2018

** Signature of Reporting Person Da

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.