| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| 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

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response. | 05 | | | | | | | | |

| 1. Name and Add TAYLOR K | 1 0 | | 2. Issuer Name and Ticker or Trading Symbol <u>CME GROUP INC.</u> [CME] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner |
|-----------------------------|----------------------------|-------|---|---|
| (Last) 20 S. WACKE | (First) (Middle) KER DRIVE | | 3. Date of Earliest Transaction (Month/Day/Year) 09/15/2017 | X Sincer (give the below) below) Sr MD&Pres Clearing&PostTrade |
| (Street) CHICAGO | IL | 60606 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting |
| (City) | (State) | (Zip) | | Person |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 4. Securities Disposed Of (| | | 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) |
|---------------------------------|--|---|------|---|--------------------------------|---------------|----------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |
| Common Stock Class A | 09/15/2017 | | Α | | 7,996 | Α | \$0.0 | 115,926 | D | |
| Common Stock Class A | 09/15/2017 | | F | | 2,746 ⁽¹⁾ | D | \$131.29 | 113,180 | D | |
| Common Stock Class A | 09/16/2017 | | F | | 715 ⁽²⁾ | D | \$131.29 | 112,465 | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date (Month/Day/Year) ecurities cquired s) or isposed f (D) str. 3, 4 | | | and ht of ties ying tive tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|--|---|--------------------|-------|--|---|--|--|--|
| | | | | Code | v | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Ms. Taylor surrendered shares to the Company in order to fulfill tax withholding obligations upon the vesting of restricted stock on 9/15/17.

2. Ms. Taylor surrendered shares to the Company in order to fulfill tax withholding obligations upon the vesting of restricted stock on 9/16/17.

By: Margaret Austin Wright For: Kimberly S. Taylor

Date

09/19/2017

** Signature of Reporting Person

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.