FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL				
OMB Number:	3235-0287				
Estimated average burd	en				
hours per response:	0.5				

	Check this box if no longer subject to
٦.	Section 16. Form 4 or Form 5
J	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

1. Name and Address of Reporting Person* <u>Suskind Dennis</u>						2. Issuer Name and Ticker or Trading Symbol  CME GROUP INC. [ CME ]									heck all a	hip of Reportir pplicable) ector	ng Pers	on(s) to Is	
(Last) (First) (Middle) 20 S. WACKER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 06/25/2014										icer (give title ow)		Other below)	(specify
(Street) CHICAGO IL 60606  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark> Fo Fo	I or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date			, Transaction Disposed Code (Instr. 5)			rities Acquired (A) ed Of (D) (Instr. 3,			d Secu Bend Own	nount of irities eficially ed Following orted	Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A (C	A) or D)	Price	Tran	saction(s) r. 3 and 4)			(IIISti. 4)
Common Stock Class A 06/25/						/2014			A <sup>(1)</sup>		1,062 A		Α	\$ <del>0</del> .	0	9,629		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)	vative Conversion Date Execution Date irity or Exercise (Month/Day/Year) if any			Date,	Date, Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	8. Price o Derivative Security (Instr. 5)		Ov Fo Di or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		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: Dennis Suskind

06/27/2014

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.