## Edgar Filing: POLLOCK ALEX J - Form 4

| Form 4<br>May 28, 2009   |                                    |  |                                       |  |   |                                 |   |  |  |   |  |
|--|------------------------------------|--|---------------------------------------|--|---|---------------------------------|---|--|--|---|--|
| FORM /   |                                    |  |                                       |  |   | COMMISSION                      | OMB APPROVAL  |  |  |   |  |
|  | UNITEL                             | Washington, D.C. 20549   |                                       |  |   |                                 |   |  |  | 3235-0287   |  |
| Check this<br>if no longe<br>subject to<br>Section 16<br>Form 4 or<br>Form 5<br>obligation | Filed pu                           | <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b><br><b>SECURITIES</b><br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, |                                       |  |   |                                 |   |  | Expires:<br>Estimated a<br>burden hou<br>response                    | irs per   |  |
| may contin<br>See Instruct<br>1(b).  | nue. Section 17                    | • /  | Public Uti<br>of the Inv              | •                                      | U   |                                 |   | f 1935 or Sectic<br>40   | on   |   |  |
| (Print or Type R   | esponses)                          |  |                                       |  |   |                                 |   |  |  |   |  |
| POLLOCK ALEX J Symbol<br>CME G   |                                    |  |                                       | r Name <b>and</b> Ticker or Trading    |   |                                 |   | 5. Relationship of Reporting Person(s) to Issuer   |  |   |  |
|  |                                    |  | CME GROUP INC. [CME]                  |  |   |                                 |   | (Check all applicable)   |  |   |  |
| (Last) (First) (Middle) 3. Date of<br>(Month/Da<br>20 S. WACKER DRIVE 05/26/20             |                                    |  |                                       |  |   |                                 | X Director<br>Officer (give<br>below)   | ector 10% Owner<br>cer (give title Other (specify<br>below)  |  |   |  |
|  |                                    |  | ndment, Date Original<br>th/Day/Year) |  |   |                                 | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |  |   |  |
| CHICAGO,   | IL 60606                           |  |                                       |  |   |                                 |   | Person   | More than One R  | eporting  |  |
| (City)   | (State)                            | (Zip)  | Table                                 | I - Non-Do                             | erivative S   | ecuri                           | ties Aco  | quired, Disposed o   | f, or Beneficia  | lly Owned   |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction D<br>(Month/Day/Yea | ar) Execution<br>any   | emed<br>on Date, if<br>Day/Year)      | 3.<br>Transactio<br>Code<br>(Instr. 8) | 4. Securi<br>onAcquired<br>Disposed<br>(Instr. 3,<br>Amount | (A) of (D<br>4 and<br>(A)<br>or | )   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock Class<br>A   | 05/26/2009                         |  |                                       | A <u>(1)</u>                           | 329   | A                               |   | 1,384  | D  |   |  |

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                     | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
|   | Director      | 10% Owner | Officer | Other |  |  |  |
| POLLOCK ALEX J<br>20 S. WACKER DRIVE<br>CHICAGO, IL 60606 | Х             |           |         |       |  |  |  |
| Signatures  |               |           |         |       |  |  |  |
| By: Margaret C. Austin For: A<br>Pollock                  | 05/28/2009    |           |         |       |  |  |  |
| <u>**</u> Signature of Reporting Person                   | Date          |           |         |       |  |  |  |

## **Explanation of Responses:**

- \* 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).
- (1) Granted pursuant to the CME Group 2005 Director Stock Plan, as amended and restated.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.