Hertshten Gedon Form 4 June 27, 2018

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

**OMB APPROVAL** 

Number:

5. Relationship of Reporting Person(s) to

3235-0287

Expires:

January 31, 2005

0.5

burden hours per response...

Estimated average

if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Hertshten Gedon			Symbol	Symbol					Issuer			
			CME G	CME GROUP INC. [CME]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	3. Date of Earliest Transaction								
			(Month/D	ay/Year)				X Director 10% Owner				
20 S. WACKER DR.			06/25/20	06/25/2018					Officer (give title below) Other (specify below)			
(Street)			4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mon	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
CHICAGO, IL 60606								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction D	ate 2A. D	eemed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	(Month/Day/Year) Execution			on Date, if TransactionAcquired (A) or				Form: Direct	Indirect		
(Instr. 3)				Code	Disposed of (D)			Beneficially	(D) or	Beneficial		
		(Mont	h/Day/Year)	(Instr. 8)	· / /			Owned	Indirect (I)	Ownership		
							Following	(Instr. 4)	(Instr. 4)			
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
				Code V	Amount	(D)	Price	(mstr. 5 tild 1)				
Common												
Stock Class A	06/25/2018			A <u>(1)</u>	961	A	\$0	34,505	D			
Common								100.056	<b>T</b>	D E'		
Stock Class A								100,056	I	By Firm		

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	01	r		
						Date	Expiration	Title N	umber		
						Exercisable Da	Date	01			
				Code V	(A) (D)				hares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Hertshten Gedon							
20 S. WACKER DR.	X						

**Signatures** 

CHICAGO, IL 60606

By: Margaret Austin Wright For: Gedon 06/27/2018 Hertshten

> \*\*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 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.

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