| CBOE Holding Form 4 February 10, 2 | | | | | | | | | | | |
|--|--|---|--|--|--|--|---|--|--|--|--|
| FORM | Л | | | | | OMB AF | PROVAL | | | | |
| | OMMISSION | OMB Number: | 3235-0287 | | | | | | | | |
| Check this if no longer subject to Section 16. Form 4 or | | GES IN BENEFIC SECURITIES | CIAL OWN | ERSHIP OF | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | | | | | |
| Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations Mage Continue. See Instruction 1(b). Form 5 obligations Mage Continue. See Instruction 1(c) See Instruction 1(c) | | | | | | | | | | | |
| (Print or Type Res | sponses) | | | | | | | | | | |
| 1. Name and Add Provost Edwa | lress of Reporting Person <u>*</u> rd L | Name and Ticker or T oldings, Inc. [CB0 |] | 5. Relationship of Reporting Person(s) to Issuer | | | | | | | |
| (Last) | (First) (Middle) | | Earliest Transaction | k all applicable) | | | | | | | |
| | OLDINGS, INC., 400 ALLE STREET | y/Year) 15 | 1 | Director 10% Owner XOfficer (give title Other (specify below) President and COO | | | | | | | |
| | (Street) | Filed(Month/Day/Year) App | | | | Individual or Joint/Group Filing(Check oplicable Line) K_ Form filed by One Reporting Person | | | | | |
| CHICAGO, II | L 60605 | | | - | Form filed by Mo Person | | | | | | |
| (City) | (State) (Zip) | Table 1 | I - Non-Derivative S | ecurities Acqu | ired, Disposed of, | or Beneficial | ly Owned | | | | |
| 1.Title of Security (Instr. 3) | any | Deemed cution Date, if nth/Day/Year) | Transactior(A) or D Code (Instr. 3, (Instr. 8) | (A) or | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| Unrestricted Common Stock | 02/06/2015 | | Code V Amount F 2,354 | (D) Price $D = \begin{cases} 8 \\ 62.46 \end{cases}$ | 83,380 | 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)

| Security | | | | | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | |
|--|---------------|-----------|-------|-----|---|---------------------|--------------------|--|
| | | | Code | v | (A) (D) | Date Exercisable | Expiration Date | |
| Reporting Owners | | | | | | | | |
| Reporting Owner Name / Address | Relationships | | | | | | | |
| i O | Director | 10% Owner | Offic | cer | | Othe | r | |
| Provost Edward L C/O CBOE HOLDINGS, INC. 400 SOUTH LASALLE STREET CHICAGO, IL 60605 | | | Pre | sid | ent and | COO | | |

Execution Date, if

(Month/Day/Year)

3. Transaction Date 3A. Deemed

any

(Month/Day/Year)

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4.

Code

(Instr. 8)

5.

of

Derivative

Securities

TransactionNumber

6. Date Exercisable and

Expiration Date

(Month/Day/Year)

7. Title and

Amount of

Underlying

(Instr. 3 and 4)

Amount or Title Number of Shares

Securities

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

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Own

Follo Repo Trans (Insti

Signatures

1. Title of

Security

(Instr. 3)

Derivative

2.

Conversion

or Exercise

Derivative

Price of

/s/ Patrick Sexton, 02/10/2015 attorney-in-fact **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).

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.