## Edgar Filing: CME GROUP INC. - Form 4

CME GROU	JP INC.											
Form 4												
September 3	30, 2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	IB APPROVAL		
Wasl					RITIES AND EXCHANGE COMMISSION shington, D.C. 20549				OMB Number:	3235-0287		
Check th if no lon		-						Expires:	January 31,			
subject t Section	51AIE 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expired: 2005 Estimated average burden hours per			
Form 4 o Form 5			o (* 1		с ·	т	- 1	A ( C1024	response 0.5			
obligatio	-						-	e Act of 1934, 1935 or Sectior				
may con	unue.			vestment	•	-	•		1			
<i>See</i> Instr 1(b).	ruction	50(11)	or the fi	ivestillent	. Compa	11y 210		0				
1(0).												
(Print or Type	Responses)											
				8				5. Relationship of Reporting Person(s) to Issuer				
TATLOR	AIMBERLI S		Symbol	001				155001				
			CMEC	ME GROUP INC. [CME]				(Check all applicable)				
(Last)	(First)	(Middle)		f Earliest T	ransaction							
20 S. WACKER DRIVE (Month/ 09/29/2			th/Day/Year)				Director 10% Owner X Officer (give title Other (specify					
			0912912	9/29/2010				below) below)				
								Sr MD Pres Gl Ops Tech & Risk				
				-				6. Individual or Joint/Group Filing(Check				
			Filed(Mo					Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO	, IL 60606							Form filed by M Person				
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned		
1.Title of	2. Transaction Date	e 2A. Deer	med	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year) Exec		on Date, if Transaction(A) or Disposed of (D)			d of (D)	Securities	Ownership	Indirect			
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially Owned		Beneficial Ownership		
		(intointin)					Following	(Instr. 4)				
						(A)		Reported	(Instr. 4)			
						or		Transaction(s) (Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	,				
Stock	09/29/2016			S	2,300	D	\$	105,558	D			
Class A	07272010			0	(1)	D	106.01	105,550	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)

## Reporting Owners

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
TAYLOR KIMBERLY S 20 S. WACKER DRIVE CHICAGO, IL 60606			Sr MD Pres Gl Ops Tech & Risk					
Signatures								
By: Margaret Austin Wright Fo Taylor	or: Kimbe	erly S.	09/30/2016					
<u>**</u> Signature of Reporting F	erson		Date					
<b>Explanation of Re</b>	spon	ses:						

\* 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) This sale was completed pursuant to the terms of a pre-arranged trading plan established in accordance with Rule 10b5-1.

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.