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

Form 4	P INC.										
December 12	2, 2013										
FORM	4							OMB APPROVAL			
	UNITE	D STATES		STIES A.			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 10 Form 4 or	er <b>STAT</b> 6.	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> 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							Expires:January 31 2005Estimated average burden hours per response0.5		
Form 5 obligation may conti <i>See</i> Instru 1(b).	inue. Section 1								1		
(Print or Type R	Responses)										
CRONIN KATHLEEN M (Last) (First) (Middle) 3. 20 S. WACKER DRIVE 12			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
			CME GROUP INC. [CME]					(Check all applicable)			
			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 12/10/2013				Director       10% Owner        X Officer (give title       Other (specify below)         Sr MD Gen Counsel & Corp Secr			
			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mor CHICAGO, IL 60606				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock Class	12/10/2013			S	1,155	D	\$ 80.18	16,314	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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
CRONIN KATHLEEN M 20 S. WACKER DRIVE CHICAGO, IL 60606			Sr MD Gen Counsel & Corp Secr				
Signatures							
By: Margaret Austin Wright Fo Cronin	or: Kathle	en Marie	12/12/2013				
<u>**</u> Signature of Reporting	g Person		Date				
<b>Explanation of Re</b>	enon	696.					

### **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.