CME GROUP INC. Form 3 July 16, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB 2225 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u>		Statement	3. Issuer Name and Ticker or Trading Symbol CME GROUP INC. [CME]				
CLEGG JACKI (Last) (First)	(Middle)	(Month/Day/Year) 07/12/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
20 SOUTH WACK (Street CHICAGO, ILÂ)		(Check a X_ Director Officer (give title below)	Other	Owner	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (State)	(Zip)	Table I - N	Non-Derivati	ve Securiti	es Bei	neficially Owned	
1.Title of Security (Instr. 4)		2. Amount o Beneficially (Instr. 4)	Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1	
No securities are be	eneficially owne	ed 0		D	Â		
Reminder: Report on a source owned directly or indirectly	*	ch class of securities benefic	ially SE	EC 1473 (7-02)		
in re	formation conta quired to respo	oond to the collection of ined in this form are not nd unless the form displ IB control number.	t				
Table II	- Derivative Secur	ities Beneficially Owned (e	.g., puts, calls, v	warrants, opt	ions, c	onvertible securities)	

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	× /	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
I B	Director	10% Owner	Officer	Other		
CLEGG JACKIE M 20 SOUTH WACKER DRIVE CHICAGO, IL 60606	ÂX	Â	Â	Â		
Signatures						
/s/ Margaret C. Austin For: Jack Clegg	ie M.	07/16/2007				
**Signature of Reporting Person			Date			

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.