## Edgar Filing: NASDAQ OMX GROUP, INC. - Form 4

NASDAQ O Form 4 February 24,	MX GROUP, IN 2015	IC.									
FORM 4 UNITED STATES SECURITIES AND EXCHAN									OMB AF	PROVAL	
- UNITED STATES SECU.				RITIES AND EXCHANGE COM shington, D.C. 20549				OMMISSION	OMB Number:	3235-0287	
Check th				0,					Expires:	January 31,	
if no longer subject to Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWN SECURITIES					VERSHIP OF	Estimated average burden hours per		
Form 5		sugnt to S	Section 1	6(a) of the	a Sacurit	ios Er	vehange	e Act of 1934,	response	0.5	
obligatio	ns Section 17(							1935 or Section	h		
may cont <i>See</i> Instru 1(b).	inue.			vestment	•	· ·			•		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person2. IssuerGriggs PC NelsonSymbol				r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			NASDA [NDAQ	AQ OMX GROUP, INC. 2]				(Check all applicable)			
(Month/E			of Earliest Transaction Day/Year)			Director 10% Owner X Officer (give title Other (specify below) Executive Vice President					
ONE LIBERTY PLAZA 02/22/20				015							
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
NEW YOR	K, NY 10006							_X_ Form filed by O Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deen Ionth/Day/Year) Execution any (Month/D		3. Transactic Code (Instr. 8)	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Stock, par value \$0.01 per share	02/22/2015			F <u>(1)</u>	13,407	D	\$ 50.79	31,189 <u>(2)</u>	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.

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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 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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							
I B	Director	10% Owner	Officer	Other				
Griggs PC Nelson ONE LIBERTY PLAZA NEW YORK, NY 10006			Executive Vice President					
Signatures								
/s/ Edward S. Knight, by power attorney	of	02/	24/2015					
**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) Represents the surrender of shares to pay withholding taxes in connection with vestings of equity previously granted under Nasdaq's Equity Incentive Plan.
- (2) Represents (i) 15,198 units of vested restricted stock and (ii) 15,991 shares underlying performance share units, of which 7,209 are vested.

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.