## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	20540
Washington,	D.C.	20549

## **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

OMB APPROVAL							
OMB Number:	3235-0362						
Estimated average	burden						

Form 3	Holdings Rep	orted.				•		٠٠.	•••					houi	rs per r	esponse:	1.0	
_	Transactions		Fil	ed pursuant t or Section							f 1934							
1. Name and Address of Reporting Person*  KNIGHT EDWARD S			2. Issuer	or Section 30(h) of the Investment Company Act of 1940  2. Issuer Name and Ticker or Trading Symbol NASDAQ OMX GROUP, INC. [ NDAQ ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner							
(Last) (First) (Middle) ONE LIBERTY PLAZA					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014							2	below			<i>'</i>		
(Street) NEW YORK NY 10006				4. If Amei	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City)		Pe										Person						
			le I - Non-Deri	1		1	cquire						1					
*` '		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution I if any (Month/Day	Date,		Transaction Code (Instr.		4. Securities Acquired (A) or Disp Of (D) (Instr. 3, 4 and 5)		r Dispos	ed	5. Amour Securitie Beneficia Owned a	s ally t end of	6. Owne Form: (D) or Indire	Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Amo	unt	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)		(Instr.		(instr. 4)	
Common Stock, par value \$0.01 per share		08/11/2009		G5		G5	3	,000(1)	D \$			60,5	,571(2)		D			
Common Stock, par value \$0.01 per share		10/28/2011				G5		2,400 <sup>(1)</sup> D		\$0		60,571(2)		D				
		T	able II - Deriva (e.g., p	itive Secu outs, calls									Owned					
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. Transaction Code (Instr. 8)	of	rities ired psed				7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)	
					(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er						
Employee Stock Option (Right to Buy)	\$19.75						(3)		03/04/2020	Commor Stock	22,05	59		22,05	059 I			
Employee Stock Option (Right to Buy)	\$25.07						(3)		12/17/2018	Commor Stock	39,45	58		39,45	158 D			
Employee Stock Option (Right to Buy)	\$25.28						(3)		03/28/2021	Commor Stock	25,49	96		25,49	16	D		
Employee Stock Option (Right to Buy)	\$35.92						(3)		12/13/2016	Commor Stock	28,80	)1		28,80	1	D		
Employee Stock Option (Right to	\$45.38						(3)		12/12/2017	Commor Stock	19,55	55		19,55	55	D		

## **Explanation of Responses:**

- 1. These shares were included in Box 5 of Forms 4 filed by the reporting person after the date of the bona fide charitable gift through December 2014.
- 2. The amount reported reflects the amount of securites beneficially owned as of the date of this filing and represents (i) 41,663 vested shares underlying performance share units and (ii) 18,908 shares purchased under the Employee Stock Purchase Plan.
- 3. Exercisable options.

/s/ Edward S. Knight

02/02/2015

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. \* 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.

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 Number.