FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OMB APPROVAL 3235-0287 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden

hours per response:

0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Griggs PC Nelson | | | | | | 2. Issuer Name and Ticker or Trading Symbol NASDAQ, INC. [NDAQ] | | | | | | | | | | all app Direc | tionship of Reporting F all applicable) Director Officer (give title below) Executive Vice | | 10% O | |
|--|---|--------|-----|----------|--|--|-------|--|---|-------------------------|---|------------|--------------------|--|--|--|---|--|---|--|
| (Last) (First) (Middle) 151 W. 42ND STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2022 | | | | | | | | | below | below) President | | | | |
| (Street) NEW YORK NY 10036 | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | on | |
| (City) | | (State | | ip) | n-Deriva | tive S | Secui | rities | Acc | uired | | posed of | or B | enefic | ially | Own | ed e | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | ion | on 2A. Deemed Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5) | | | Acquir | ed (A) o | or 5. Amo and Securi Benefi Owned | | ount of ties cially Following | Forn (D) c | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | Code | v | Amount | (A) or (D) | | | | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | | | |
| Common Stock, par value \$0.01 per share 04/01/20 | | | | | | 022 | | | A | | 2,198(1) | A | \$0 | .00 | 00 36,177 | | | D | | |
| Common Stock, par value \$0.01 per share 04/01/20 | | | | | | 022 | | | | F ⁽²⁾ | | 591 | D | \$18 | 181.92 | | 35,586(3) | | D | |
| | | | Tab | ole II - | | | | | | | | osed of, c | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative conversion or Exercise (Month/Day/Year) Price of Derivative Security Execution Date, if any (Month/Day/Year) | | | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amount or Number of Title Shares | | Der Sec (Ins | Price of ivative urity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

- 1. Represents shares or units of restricted stock granted pursuant to Nasdaq's Equity Incentive Plan, which vest one-third on April 1, 2024, one-third on April 1, 2025 and one-third on April 1, 2026.
- 2. Represents the surrender of shares to pay withholding taxes in connection with vestings of equity previously granted under Nasdaq's Equity Incentive Plan.
- 3. Represents (i) 7,196 shares or units of restricted stock, of which 565 are vested, and (ii) 28,390 shares underlying PSUs, all of which are vested.

Remarks:

/s/ Alex Kogan, by power of attorney

04/05/2022

** 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.