FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL											
OMB Number:	3235-02										

287 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] <u>Jochumsen Hans-Ole</u>						2. Issuer Name and Ticker or Trading Symbol NASDAQ OMX GROUP, INC. [NDAQ]										heck a	all appli Directo	cable) or	g Per	p Person(s) to Issuer 10% Owner	
(Last) ONE LIE	t) (First) (Middle) E LIBERTY PLAZA						3. Date of Earliest Transaction (Month/Day/Year) 02/17/2010										Officer (give title Other (below) below) Executive Vice President			pecify	
(Street) NEW YO	reet) EW YORK NY 10006					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 Person					
(City)	(S		(Zip)																		
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transar Date (Month/Da					action	ction 2A. Deemed Execution Date,				3. 4. Securi Transaction Disposed Code (Instr. 5)			of, or Benefic rities Acquired (A) ed Of (D) (Instr. 3, 4			or 5. An Secu Bene Own		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Co	de \	v	Amount		A) or D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, par value \$0.01 per share 02/17/						2010			1	A .		19,187	19,187 ⁽¹⁾ A		\$0		77,490(2)		D		
		Т	able II -									sed of onverti				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	kecution Date, any		4. Transaction Code (Instr. 8)		of		6. Date Exercisal Expiration Date (Month/Day/Year)			le and 7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		s ecurity			9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable		piration ate	Title	0 N	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$25.07								(3)	12	/17/2018	Comm Stock		39,458			39,458		D	
Employee Stock Option (Right to Buy)	\$41.36								(4)	03	:/24/2018	Comm Stock		15,771			15,771		D	

Explanation of Responses:

- 1. Represents the settlement of performance share units (PSUs) that were granted under The NASDAQ OMX Group, Inc. Equity Incentive Plan on December 17, 2008. The ultimate amount of shares to be received under the grant depended upon the achievement of performance goals during a one-year performance period from January 1, 2009 through December 31, 2009. On February 17, 2010, the Management Compensation Committee of NASDAQ OMX's Board of Directors approved the settlement of the PSU grant. The shares underlying the PSUs will vest on December 31, 2012.
- 2. Represents (i) 50,000 units of unvested restricted stock and (ii) 27,490 unvested shares underlying PSUs.
- 3. Options exercisable on December 17, 2012.
- 4. Options exercisable on March 24, 2011.

/s/ Edward S. Knight, by power 02/19/2010 of attorney

** 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.