#### NASDAQ OMX GROUP, INC. Form 3 March 10, 2008 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

### 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)

(Last) (First) (Middle) 03/01/2008 4.	Relationship of Reporting5. If Amendment, Date Originalrson(s) to IssuerFiled(Month/Dav/Year)				
	son(s) to Issuer Filed(Month/Day/Year)				
ONE LIBERTY PLAZA					
(Street)	(Check all applicable) 6. Individual or Joint/Group				
	K Director 10% Owner Filing(Check Applicable Line)   Officer Other X_ Form filed by One Reporting   ve title below) (specify below) Person				
	Form filed by More than One Reporting Person				
(City) (State) (Zip) Table I - Nor	-Derivative Securities Beneficially Owned				
1.Title of Security 2. Amount of Security (Instr. 4)   8eneficially Ow (Instr. 4)					
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.	SEC 1473 (7-02)				
Persons who respond to the collection of information contained in this form are not required to respond unless the form displays currently valid OMB control number.	a				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)					
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year) 3. Title and Securities Derivative (Instr. 4)   Date Expiration	Inderlying Conversion Ownership Beneficial Ownership				

Exercisable

Date

Title

Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

# **Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
SPLINTER MICHAEL R ONE LIBERTY PLAZA NEW YORK, NY 10006	ÂX	Â	Â	Â
Signatures				
/s/ Edward S. Knight, by power of attorney		03/10/2008		
**Signature of Reporting Person			Date	

## **Explanation of Responses:**

### No securities are beneficially owned

\* 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).

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### **Remarks:**

No securities beneficially owned.

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.