Edgar Filing: NASDAQ OMX GROUP, INC. - Form SC 13G

NASDAQ OMX GROUP, INC. Form SC 13G February 03, 2015

SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

SCHEDULE 13G

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

(AMENDMENT NO.)*

The NASDAQ OMX Group, Inc.

(Name of Issuer)

Common Stock

(Title of Class of Securities)

631103108

(CUSIP Number)

12/31/2014

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

X	Rule 13d-1(b)
O	Rule 13d-1(c)
0	Rule 13d-1(d)

^{*}The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

Page 1 of 4 Pages

CUSIP NO. 631103108	13G	Page 2 of 4 Pages			
1. NAME OF	F REPORTING PER	SONS			
Massachusetts Financial Services Company ("MFS"	")				
2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)					
a) o (b) o					
Not Applicable					
3.	SEC USE ONLY				
4. CITIZENSHIP OI	R PLACE OF ORG	ANIZATION			
Delaware					
NUMBER OF SHARES BENEFICIALLY OWNER	O BY EACH REPO	RTING PERSON WITH:			
5. SOL	E VOTING POWE	₹			
14,112,692 shares of common stock					
6. SHAR	ED VOTING POW	ER			
None					
7. SOLE I	DISPOSITIVE POW	TER			
15,208,236 shares of common stock					
8. SHARED	DISPOSITIVE PO	WER			
None					
9. AGGREGATE AMOUNT BENEFICI	IALLY OWNED BY	EACH REPORTING PERSON			
15,208,236 shares of common stock, consisting of sl non-reporting entities.	hares beneficially ov	vned by MFS and/or certain other			
10.CHECK IF THE AGGREGATE AMOUNT IN I INSTRUCTIONS)	ROW (9) EXCLUDI	ES CERTAIN SHARES (SEE	o		
Not Applicable					
11 PERCENT OF CLASS RE	EPRESENTED BY	AMOUNT IN ROW 9			

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9.1	
12.	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)
IA	

Schedul	e 13G		Page 3 of 4 Pages
ITEM 1	:	(a)	NAME OF ISSUER:
See Cov	er Page		
(b)	ADDRESS OF	F ISSUER'S PRINCIPAL I	EXECUTIVE OFFICES:
	erty Plaza rk, NY 10006		
ITEM 2	:	(a)	NAME OF PERSON FILING:
See Item	n 1 on page 2		
	(b)	ADDRESS OF PRINCIP.	AL BUSINESS OFFICE OR, IF NONE, RESIDENCE:
	ntington Avenue MA 02199		
(c)	CITIZENSHIF	> .	
See Iten	1 4 on page 2		
(d)	TITLE OF CL	ASS OF SECURITIES:	
See Cov	er Page		
(e)	CUSIP NUME	BER:	
See Cov	er Page		
ITEM 3 Rule 13	: d-1(b)(1)(ii)(E)	The person filing i	s an investment adviser in accordance with
ITEM 4	:		OWNERSHIP:
(a)	AMOUNT BE	ENEFICIALLY OWNED:	
See Iten	n 9 on page 2		
(b)	PERCENT OF	CLASS:	
See Item	n 11 on page 2		
	MBER OF SHA		TH PERSON HAS VOTING AND DISPOSITIVE POWERS

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See Items 5-8 on page 2

ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

o

Not Applicable

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ITEM 6: OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:

Not Applicable

ITEM IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE 7: SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON:

Not Applicable

ITEM 8: IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:

Not Applicable

ITEM 9: NOTICE OF DISSOLUTION OF GROUP:

Not Applicable

ITEM 10: CERTIFICATIONS:

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 3, 2015

Massachusetts Financial Services Company

/s/ DANIEL W. FINEGOLD By:

Daniel W. Finegold

Vice President and Assistant Secretary