Wedenborn Lars Form 4 August 22, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB 3235-0287

Number: January 31, Expires:

2005 Estimated average

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

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 See Instruction

2. Issuer Name and Ticker or Trading

NASDAQ, INC. [NDAQ]

Symbol

1(b).

(Print or Type Responses)

Wedenborn Lars

1. Name and Address of Reporting Person *

may continue.

					~.				(Check all applicable)				
	(Last)	(First) (Middle)	3. Date of	f Earliest Tr	ansaction							
	ONE LIBER	RTY PLAZA		(Month/D 08/18/2	-				X Director Officer (give below)		6 Owner er (specify		
		(Street)		4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
N-11-11-11-11-11-11-11-11-11-11-11-11-11			Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
	NEW YORK	X, NY 10006							Person				
	(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secui	rities Acq	uired, Disposed o	f, or Beneficia	lly Owned		
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8)	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Common Stock, par value \$0.01 per share	08/18/2017			S	3,045	D	\$ 76.13	2,996 (1)	D			
	Common Stock, par value \$0.01 per share								15,000 (2)	I	By Pension Insurance		
	Common Stock, par value \$0.01 per share								10,000 (2)	I	By Pension Insurance		

Edgar Filing: Wedenborn Lars - Form 4

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amou	ınt of	Derivative	
Security	or Exercise		any	Code	(of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative				Secur	ities	(Instr. 5)	
	Derivative				5	Securities			(Instr.	3 and 4)	
	Security			Acquired							
					((A) or					
					I	Disposed					
					C	of (D)					
					((Instr. 3,					
					4	4, and 5)					
										A	
										Amount	
							Date	Expiration	TP:41	or	
							Exercisable Date	Date	Title	Number	
				C 1	3 7 /	(A) (D)				of	
				Code	V ((A) (D)				Shares	

Reporting Owners

Penarting Owner Name / Address	Relationships
Reporting Owner Name / Address	

10% Owner Officer Other Director

Wedenborn Lars

X

Signatures

/s/ Edward S. Knight, by power of 08/22/2017 attorney

> **Signature of Reporting Person Date

Explanation of Responses:

- 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).
- (1) Represents shares or units of restricted stock granted pursuant to Nasdaq's Equity Incentive Plan, of which none are vested.
- (2) Represents shares of common stock acquired through purchases.
- (3) The shares are held by a pension insurance fund in the name of FAM AB, which is Mr. Wedenborn's employer.
- (4) The shares are held by a pension insurance fund in the name of Investor AB, which is Mr. Wedenborn's former employer.

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.

Reporting Owners 2

9. Nu Deriv Secu

SEC 1474

(9-02)

Bene Own Follo Repo Trans (Insti

ONE LIBERTY PLAZA

NEW YORK, NY 10006