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OMNICOM GROU Form 4 April 26, 2016	UP INC.									
FORM 4								OMB AF	PROVAL	
	UNITED STATES	CS SECURITIES AND EXCHANGE COM Washington, D.C. 20549				OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to Section 16. 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 Respons	ses)									
1. Name and Address OBRIEN MICHA	er Name and Ticker or Trading COM GROUP INC. [OMC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (Fi	ïrst) (Middle)	3. Date of Earliest Transaction				an applicable)				
			onth/Day/Year) Director /22/2016X_ Officer (give below) Senior VP,					e title Other (specify below) Gen. Counsel & Sec.		
(St	treet)	Filed(Month/Day/Year) Ap					Applicable Line)	ividual or Joint/Group Filing(Check able Line) orm filed by One Reporting Person		
NEW YORK, NY					ore than One Reporting					
(City) (St	tate) (Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	nsaction Date 2A. Deen th/Day/Year) Execution any (Month/E		3. Transactio Code (Instr. 8) Code V	(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)		
Common Stock, par value \$0.15 per share	2/2016		F	529 <u>(1)</u>		\$ 83.77	52,455	D		

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
OBRIEN MICHAEL J C/O OMNICOM GROUP INC. 437 MADISON AVENUE NEW YORK, NY 10022			Senior VP, Gen. Counsel & Sec.				
Signatures							

/s/ Michael J. O'Brien

04/26/2016

<u>**</u>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 withheld by the company for payment of tax liability incident to the vesting of performance restricted stock units originally granted to the reporting person on April 8, 2011.

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.