Edgar Filing: OMNICOM GROUP INC. - Form 4

OMNICOM Form 4 April 04, 20	GROUP INC.										
FORM	Л								PPROVAL		
-	UNITED STA	Washington, D.C. 20549						OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 c Form 5 obligatio may con <i>See</i> Instr 1(b).	6. r Filed pursuant scinue. Section 17(a) of	STATEMENT OF CHANGES IN 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							January 31, 2005 ted average hours per se 0.5		
(Print or Type]	Responses)										
1. Name and A DENISON	r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer						
(Last)	(First) (Middle)	3. Date of	3. Date of Earliest Transaction (Chec					k all applicable)			
C/O OMNI MADISON	ay/Year) 017				X_ Director 10% Owner Officer (give titleOther (specify below)Other (specify						
	(Street)	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
NEW YORK, NY 10022											
(City)	(State) (Zip)	Tab	le I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year)			Code (D) ear) (Instr. 8) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Stock, par value \$0.15 per share	04/01/2017		А	420.48 (1)	А	\$0	35,234.84 <u>(2)</u>	D			

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

DENISON SUSAN S C/O OMNICOM GROUP INC. Х **437 MADISON AVENUE** NEW YORK, NY 10022 Signatures /s/ Michael J. O'Brien, Attorney in Fact for Susan S.

Denison

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Relationships

10% Owner Officer

- (1) The reporting person elected to defer receipt of these shares under the terms of the Omnicom Group Inc. 2013 Incentive Award Plan.
- (2) Includes dividends on deferred shares that are reinvested in company stock, credited on January 9, 2017.

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.

04/04/2017

Other

Date