## Edgar Filing: RICE LINDA JOHNSON - Form 4

RICE LIND.	A JOHNSON										
Form 4											
July 20, 2018	8										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB AF	OMB APPROVAL		
	• • UNITEL	) STATES					NGE C	COMMISSION	OMB	3235-0287	
Check th	is box		Was	shington,	D.C. 20	549			Number:	January 31,	
if no long	10r	MENTO	E CILAN	CESINI	DENIEF		LOW	NERSHIP OF	Expires:	2005	
subject to	)		F CHAN			ICIA		VERSHIF OF	Estimated a	•	
Section 1 Form 4 o		SECURITIES							burden hou	rs per 0.5	
Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5		
obligatio	ns Section 17						•	1935 or Section	1		
may cont See Instru	inue.			vestment	•	· ·					
1(b).					-						
(Print or Type I	Responses)										
1 Name and A	ddress of Reportin	g Person *	2 1	. NT	T: -1	T		5 Relationship of	Reporting Pers	son(s) to	
1. Name and Address of Reporting Person *       2. Issuer         RICE LINDA JOHNSON       Symbol				r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			•	COM GRO	DUP INC	1 [0]	MC1				
(Lest)	(First)	(Middle)					uiej	(Checl	k all applicable	)	
(Last)	(First)	(Midule)	(Month/D	Earliest Tr	ansaction			X Director	10%	Owner	
C/O OMNICON GROUP INC., 437 07/19/20				-				Officer (give title Other (specify			
MADISON			0111112	010				below)	below)		
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or Jo	int/Group Filin	g(Check	
			Ionth/Day/Year)				Applicable Line)				
								_X_Form filed by C			
NEW YOR	K, NY 10022							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	ate 2A. Dee	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution Dat any							Securities	Form: Direct		
(Instr. 3)		Day/Year)	Code (Instr. 3, 4 and 5) av/Year) (Instr. 8)				Beneficially Owned		Beneficial Ownership		
		(monuly)	Duy, I cui)	(1150.0)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
~				Code V	Amount	(D)	Price	(Instr. 5 and 4)			
Common							¢				
Stock, par	07/19/2018			S	475	D	ን 70.02	7,966.07	D		
value \$0.15 per share							70.02				
per snare											

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)	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	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**

<b>Reporting Owner Name / Address</b>		Relationsh		
	Director	10% Owner	Officer	Other
RICE LINDA JOHNSON C/O OMNICON GROUP INC. 437 MADISON AVENUE NEW YORK, NY 10022	Х			
Signatures				
/s/ Michael J.O'Brien, Attorney Rice	in Fact for	r Linda John	son	07/20/2018
<u>**</u> Signature of Repor		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).

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.