#### **OMNICOM GROUP INC**

Form 4 October 03, 2007

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

(City)

(State)

(Zip)

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading ROUBOS GARY L Issuer Symbol OMNICOM GROUP INC [OMC] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction X\_ Director (Month/Day/Year) 10% Owner \_ Other (specify Officer (give title C/O OMNICOM GROUP INC., 437 10/01/2007 below) MADISON AVENUE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting NEW YORK, NY 10022

|     | (City)                                  | (State) (Z                              | Zip) Table  | I - Non-De                             | rivative S | ecurit           | ties Aco | quired, Disposed o   | of, or Beneficial  | ly Owned  |
|-----|---|---|---|--|------------|------------------|----------|--|--|---|
|     | 1.Title of<br>Security<br>(Instr. 3)    | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transactio<br>Code<br>(Instr. 8) | 1 '        |                  | )        | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|     | Common                                  |   |   | Code V                                 | Amount     | (A)<br>or<br>(D) | Price    | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                   |  |   |
| Sto | Stock, par<br>value \$0.15<br>per share | 10/01/2007                              |   | A                                      | 520        | A                | \$0      | 23,204   | D  |   |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

### Edgar Filing: OMNICOM GROUP INC - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) |                                   |                     | ate             | 7. Title<br>Amoun<br>Under | int of<br>lying<br>ities | 8. Price of Derivative Security (Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene |
|---|---|---|---|---------------------------------------|-----------------------------------|---------------------|-----------------|----------------------------|--------------------------|--|---------------------------------|
|   | Derivative<br>Security                      |   |   |                                       | Securities<br>Acquired            |                     |                 | (Instr.                    | 3 and 4)                 |  | Owne<br>Follo                   |
|   |   |   |   |                                       | (A) or<br>Disposed                |                     |                 |                            |                          |  | Repo<br>Trans                   |
|   |   |   |   |                                       | of (D)<br>(Instr. 3,<br>4, and 5) |                     |                 |                            |                          |  | (Instr                          |
|   |   |   |   |                                       | 4, and 3)                         |                     |                 |                            | Amount                   |  |                                 |
|   |   |   |   |                                       |                                   | Date<br>Exercisable | Expiration Date | Title                      | or<br>Number<br>of       |  |                                 |
|   |   |   |   | Code V                                | (A) (D)                           |                     |                 |                            | Shares                   |  |                                 |

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

ROUBOS GARY L C/O OMNICOM GROUP INC. 437 MADISON AVENUE NEW YORK, NY 10022

X

## **Signatures**

/s/ Michael J. O'Brien, Attorney in Fact for Gary L. Roubos

10/03/2007

\*\*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).

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.

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