COLEMAN LEONARD S JR

Form 4 October 03, 2017

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

Expires:

5 D 1 (* 1 * CD - (* D - () (

January 31, 2005

0.5

Estimated average

burden hours per response...

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

obligations

may continue.

Check this box

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

1(b).

per share

(Print or Type Responses)

1 Name and Address of Departing D

1. Name and Address of Reporting Person <u>*</u> COLEMAN LEONARD S JR			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
			OMNICOM GROUP INC. [OMC]					(Check all applicable)			
(Last)	(First) (M			Earliest Transaction							
C/O OMNICOM CROUDING 427			(Month/Day/Year)					X Director Officer (give		6 Owner er (specify	
C/O OMNICOM GROUP INC., 437 MADISON AVENUE			10/01/2017					below)	below)	er (speerry	
	(Street)	•	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
	Filed(Month/Day/Year)					Applicable Line)					
NEW YORK							_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deem	ned	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	· · · · · · · · · · · · · · · · · · ·		Date, if	nAcquired (A) or			Securities	Form: Direct	Indirect		
(Instr. 3)	any (Month		ay/Year)	Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(Month) D	ayr I car)	(msu. o)	(msu: 5, rund 5)			Following	(Instr. 4)		
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(IIISII. 3 aliu 4)			
Common											
Stock, par value \$0.15	10/01/2017			A	489	A	\$0	25,988.96 (1)	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)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration D		7. Title at Amount of		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(monda, Day, Teal)	(Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/		Underlyin Securities (Instr. 3 a	ng s	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	nount umber uares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

COLEMAN LEONARD S JR C/O OMNICOM GROUP INC. 437 MADISON AVENUE NEW YORK, NY 10022

X

Signatures

/s/ Michael J. O'Brien, Attorney in Fact for Leonard S. Coleman

10/03/2017

**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) Includes dividends on deferred shares that are reinvested in company stock, credited on July 12, 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.

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