#### **OMNICOM GROUP INC**

Form 4 October 04, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

3235-0287 Number: January 31,

Expires:

2005 Estimated average

\_ Other (specify

7. Nature of Indirect Beneficial Ownership (Instr. 4)

burden hours per response... 0.5

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 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

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person \* HENNING MICHAEL A

2. Issuer Name and Ticker or Trading Symbol

OMNICOM GROUP INC [OMC]

5. Relationship of Reporting Person(s) to

Issuer

below)

(Last)

(City)

(First)

(Street)

(State)

(Middle)

(Zip)

3. Date of Earliest Transaction

(Month/Day/Year) 10/01/2005

X\_ Director 10% Owner

Officer (give title

(Check all applicable)

C/O OMNICOM GROUP INC., 437

MADISON AVENUE

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Filed(Month/Day/Year)

NEW YORK, NY 10022

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

4 C ... 4 . 1 . 5 A . . . C

| 1.1itle of                           | 2. Transaction Date | 2A. Deemed 3. 4. Se |                               |               | ies Ac              | quired    | 5. Amount of                                   | 6. Ownership |  |
|--------------------------------------|---------------------|---------------------|-------------------------------|---------------|---------------------|-----------|--|--------------|--|
| Security                             | (Month/Day/Year)    | Execution Date, if  | Transaction(A) or Disposed of |               |                     |           | Securities                                     | Form: Direct |  |
| (Instr. 3)                           |                     | any                 | Code (D)                      |               |                     |           | Beneficially                                   | (D) or       |  |
|                                      |                     | (Month/Day/Year)    | (Instr. 8)                    | (Instr. 3, 4  | (Instr. 3, 4 and 5) |           | Owned  | Indirect (I) |  |
|                                      |                     |                     |                               |               |                     | Following | (Instr. 4)                                     |              |  |
|                                      |                     |                     | Code V                        | Amount        | (A)<br>or<br>(D)    | Price     | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |              |  |
| Common<br>Stock, Par<br>Value \$0.15 | 10/01/2005          |                     | A                             | 209.69<br>(1) | A                   | \$0       | 4,951.6  | D            |  |
| Common<br>Stock, Par<br>Value \$0.15 | 10/01/2005          |                     | A                             | 179.74<br>(2) | A                   | \$0       | 5,137.23 <u>(3)</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 **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.         | 5.         | 6. Date Exerc | cisable and | 7. Title   | and      | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|-------------|------------|----------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | onNumber   | Expiration D  | ate         | Amoun      | t of     | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/   | Year)       | Underly    | ying     | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e             |             | Securit    | ies      | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |               |             | (Instr. 3  | 3 and 4) |             | Own    |
|             | Security    |                     |                    |            | Acquired   |               |             |            |          |             | Follo  |
|             | •           |                     |                    |            | (A) or     |               |             |            |          |             | Repo   |
|             |             |                     |                    |            | Disposed   |               |             |            |          |             | Trans  |
|             |             |                     |                    |            | of (D)     |               |             |            |          |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |               |             |            |          |             |        |
|             |             |                     |                    |            | 4, and 5)  |               |             |            |          |             |        |
|             |             |                     |                    |            |            |               |             |            | A manuat |             |        |
|             |             |                     |                    |            |            |               |             |            | Amount   |             |        |
|             |             |                     |                    |            |            | Date          | Expiration  |            | Or       |             |        |
|             |             |                     |                    |            |            | Exercisable   | Date        | Title Numl | Number   |             |        |
|             |             |                     |                    | C + V      | (A) (D)    |               |             |            |          |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |               |             |            | Shares   |             |        |

# **Reporting Owners**

Relationships Reporting Owner Name / Address 10% Owner Officer Other Director

HENNING MICHAEL A C/O OMNICOM GROUP INC. **437 MADISON AVENUE** NEW YORK, NY 10022



## **Signatures**

Michael J. O'Brien, Attorney in Fact for Reporting 10/03/2005 Person

> \*\*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) The reporting person elected to defer receipt of these shares under the terms of the Omnicom Group Inc. Director Equity Plan.
- The reporting person elected to defer receipt of these shares, which represent a quarterly payment of his annual retainer, under the terms **(2)** of the Omnicom Group Inc. Director Equity Plan.
- (3) Includes dividends on deferred shares that are reinvested in company stock, credited on July 7, 2005.

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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