OMNICOM GROUP INC

Form 4 March 29, 2007

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

SECURITIES

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

See Instruction 1(b).

value \$0.15

per share

(Print or Type Responses)

1. Name and Address of Reporting Person *

ANGEL ASTRO PHILIP I

(Last) (First) (Middle) C/O OMNICOM GROUP INC, 437 MADISON AVE				Symbol OMNICOM GROUP INC [OMC]				IC]	(Check all applicable)				
				3. Date of Earliest Transaction (Month/Day/Year) 03/27/2007					Director 10% Owner X Officer (give title Other (specify below) Sr. VP Finance/Controller				
(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	a, NY 10022						Form filed by More than One Reporting Person					
	(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned		
	1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executi any	emed ion Date, if /Day/Year)	3. Transaction Code (Instr. 8)	4. SecurionAcquired Disposed (Instr. 3,	l (A) of (D) 4 and (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Common Stock, par value \$0.15 per share	03/27/2007			A	5,000 (1)	A	\$ 0	61,578	D			
	Common Stock par								519.61	ī	By 401(K)		

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)

Plan

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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 a	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber Expiration Date		Amount	of	Derivative	Deriv	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	;		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities				and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									mount		
						Date	Expiration Date	or Title Number			
						Exercisable					
				C 1 W	(A) (D)			of			
				Code V	(A) (D)			S	hares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

ANGELASTRO PHILIP J C/O OMNICOM GROUP INC 437 MADISON AVE NEW YORK, NY 10022

Sr. VP Finance/Controller

Signatures

/s/ Michael J. O'Brien, Attorney in Fact for Philip Angelastro

03/29/2007

**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).
- (1) These shares were acquired by the reporting person as a grant of restricted stock which will vest 20% each year for the next five years.

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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