Edgar Filing: SACHS VALERIE GENTILE - Form 4

SACHS VAI Form 4 March 05, 20	LERIE GENTIL	Æ											
FORM	1									-	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287			
if no long subject to Section 10 Form 4 or Form 5	obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section									Image: Second system January 31, 2005 Estimated average burden hours per response 0.5			
See Instru		30(h)	of the Inv	vestment	Com	pany	/ Act	of 19	40				
1(b).													
(Print or Type R	Responses)												
1. Name and Address of Reporting Person <u>*</u> SACHS VALERIE GENTILE			Symbol	-					5. Relationship of Reporting Person(s) to Issuer				
	OM GROUP INC [OMG]						(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction							100			
1500 KEY T SQUARE	(Month/Day/Year) 03/03/2010						Director 10% Owner X Officer (give title Other (specify below) below) VP, Gen. Counsel & Secretary						
				ndment, Da th/Day/Yea		ginal			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
CLEVELAN	ND, OH 44114-1	1221							Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-I	Deriva	tive S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executi any	on Date, if	Code (Instr. 8)	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (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	03/03/2010	<u>(1)</u>		D	128		(D) D	Price (<u>1)</u>	36,963	D			

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)

(Instr. 3)	Price of	(Me	onth/Day/Year)	(Instr. 8)	Derivativ	e	,	Secu	rities	(Instr. 5)	Bene
(1154.5)	Derivative		(inter Duy, 1001)	(11001.0)	Securities				r. 3 and 4)	(1104.0)	Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3, 4, and 5)						
					+, and <i>J</i>)						
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date	THE	of		
				Code V	(A) (D)				Shares		
Dene	uting Ournara										
керо	rting Owners										
Reportin	g Owner Name / Address			Relatio	onships						
Reportin	g Owner Ivalle / Audress	Director	10% Owner	Officer			Other	r			
		Director	1070 Owner	onicer			Other				
SACHS V	VALERIE GENTILE										
1500 KE	Y TOWER										
127 PUB	LIC SOLIARE	VP, Gen. Counsel & Secretary									

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4.

Code

5.

of

TransactionNumber

6. Date Exercisable and

Expiration Date

03/05/2010

Date

(Month/Day/Year)

7. Title and

Amount of

Underlying

8. Price of

Derivative

Security

9. Nt

Deriv

Secu

Reporting Owners

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

**Signature of Reporting Person

/s/ Valerie Gentile Sachs, by Cipriano S. Beredo, as

Explanation of Responses:

3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if

any

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) This field is not applicable.

127 PUBLIC SQUARE

Signatures

attorney-in-fact

CLEVELAND, OH 44114-1221

1. Title of 2.

Security

Derivative Conversion

or Exercise

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.