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SCAMINAC	E JOSEPH M										
Form 4											
February 09,	2007										
FORM	4					~~~		~~~~	OMB A	PPROVAL	
	UNITE	D STATES		ITIES A. hington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check thi									Expires:	January 31,	
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERS						NERSHIP OF	Estimated a	2005 average			
Section 1	6.			SECUR	ITIES				burden hou	0	
Form 4 or Form 5			a 1.		a				response	0.5	
obligation	• •							ge Act of 1934,			
may cont	inue. Section 1		of the Inv	•	•	- ·		of 1935 or Section	n		
See Instru 1(b).	iction	30(II)		vestment	Compan	y Aci	. 01 19	40			
1(0).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> SCAMINACE JOSEPH M			2. Issuer Name and Ticker or Trading Symbol OM GROUP INC [OMG]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction						
1500 12532 7			(Month/D	•				X_ Director X_ Officer (give		b Owner er (specify	
SQUARE	TOWER, 127 F	UBLIC	02/07/20)07				below)	below)	er (speeny	
SQUARE								Chief I	Executive Office	cer	
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year)				Applicable Line))		
CI EVELAN	ND, OH 44114							_X_Form filed by C Form filed by M	1 0		
CLEVELAI	ND, 011 44114							Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	, or Beneficia	lly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	on Date, if TransactionAcquired (A) or						Form: Direct	Indirect		
(Instr. 3)	any (M		/Day/Year)	Code (Instr. 8)	Disposed of (D) (Instr. 3, 4 and 5)			•		Beneficial Ownership	
		(INIOIIIII	(Day/ I Cal)	(111501.0)	(1150. 5,	4 anu	5)		(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price	(mou. 5 and 4)			
Common	02/07/2007	(1)		А	7,400	А	\$0	211,494	D		

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

Stock

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)

(2)

I S	. Title of Derivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and -	Securities
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
	Stock Option	\$ 51.155	02/07/2007	<u>(1)</u>	А	45,250	02/07/2008(3)	02/07/2017	Common Stock	45,250

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SCAMINACE JOSEPH M 1500 KEY TOWER 127 PUBLIC SQUARE CLEVELAND, OH 44114	Х		Chief Executive Officer				

Signatures

/s/ Joseph M. Scaminace by Cipriano S. Beredo, as attorney-in-fact	02/09/2007
**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) This field is not applicable.
- (2) Subject to vesting on February 7, 2010.
- (3) These options vest in three equal installments on February 7 of the years 2008, 2009 and 2010.

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.