## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	ROVAL
	OMB Number:	3235-0362
	Estimated average I	burden
- 1	hours per response	1.0

Form 3 Holdings Reported.

Form 4	1 Transactions I	Reported.	Filed			he Securities Exch stment Company A							
Name and Address of Reporting Person*     CARROLL CHRISTOPHER F			2. Issuer Name and Ticker or Trading Symbol INTERPUBLIC GROUP OF COMPANIES, INC. [ IPG ]				5. Relationship of Reporting Pe (Check all applicable) Director  Officer (give title			erson(s) to Issuer  10% Owner Other (specify			
(Last) IPG 909	(Fir	st) (	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2020					SVP, Controller & CAO				
(Street) NEW Y(	ORK NY		1.0022 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)				· ·	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Table	I - Non-Deriva	ative Securiti	ies Acquir	ed, Disposed	l of, o	r Benefic	ially Own	ed			
Dat		2. Transaction	2A. Deemed	3.	4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)		A) or Dispose	5. Amount of Securities Beneficially Owned at end of		Ownership Form: Direct		7. Nature of Indirect Beneficial	
1. Title 01 5	county (mount	s) 	Date (Month/Day/Year)	Execution Date, if any	Transaction Code (Instr.	Of (D) (Instr. 3, 4			Benefici	es ally	Ownershi Form: Dir	Indi	irect neficial
1. Title Of S	county (mount	•)	Date		Transaction	Of (D) (Instr. 3, 4		Price	Benefici Owned a Issuer's	es ally at end of	Ownershi	Indi ect Ber Ow	irect
Common			Date	if any	Transaction Code (Instr.	Of (D) (Instr. 3, 4	(A) or	Price \$15.11	Benefici Owned a Issuer's Year (Ins 4)	es ally at end of Fiscal	Ownershi Form: Dire (D) or Indirect (I)	Indi ect Ber Ow	irect neficial nership
		,	Date (Month/Day/Year)  12/31/2020  ble II - Derivat	if any (Month/Day/Year)	Transaction Code (Instr. 8)	Of (D) (Instr. 3, 4  Amount  366(1)	(A) or (D)  A  Of, or	\$15.11 Beneficia	Benefici Owned a Issuer's Year (Ins 4) 98,7	es ally at end of Fiscal str. 3 and	Ownershi Form: Dire (D) or Indirect (I) (Instr. 4)	Indi ect Ber Ow	irect neficial nership

## **Explanation of Responses:**

- 1. Total shares acquired through 12/31/2020 via the Employer Stock Purchase Plan.
- 2. Includes restricted shares that are subject to forfeiture under certain circumstances.

/s/Robert Dobson POA for

Amount or Number of Shares

Christopher Carroll

Title

01/06/2021

\*\* Signature of Reporting Person

Date

(Instr. 4)

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

- $^{\star}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

of (D) (Instr. 3, 4 and 5)

(A) (D)

Date

Expiration