

FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0362
Estimated average burden hours per response:	1.0

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

- Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
- Form 3 Holdings Reported.
- Form 4 Transactions Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>CHILDERS CINDY K</u> (Last) (First) (Middle) <u>1 INFORMATION WAY</u> (Street) <u>LITTLE ROCK AR 72202</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>ACXIOM CORP [ACXM]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Org Development Leader</u>
	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) <u>03/31/2008</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Common Stock, \$.10 Par Value	02/01/2008		J	8.8707 ⁽¹⁾	A	\$9.0185	15,605.7181	D	
Common Stock, \$.10 Par Value	03/03/2008		J	7.405 ⁽¹⁾	A	\$10.8035	15,613.1231	D	
Common Stock, \$.10 Par Value	03/17/2008		J	3.2081 ⁽²⁾	A	\$10.9816	15,616.3312	D	
Common Stock, \$.10 Par Value	03/31/2008		J	426.73 ⁽³⁾	A	\$0	915.8537	I	by Managed Account 1
Common Stock, \$.10 Par Value							1,737.7129	I	by Managed Account 2

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

1. 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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date					

Explanation of Responses:

- These shares were acquired through participation in the Company's 16b-3 qualified Employee Stock Purchase Plan.
- The registrant's Board of Directors declared a \$.05 per share quarterly cash dividend. When the dividend was paid into the reporting person's Stock Purchase Plan account, it was automatically reinvested in shares of Common Stock of the registrant.
- These shares were acquired during fiscal 2008 under the Company's 401(k) Retirement Savings Plan.

By: Catherine L. Hughes,
Attorney-in-Fact For: Cindy K. 05/14/2008
Childers

** Signature of Reporting Person Date

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

* 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.