

**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).

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

<b>1. Name and Address of Reporting Person*</b> <u>JENSON WARREN</u>  (Last) (First) (Middle) <u>ACXIOM CORPORATION</u> <u>601 E. THIRD STREET</u>  (Street) <u>LITTLE ROCK AR 72201</u>  (City) (State) (Zip)	<b>2. Issuer Name and Ticker or Trading Symbol</b> <u>ACXIOM CORP [ ACXM ]</u>	<b>5. Relationship of Reporting Person(s) to Issuer</b> (Check all applicable)  Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Chief Financial Officer &amp; EVP</u>
	<b>3. Date of Earliest Transaction (Month/Day/Year)</b> <u>05/24/2016</u>	
<b>4. If Amendment, Date of Original Filed (Month/Day/Year)</b>		

**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 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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, \$.10 Par Value	05/24/2016		A		35,897 <sup>(1)</sup>	A	\$0.0	379,691	D	
Common Stock, \$.10 Par Value	05/24/2016		A		35,897 <sup>(2)</sup>	A	\$0.0	415,588	D	
Common Stock, \$.10 Par Value								1,558.7312	I	by Managed Account 1
Common Stock, \$.10 Par Value								490.0604	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)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

**Explanation of Responses:**

- This is a grant of restricted stock units. Each restricted stock unit represents a contingent right to receive one share of the registrant's common stock. Vesting will begin on May 24, 2017 with 25% of the total becoming vested on that date and 25% each 12 months thereafter until 100% vested, contingent upon the reporting person's continued employment with the registrant.
- This is a grant of performance units. Each performance unit represents a contingent right to receive one share of the registrant's common stock. Vesting will occur subsequent to the attainment of certain performance criteria approved by the Compensation Committee of the registrant's Board of Directors for the performance period ending March 31, 2019, contingent upon the reporting person's continued employment with the registrant.

By: Catherine L. Hughes,  
Attorney-in-Fact For: Warren 05/26/2016  
C. Jenson

\*\* 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.