FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

| 1. Name and Address of Reporting Person* MORGAN CHARLES D | | | | | | | 2. Issuer Name and Ticker or Trading Symbol ACXIOM CORP [ACXM] | | | | | | | | 5. Relationship of Reportir (Check all applicable) X Director | | 10% Owner | |
|--|--|--------------------------|---------|-------------|--|---|---|--|---------------|----------------------------------|---|--|---|---|--|--|--------------|-------------------------------|
| (Last) (First) (Middle) ACXIOM CORPORATION 1 INFORMATION WAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/19/2006 | | | | | | | | | X Officer (give title below) Other (specify below) President/Company Leader | | | |
| (Street) LITTLE ROCK AR 72202 | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (Si | | Zip) | | <u> </u> | | | | | | | | | | | | | |
| Date | | | | 2. Transact | ion | 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities A Disposed Of (| 5. Ar Secu Bene Own | | mount of urities eficially led Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | Code | v | Amount | (A) o | Pric | e e | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | | |
| Common | 01/19/2006 | | | | | J | | 977.6692(1) | A | \$2 | \$20.8046 | | 64.1953 | I | by Managed Account 2 | | | |
| Common | Stock, \$.10 | Par Value ⁽²⁾ | | | | | | | | | | | | | 3,2 | 211,525 | D | |
| Common Stock, \$.10 Par Value | | | | | | | | | | | | | | | | 1,628 | I | by Family Ltd Prtshp |
| Common Stock, \$.10 Par Value | | | | | | | | | | | | | | | 52,3 | 370.8694 | I | by Managed Account 1 |
| Common Stock, \$.10 Par Value | | | | | | | | | | | | | | | 03,195 | I | by Spouse | |
| | | Ta | able II | | | | | | | | posed of, o convertibl | | | | wned | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | | ransaction of Code (Instr. Derivative | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Deriv Secui (Instr | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amou or Numb of Share | er | | | | |

Explanation of Responses:

1. On January 19, 2006, the issuer was notified by the administrator of the Acxiom Corporation Non-Qualified Deferred Compensation Plan (the "Plan") (a non-tax-conditioned supplemental retirement plan) that these shares of the issuer's common stock had been contributed to the account of the reporting person for the year of 2005 as the issuer's matching contribution made in accordance with the terms of the Plan. \$20.80 was the average share price for this period.

By: Catherine L. Hughes, 01/23/2006 Attorney-in-Fact For: Charles

D. Morgan

** Signature of Reporting Person Date

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

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.

^{2.} This option has a tandem tax withholding right.

^{*} 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).