FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* KOKICH CLARK M | | | | | | 2. Issuer Name and Ticker or Trading Symbol ACXIOM CORP [ACXM] | | | | | | | | | | ationship of Reporting all applicable) Director | | g Persor | 10% Owner | |
|--|--|--|---|--------|-----------------------------|--|---------|---|--------------------------------------|---|---------------------|--|-----------------|-------|---|---|---|---|---|--|
| | ACXIOM CORPORATION | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/14/2018 | | | | | | | | | | Office below | er (give title w) | | Other (specify below) | |
| 301 E. DAVE WARD DRIVE | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | Street) CONWAY AR 72032 | | | | , | | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Non | -Deriv | ative | Se | curitie | s Acc | uired, | Dis | posed o | f, oı | r Bene | efici | ally | Owne | ed | | | |
| Date | | | | | ate E Ionth/Day/Year) ii | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 4 and Secu Bene | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | | (A) or (D) | Pric | e | Transaction(s) (Instr. 3 and 4) | | | | (11341. 4) |
| COMMON STOCK, \$.10 PAR VALUE 02/14/ | | | | | 4/2018 | | | | | | 1,159 | (1) | A | \$ | 0 | 85,202 | | Г |) | |
| | | Та | ble II - D (e | | | | | | | | sed of, onvertib | | | | | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | ate, Transactio | | n of | | 6. Date E: Expiration (Month/D | n Date | е | le and 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4) Amou | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owr Forr Dire or Ir (I) (I | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | | (A) | | Date Evercisal | | Expiration | Title | or Nun of | nber | | | | | | |

Explanation of Responses:

1. These shares were issued to the reporting person as part of his compensation for service as a director of the registrant.

/s/ By: Catherine L. Hughes, Attorney-in-Fact For: Clark M. 02/16/2018 **Kokich**

** 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.