1.

(S

(City)

FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OWNERSHIP

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

Washington,	D.C.	20549	
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OMB APPROVAL OMB Number: ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

Estimated average burden hours per response: 1.0

Form filed by More than One Reporting

11. Nature

Person

)	Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

(State)

Form 3 Holdings Reported

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 Form 4 Transactions Reported. or Section 30(h) of the Investment Company Act of 1940

(Zip)

1. Name and Address of Reporting F	erson*	2. Issuer Name and Ticker or Trading Symbol ACXIOM CORP [ACXM]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
KLINE RODGER S		indian dotal	X	Director	10% Owner		
(Last) (First) ACXIOM CORPORATION 601 E. 3RD STREET	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 03/31/2008	X	Officer (give title below) Chief Administra	Other (specify below)		
(Street) LITTLE ROCK AR	72201	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Fili Form filed by One Re			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 4. Securities Acquired (A) or Disposed Of 5. Amount of 7. Nature of **Execution Date** Transaction (D) (Instr. 3, 4 and 5) Securities Ownership Indirect Beneficial Form: Direct (D) or (Month/Day/Year) Code (Instr. 8) Beneficially (Month/Day/Year) Owned at end of Ownership Issuer's Fiscal Indirect (I) (Instr. 4) (A) or (D) Price Year (Instr. 3 and Amount (Instr. 4) Common Stock, \$.10 Par Value 02/01/2008 452.7737(1) A \$9.0185 1,986,802.4271 D 03/03/2008 377.9645(1) \$10.8035 Common Stock, \$.10 Par Value J Α 1,987,180.3916 D \$10.9816 Common Stock, \$.10 Par Value T 170.6748(2) Α 1,987,351.0664 D 03/17/2008 by 779.4211(3) Common Stock, \$.10 Par Value 03/31/2008 J A \$0 33,734.385 T Managed Account 1 by Common Stock, \$.10 Par Value 5,171.8797 T Managed Account 2

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 3A. Deemed 4. 5. Number | 6. Date Exercisable and | 7. Title and 8. Price of 9. Number of

Derivative Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)			Expiration Date (Month/Day/Year)		Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D)	of Indirect Beneficial Ownership (Instr. 4)
				(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Title of

- 1. These shares were acquired through participation in the Company's 16b-3 qualified Employee Stock Purchase Plan.
- 2. 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.
- 3. These shares were acquired during fiscal 2008 under the Company's 401(k) Retirement Savings Plan.

By: Catherine L. Hughes,

Attorney-in-Fact For: Rodger 05/14/2008

S. Kline

** 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).

3. Transaction

** 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.