

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

1. Name and Address of Reporting Person* <u>VA PARTNERS LLC</u> (Last) (First) (Middle) 435 PACIFIC AVENUE FOURTH FLOOR (Street) SAN FRANCISCO CA 94133 (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 <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 04/27/2005	
	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 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, par value \$0.10 per share	04/27/2005		P		50,000	A	\$18.93	9,612,526	I	See footnote ⁽¹⁾⁽²⁾
Common Stock, par value \$0.10 per share	04/28/2005		P		100,000	A	\$18.82	9,712,526	I	See footnote ⁽¹⁾⁽²⁾
Common Stock, par value \$0.10 per share	04/29/2005		P		75,000	A	\$18.78	9,787,526	I	See footnote ⁽¹⁾⁽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		Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person*
VA PARTNERS LLC
 (Last) (First) (Middle)
 435 PACIFIC AVENUE
 FOURTH FLOOR
 (Street)
 SAN FRANCISCO CA 94133
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
UBBEN JEFFREY W
 (Last) (First) (Middle)
 435 PACIFIC AVENUE, FOURTH FLOOR
 (Street)
 SAN FRANCISCO CA 94133
 (City) (State) (Zip)

1. Name and Address of Reporting Person*

KAMIN PETER H

(Last) (First) (Middle)
TWO INTERNATIONAL PLACE, 25TH FLOOR

(Street)
BOSTON MA 02110

(City) (State) (Zip)

Explanation of Responses:

1. As General Partner of ValueAct Capital Master Fund, L.P. and ValueAct Capital Partners Co-Investors, L.P.
2. The reported stock is owned directly by ValueAct Capital Master Fund, L.P., and ValueAct Capital Partners Co-Investors, L.P. and indirectly by VA Partners, L.L.C. as general partner of ValueAct Capital Master Fund, L.P. and ValueAct Capital Partners Co-Investors, L.P. Jeffrey W. Ubben, Peter H. Kamin and George F. Hamel are Managing Members of VA Partners, L.L.C., the General Partner. The reporting persons disclaim beneficial ownership of the reported stock except to the extent of their pecuniary interest therein.

Remarks:

Joint Filer Information Name: ValueAct Capital Master Fund, L.P. Address: 435 Pacific Avenue, 4th Floor, San Francisco, CA 94133 Designated Filer: VA Partners, L.L.C. Issuer and Ticker Symbol: Acxiom Corporation (ACXM) Date of Event Requiring Statement: April 27, 2005 Name: ValueAct Capital Partners Co-Investors, L.P. Address: 435 Pacific Avenue, 4th Floor, San Francisco, CA 94133 Designated Filer: VA Partners, L.L.C. Issuer and Ticker Symbol: Acxiom Corporation (ACXM) Date of Event Requiring Statement: April 27, 2005 Name: Jeffrey W. Ubben Address: 435 Pacific Avenue, 4th Floor, San Francisco, CA 94133 Designated Filer: VA Partners, L.L.C. Issuer and Ticker Symbol: Acxiom Corporation (ACXM) Date of Event Requiring Statement: April 27, 2005 Name: George F. Hamel, Jr. Address: 435 Pacific Avenue, 4th Floor, San Francisco, CA 94133 Designated Filer: VA Partners, L.L.C. Issuer and Ticker Symbol: Acxiom Corporation (ACXM) Date of Event Requiring Statement: April 27, 2005 Name: Peter H. Kamin Address: Two International Place, 25th Floor, Boston, MA 02110 Designated Filer: VA Partners, L.L.C. Issuer and Ticker Symbol: Acxiom Corporation (ACXM) Date of Event Requiring Statement: April 27, 2005

VALUEACT CAPITAL
MASTER FUND, L.P., BY VA
PARTNERS, L.L.C., ITS 04/29/2005
GENERAL PARTNER By: /s/
George F. Hamel, Jr. Managing
Member

VALUEACT CAPITAL
PARTNERS CO-INVESTORS,
L.P., BY VA PARTNERS, 04/29/2005
L.L.C., ITS GENERAL
PARTNER By: /s/ George F.
Hamel, Jr. Managing Member

VA PARTNERS, L.L.C. By: /s/
George F. Hamel, Jr. Managing 04/29/2005
Member

By: /s/ Jeffrey W. Ubben 04/29/2005

By: /s/ George F. Hamel, Jr. 04/29/2005

By: /s/ Peter H. Kamin 04/29/2005

** 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.