## Edgar Filing: HODGES L LEE - Form 4

if no lo subject Sectior Form 4 Form 5 obligat may co	, 2005 <b>M 4</b> UNITED this box nger to 16. or 5 5 5 5 5 5 5 5 5 5 5 5 5	MENT OF Irsuant to S I(a) of the F	W CHA ection Public V	ashingto NGES II SECU 16(a) of Utility Ho	n, D.C. 205 N BENEFI JRITIES the Securiti	5 <b>49</b> CIAI es Ex pany	C OWNI cchange A Act of 1	MMISSION ERSHIP OF Act of 1934, 935 or Section	OMB AP OMB Number: Expires: Estimated av burden hours response	•			
(Print or Type	e Responses)												
HODGES L LEE S								ssuer					
			3. Date of Earliest Transaction					(Check all applicable)					
(Mont ACXIOM CORPORATION, 1 01/19 INFORMATION WAY				/Day/Year) /2005	)			elow)	C Officer (give title Other (specify				
				Month/Day/Year) App _X				pplicable Line) X_ Form filed by Or	Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(State)	(Zip)	Та	ble I - Non	-Derivative S	ecurit	ties Acqui	red, Disposed of,	or Beneficially	y Owned			
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired (A) or TransactionDisposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock, \$.10 Par Value	01/19/2005			J	364.2559 ( <u>1)</u>	A	\$ 22.921	3 2,168.9292	I	by Managed Account 2			
Common Stock, \$.10 Par Value								13,269.983	D				
Common Stock, \$.10 Par Value								1,243.0164	I	by Managed Account 1			

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

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 control number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration		or Norschau		
						Exercisable	Date		Number		
				Cole V	$(\Lambda)$ (D)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer		Other			
HODGES L LEE ACXIOM CORPORATION 1 INFORMATION WAY LITTLE ROCK, AR 72202			Chief Operat	ions Leader				
Signatures								
By: Catherine L. Hughes, Attor Hodges	rney-in-Fa	act For: L. L	ee	01/20/2005				

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* 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).

On January 19, 2005, 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

(1) the real (a non-tax-containing supplemental remember plan) that these shares of the issuer's contribution stock had been contributed to the account of the reporting person for the year of 2004 as the issuer's matching contribution made in accordance with the terms of the Plan. \$22.92 was the average share price for this period.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Date