

AFFILIATED COMPUTER SERVICES INC
 Form 4
 July 09, 2008

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2005
 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 HUERTA MICHAEL P

2. Issuer Name and Ticker or Trading Symbol
 AFFILIATED COMPUTER SERVICES INC [ACS]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
 1800 M STREET NW SUITE 800
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 05/22/2008

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
 Executive Vice President

WASHINGTON, DC 20036

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 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 Ownership (Instr. 4)
Class A Common Stock \$0.01 par value				(A) or (D) Price	232 ⁽¹⁾	I	401kPlan

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.

SEC 1474 (9-02)

Edgar Filing: AFFILIATED COMPUTER SERVICES INC - Form 4

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 Underlying Securities (Instr. 3 and 4)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 53.76	05/22/2008		A	50,000	<u>(2)</u> 05/22/2018	05/22/2018	Class A Common	50,000
Employee Stock Option (Right to Buy)	\$ 50.29					<u>(2)</u> 08/15/2017	08/15/2017	Class A Common	105,000
Employee Stock Option (Right to Buy)	\$ 49.62					<u>(2)</u> 08/15/2016	08/15/2016	Class A Common	50,000
Employee Stock Option (Right to Buy)	\$ 52.99					<u>(2)</u> 09/13/2015	09/13/2015	Class A Common	20,000
Employee Stock Option (Right to Buy)	\$ 51.9					<u>(2)</u> 07/30/2014	07/30/2014	Class A Common	10,000
Employee Stock Option (Right to Buy)	\$ 44.1					<u>(4)</u> 07/21/2013	07/21/2013	Class A Common	17,000
Employee Stock Option (Right to Buy)	\$ 37.57					<u>(4)</u> 07/23/2012	07/23/2012	Class A Common	10,000

Edgar Filing: AFFILIATED COMPUTER SERVICES INC - Form 4

2001 for 30,000 shares of ACS Class A Common Stock \$0.01 par value at an Exercise Price of \$38.66 per share. The Exercise Price for 18,000 shares will remain at \$38.66 per share, which was the Exercise Price on the date of grant. The Exercise Price for 12,000 shares has been repriced at \$44.87 per share. This stock option grant is currently fully vested and exercisable.

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.