Edgar Filing: ACI WORLDWIDE, INC. - Form 4

ACI WORI	LDWIDE, INC.									
Form 4										
June 10, 20	10							<u> </u>		
FORM		CT A TEC	SECU	DITIES		CHANCI			PPROVAL	
	UNITED	Washington, D.C. 20549								37
Check t if no loi	nger	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								1,)5
subject	to SIAIEN									5
Section 16. SECURITIES Form 4 or								burden hou		_
Form 5		rsuant to S	ection	16(a) of th	ne Securi	ties Excha	nge Act of 1934,	response	. 0.	.5
obligati	ons Section 170						of 1935 or Section	on		
may con See Inst	nunue.			•	•	ny Act of 1				
1(b).										
(Drint or Type	Paspansas)									
(Print or Type	Kesponses)									
1. Name and Address of Reporting Person <u>*</u> SEYMOUR HARLAN F			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			ACI WORLDWIDE, INC. [ACIW]							
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		(Check all applicable)			
			(Month/Day/Year)				_X_ Director10% Owner			
120 BROADWAY, SUITE 3350			06/09/2	2010			Officer (giv below)	titleOth below)		
	(Street)		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
NEW YOU	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
NEW IOF	RK, NY 10271						Person			
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date			3. Transactio	4. Securit			6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any		TransactionAcquired (A) or Code Disposed of (D)				Form: Direct (D) or Indirect	Indirect Beneficial	
((Month/Da			· · ·		Owned	(I)	Ownership	
							Following Reported	(Instr. 4)	(Instr. 4)	
						(A)	Transaction(s)			
				Code V	Amount	or (D) Price	(Instr. 3 and 4)			
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.			
					Perso	ons who re	spond to the colle		SEC 1474	
							tained in this form		(9-02)	

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. Number of	6. Date Exercisable and	7. Title and Amour
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securit
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A)		

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	Derivative Security				or Disposed of (D) (Instr. 3, 4, and 5)					
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sł
Non-Qualified Stock Option (right to buy)	\$ 18.31	06/09/2010	А		10,000		<u>(1)</u>	06/09/2020	Common Stock	10,

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SEYMOUR HARLAN F 120 BROADWAY SUITE 3350 NEW YORK, NY 10271	Х							
Signatures								
Day /a/ Wistonia II. Sita. Attampto in Fact Fam Harlan F								

By: /s/ Victoria H. Sitz, Attorney in Fact For: Harlan F. Seymour

**Signature of Reporting Person

06/10/2010

Date

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).
- The options were granted pursuant to the Company's 2005 Equity and Performance Incentive Plan, as amended. The options will vest on
- (1) the earlier to occur of (i) one year following the date of grant, or (ii) the day immediately prior to the date of the next annual meeting of stockholders of the Company following the date of grant.

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.