#### ACI WORLDWIDE, INC.

Form 4

February 25, 2016

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB 3235-0287

**OMB APPROVAL** 

Number:

January 31,

2005

0.5

Estimated average

burden hours per response...

Expires:

5 Relationship of Reporting Person(s) to

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

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

See Instruction

1(b).

(Print or Type Responses)

1 Name and Address of Reporting Person \*

HOMBERG	Symbol	2. Issuer Name and Ticker or Trading Symbol ACI WORLDWIDE, INC. [ACIW]				Issuer (Check all applicable)			
(Last)	(First) (M	iddle) 3. Date of	Earliest Tra	ansaction			(ene	cik uii uppiicuoic	•)
3520 KRAF	T ROAD, SUITE	(Month/D 300 02/23/20	• /				DirectorX Officer (give below) Group		` 1
	(Street)		ndment, Da th/Day/Year)	Č			6. Individual or J Applicable Line) _X_ Form filed by	One Reporting Pe	erson
NAPLES, FI	L 34105						Form filed by l Person	More than One Re	eporting
(City)	(State)	Zip) Table	e I - Non-D	erivative Sec	curitie	es Acq	uired, Disposed o	of, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transactio	4. Securitie on(A) or Disp (D)			5. Amount of Securities	6. Ownership Form: Direct	Indirect
Common		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 a	(A) or	Price	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (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)

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3. Transaction Date 3A. Deemed

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactic Code (Instr. 8)	orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Option (right to buy)	\$ 17.89	02/23/2016		A	72,333	(3)	02/23/2026	Common Stock	72,3

5. Number of 6. Date Exercisable and

7. Title and Amour

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HOMBERGER CAROLYN B 3520 KRAFT ROAD SUITE 300 NAPLES, FL 34105

**Group President AOD** 

02/25/2016

## **Signatures**

1. Title of

By: /s/ Dennis Byrnes, Attorney in Fact For: Carolyn Homberger

\*\*Signature of Reporting Person 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).
- Represents restricted shares granted on February 23, 2016 pursuant to the Company's 2005 Equity and Performance Incentive Plan, as amended. The restrictions on these shares of restricted stock will generally lapse with respect to 50% of the shares on July 1, 2016 and 50% of the shares on July 1, 2017.
- (2) The amount of securities owned has also been updated to include 456 shares acquired under the Company's 1999 Employee Stock Purchase Plan, as amended.
- (3) The options were granted pursuant to the Company's 2005 Equity and Performance Incentive Plan, as amended. The options vest in equal annual installments over a three year period beginning with the first anniversary of 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.

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