FORM 4

Check this box if no longer subject

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

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

lashington, D.C. 20549
------------------------

STATEMENT OF CHANGES IN BENEFI	CIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Guerra Deborah L						2. Issuer Name and Ticker or Trading Symbol ACI WORLDWIDE, INC. [ ACIW ]										licable)	10%	Owner (specify	
(Last) 6060 CO	(Last) (First) (Middle) 6060 COVENTRY DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024									Chief Product Officer				
(Street)	(Street) ELKHORN NE 68022				4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	S. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City)	(St	(State) Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See													uction or writt	en plan that is	ntended to		
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	Dis	posed of	, or E	Benef	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3,				4 and Securities Beneficial		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect t Beneficial Ownership			
									Code	v	Amount	(A) (D)	or P	rice	Transa	ction(s) 3 and 4)		(Instr. 4)	
Common Stock 03					01/2024				D		818(1)	Г	\$	32.13	4	6,363	D		
Common Stock 03/01/2					2024				D		1,025(2)	Г	\$	32.13	4:	5,338	D		
Common Stock 03/04/2					2024				A		25,047(3)	A	<u> </u>	<b>\$0.0</b>	70	0,385	D		
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)	if any	emed tion Date, n/Day/Year)		nsaction de (Instr. Securit Acquire (A) or Dispos of (D) (Instr. 3 and 5)		vative crities cired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		oer	Price of erivative ecurity sstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)		

## **Explanation of Responses:**

- 1. Represents shares surrendered by the reporting person to pay the tax liability due upon the vesting of 1,905 shares, representing one third of the restricted stock units granted on March 1, 2021.
- 2. Represents shares surrendered by the reporting person to pay the tax liability due upon the vesting of 2,367 shares, representing one third of the restricted stock units granted on March 1, 2022.
- 3. Represents restricted share units awarded pursuant to the Company's 2020 Equity and Performance Incentive Plan, as amended. The restricted share units vest in equal quarterly installments over a three-year period.

Deborah L Guerra

03/05/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.