FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

nington, D.C. 20549	
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OMB APPROVAL

OMB Number:	3235-0287
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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

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* BYRNES DENNIS						2. Issuer Name and Ticker or Trading Symbol ACI WORLDWIDE, INC. [ACIW]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
						2. Date of Farliant Transaction (Marth Farlia)									Officer (give title below)		Other (specify below)		· I		
(Last) (First) (Middle) 3520 KRAFT ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/12/2015									EVP, CAO,General Counsel & Sec						
SUITE 300																					
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
NAPLES	5 F.	L	34105											X Form filed by One Reporting Person Form filed by More than One Reporting				ng			
(City)	(9	State)	(Zip)												Person						
		Ta	able I - No	n-De	rivati	ive S	ecu	rities Ac	quired,	Dis	posed o	f, or Be	neficia	lly (Owned						
1. Title of Security (Instr. 3)				2. Tra Date (Mon		Execution Date,		Transaction Dispose Code (Instr.			ities Acquired (A) or d Of (D) (Instr. 3, 4 and 9			5. Amount Securities Beneficial Owned Fo	ly	Form:	Direct Ir Indirect B str. 4) O	7. Nature of Indirect Beneficial Ownership			
										e V Amount		(A) or (D)			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock			03/	/12/20)15			M		25,000	0 A	\$9.4	233	260,	683	D					
Common Stock			03/	/12/20	.2/2015					25,000) D	\$20	0.5	235,683			D				
Common Stock				03/	/16/20	16/2015					27,500) A	\$9.4	233	263,183		D				
Common Stock 03				03/	/16/20	/2015			S		27,500) D	\$20	235,683		683	D				
			Table II -					ties Acqu varrants							wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	· 1		Transaction Code (Instr.		umber of vative urities uired (A) isposed o) (Instr. 3, d 5)	6. Date Exercis Expiration Date (Month/Day/Ye		e	7. Title and Amo of Securities Underlying Deriv Security (Instr. 3 4)		ive	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction	is Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount Number Shares			(Instr. 4)	J.1(3)				
Non- Qualified Stock Option (right to buy)	\$9.4233 ⁽¹⁾	03/12/2015			M			25,000 ⁽¹⁾	(2)		09/14/2015	Common Stock	25,000) ⁽¹⁾	\$0.0	27,500	0	D			
Non- Qualified Stock Option	\$9.4233	03/16/2015			M			27,500	(2)		09/14/2015	Common Stock	27,50	00	\$0.0	0		D			

Explanation of Responses:

- 1. The number of options and the exercise price reflect the 3-for-1 stock split effective July 10, 2014. Specifically, the number of options reported is three times the number previously reported and the exercise price is one-third of the exercise price previously reported.
- 2. The options were granted pursuant to the Company's 2005 Equity and Performance Incentive Plan, as amended. The options vested in equal annual installments over a four year period beginning with the first anniversary of the date of grant. All options that were exercised were vested prior to exercise.

Dennis P Byrnes

03/16/2015

** Signature of Reporting Person

Date

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

- * 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.