Edgar Filing: Coughlan Anthony G - Form 4

Coughlan A	nthony G										
Form 4											
January 05, 2	2009										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO							т	OMB APPROVAL			
		LUSIAIE		shington,			NGE (OMB Number:	3235-0287	
Check th	nis box		vvas	sinngton,	D.C. 203	549				January 31,	
if no longer				GES IN	GES IN BENEFICIAL OWNERSH				Expires: 200		
subject to Section 1	0			SECURITIES					Estimated average burden hours per response 0.		
Form 4 c				52001	SECONTIES						
Form 5	Filed	pursuant to	Section 1	6(a) of the	e Securiti	es Ex	chang	ge Act of 1934,	reeponeo	0.0	
obligatio may con		17(a) of the	Public U	tility Hold	ling Com	pany	Act o	f 1935 or Sectio	n		
See Instr		30(h) of the In	vestment	Company	y Act	of 194	40			
1(b).											
(Print or Type]	Responses)										
1 Name and A	Address of Repor	ting Person *	2 I.cou.or	. Nomo ond	Tieler or 7	Fradin	a	5. Relationship of	f Reporting Per	son(s) to	
1. Name and Address of Reporting Person *2. IssuerCoughlan Anthony GSymbol				r Name and Ticker or Trading				Issuer	r reporting r er	501(5) 10	
U	,		•	ITURE L'	TDIACN	J]					
(Lost)	(First)	(Middle)			-	.1		(Cheo	ck all applicable	e)	
(Last)	(Pilst)	(Midule)	(Month/D	f Earliest Tr	ansaction			Director	10%	6 Owner	
C/O ACCENTURE, 5221 N. 01/01/20			•				Officer (give title Other (specify				
	R BLVD., STI		01/01/2	0.07				below) Principal	below) I Accounting O	fficer	
	(Cture et)		4 10 4	1				-	-		
(Street) 4. If An Filed(M				Amendment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)			
			T fied(Moi	lui/Day/Teal)			_X_Form filed by One Reporting Person			
IRVING, T	X 75039							Form filed by M Person	More than One Ro	eporting	
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of	2. Transaction		3.				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y		n Date, if Transaction(A) or Disposed of Code (D)				of	Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(111501.5)		any (Month/	Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Owned	(=) == =====	Ownership		
			• ·	. ,				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				~		or		(Instr. 3 and 4)			
Class A				Code V	Amount	(D)	Price				
common	01/01/2009			А	30,721	А	\$0	46,233	D		
shares	01/01/2009			Α	50,721	Α	ψυ	т0,235	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)			ate	Amor Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners			Relatio	onshins					

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Coughlan Anthony G C/O ACCENTURE 5221 N. O'CONNOR BLVD., STE. 1400 IRVING, TX 75039			Principal Accounting Officer					
Signatures								
/s/ Kathryn Lloyd, Attorney-in-Fact for An Coughlan	thony		01/05/2009					
<u>**</u> 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).

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.