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CA, INC.

Form 4												
June 09, 2006	1								OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHAN Washington, D.C. 20549							NGE C	OMMISSION	OMB Number:	3235-0287		
Check this be if no longer subject to Section 16. Form 4 or	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: Estimated a burden hour	urs per		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1(b).										0.0		
(Print or Type Resp	oonses)											
ARTZT RUSSELL M Symbol			Symbol					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (M	iddle)		CA, INC. [CA] (Che 3. Date of Earliest Transaction						ck all applicable)		
				n/Day/Year) . /2006 -				Director 10% Owner Officer (give title Other (specify below) below) below) Executive Vice President				
				mendment, Date Original Aonth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 				
(City)	(State) (Zip)	Tabl	e I - Non-D	Derivative S	Securi	ities Acqu	uired, Disposed of,	or Beneficial	ly Owned		
	Fransaction Date 2A. Deemed onth/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
Common Stock, \$.10 06 par value	5/07/2006			A	27,225 (1)	A	\$ 0	1,407,161	D			
Common Stock, \$.10 06 par value	5/07/2006			F	3,129	D	\$ 21.88	1,404,032	D			
Common Stock, \$.10 par value								26,930.29	Ι	401(k) Plan <u>(2)</u>		

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Da	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration		Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
				Cout v	(\mathbf{D})				Shares		

Reporting Owners

Reporting Owner Name / Address			Relationships			
	Director	10% Owner	Officer	Other		
ARTZT RUSSELL M CA, INC. ONE CA PLAZA ISLANDIA, NY 11749			Executive Vice President			
Signatures						

/s/ Lawrence Egan, by power of attorney

<u>**</u>Signature of Reporting Person

06/09/2006 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).

(1) Represents restricted stock which vests as follows: 34% on June 7, 2006, 33% on June 7, 2007 and 33% on June 7, 2008.

(2) Shares held in the CA Savings Harvest Plan, a 401(k) Plan. Information presented as of June 6, 2006.

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.