#### Edgar Filing: Lamm Jacob - Form 4

Lamm Jacob Form 4 June 01, 2009											
FORM /									OMB APPROVAL		
_	UNITEI	UNITED STATES SECURITIES AND EXCHANGE CO Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287	
Check thi if no long	or	STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES							Expires:	January 31, 2005	
subject to Section 1 Form 4 or	6. r								Estimated a burden hou response	average urs per	
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type R	Responses)										
Lamm Jacob Symt			2. Issuer Symbol CA, INC	Name and C. [CA]	Ticker or	Tradi	ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)							(Check all applicable)			
(Мо				(Month/Day/Year) 05/29/2009				Director 10% Owner X Officer (give title Other (specify below) below) EVP, Strategy & Corporate Dev			
Filed(Mor				nendment, Date Original fonth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
ISLANDIA,	, NY 11749							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed 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)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock, \$.10 par value	05/29/2009			F	3,861	D	\$ 17.45	67,281	D		
Common Stock, \$.10 par value	05/31/2009			F	2,570	D	\$ 17.45	64,711	D		
Common Stock, \$.10 par value								152.265	Ι	401(k) Plan (1)	

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 Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired				ŕ		Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(III)
					(insu: 5, 4, and 5)						
					4, and <i>5</i> )						
									Amount		
						D (	<b></b>		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
					() (2)						

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Lamm Jacob ONE CA PLAZA ISLANDIA, NY 11749			EVP, Strategy & Corporate Dev					
Signatures								
/s/ Jacob Lamm by C.H.R. Dul attorney-in-fact	Pree, as		06/01/2009					
<u>**</u> Signature of Reporting	Person		Date					

### \*\*Signature of Reporting Person

# 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) Shares held in the CA Savings Harvest Plan, a 401(k) Plan. Information presented as of May 28, 2009.

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.