FAIR ISAAC CORP

Form 3

September 04, 2008

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement FAIR ISAAC CORP [FIC] A Pacalin Laurent (Month/Day/Year) 08/28/2008 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 901 MARQUETTE (Check all applicable) **AVENUE, Â SUITE 3200** (Street) 6. Individual or Joint/Group 10% Owner Director \_X\_\_ Officer Other Filing(Check Applicable Line) (give title below) (specify below) \_X\_ Form filed by One Reporting Sr. Vice President Person MINNEAPOLIS, MNÂ 55402 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 5) (Instr. 4) Form: Direct (D) or Indirect (I) (Instr. 5) Â No Securities are beneficially owned 0 D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of<br>Securities Underlying<br>Derivative Security<br>(Instr. 4) | 4. Conversion or Exercise Price of | 5.<br>Ownership<br>Form of<br>Derivative | 6. Nature of<br>Indirect Beneficial<br>Ownership<br>(Instr. 5) |
|--|--|--|------------------------------------|--|--|
|  | Date Exercisable   | Title  | Derivative                         | Security:                                | (111301. 3)  |
|  |  |  | Security                           | Direct (D)                               |  |

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|  |               | Expiration<br>Date |                 | Amount or<br>Number of<br>Shares |          | or Indirect (I) (Instr. 5) |   |
|--|---------------|--------------------|-----------------|----------------------------------|----------|----------------------------|---|
| Non-Qualified Stock<br>Option (right to buy) | 04/22/2009(1) | 04/21/2015         | Common<br>Stock | 35,500                           | \$ 25.09 | D                          | Â |
| Restricted Stock Unit                        | 04/22/2009(2) | (3)                | Common<br>Stock | 11,500                           | \$ (4)   | D                          | Â |

# **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |                       |       |  |
|---|---------------|-----------|-----------------------|-------|--|
|   | Director      | 10% Owner | Officer               | Other |  |
| Pacalin Laurent 901 MARQUETTE AVENUE SUITE 3200 MINNEAPOLIS Â MNÂ 55402 | Â             | Â         | Sr. Vice<br>President | Â     |  |

# **Signatures**

/s/ Nancy E. Fraser,
Attorney-in-fact

\*\*Signature of Reporting Person Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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) This option vests in four equal annual installments commencing on this date.
- (2) The restricted stock units vest in four equal annual installments commencing on this date and vested shares will be delivered to the reporting person as soon as practicable thereafter.
- (3) No expiration date.
- (4) Each restricted stock unit represents a right to receive one share of Fair Isaac common stock contingent upon continued employment.

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.

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