Edgar Filing: FISERV INC - Form 4

FISERV IN Form 4											
January 04,	ЛЛ		CECH						PPROVAL		
	UNITED	STATES		RITIES A shingtor			E COMMISSION	OMB Number:	3235-02	87	
Check t if no lor subject Section Form 4 Form 5 obligati may con <i>See</i> Inst	MENT OF resuant to S (a) of the F 30(h)	Section Public U	SECU 16(a) of t	RITIES he Securi lding Con	Expires: Estimated burden hou response	average urs per	31, 005 0.5				
1(b). (Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> OLEARY DENIS			2. Issuer Name and Ticker or Trading Symbol FISERV INC [FISV]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 255 FISERV DRIVE			3. Date of Earliest Transaction(Month/Day/Year)12/31/2016				XDirector10% Owner Officer (give titleOther (specify below)below)				
(Street) BROOKFIELD, WI 53045			4. If Amendment, Date Original Filed(Month/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)	Tab	de I - Non-	Derivative	Securities /	Person Acquired, Disposed of	or Beneficia	llv Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deema Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	ties l (A) or l of (D)	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		
Reminder: Re	port on a separate line	for each cla	ass of sec	urities bene	Perso infor requi	ons who re nation con red to resp	or indirectly. spond to the collect tained in this form ond unless the for ontly valid OMB col	are not m	SEC 1474 (9-02)		

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. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Se
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(I

number.

	Derivative Security			Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)								
			C	Code `	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Compensation Notional Units	<u>(1)</u>	12/31/2016		A		255		(1)	<u>(1)</u>	Common Stock	255	\$

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
OLEARY DENIS 255 FISERV DRIVE BROOKFIELD, WI 53045	Х			
Signatures				
/s/ Lynn S. McCreary (attorney-in-fact)		01/04/2	017	
<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).

These deferred compensation notional units were allocated under the Fiserv, Inc. Non-Employee Director Deferred Compensation Plan (the "Plan"), under which director fees otherwise payable in cash may be deferred in exchange for the allocation of notional units under the Plan. This Form 4 reports the crediting of units under the Plan on December 31, 2016 in respect of \$27,000 of deferred compensation.

(1) The number of notional units credited is calculated by dividing the amount of compensation that is deferred by the closing price of the company's common stock on the date of deferral, or last business day prior. On December 30, 2016, the closing price of Fiserv's common stock was \$106.28 per share. Upon termination of the reporting person's service to the company, each notional unit will be settled in shares of Fiserv common stock on a one-for-one basis.

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.