

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person * <u>Warsop Thomas W III</u>  (Last) (First) (Middle) 255 FISERV DRIVE  (Street) BROOKFIELD WI 53045  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>FISERV INC [ FISV ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) EVP, Group President
	3. Date of Earliest Transaction (Month/Day/Year) 02/26/2009	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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 (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock - par value \$0.01	02/26/2009		A		6,491 <sup>(1)</sup>	A	\$0	29,319	D	

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option (right to buy)	\$32.74	02/26/2009		A		17,126		02/26/2010 <sup>(2)</sup>	02/26/2019	Common Stock	17,126	\$0	17,126	D	
Stock Option (right to buy)	\$54.21	02/26/2009		A		5,380 <sup>(3)</sup>		02/26/2011 <sup>(4)</sup>	02/27/2018	Common Stock	5,380	\$0	5,380	D	

**Explanation of Responses:**

- One-third of these restricted stock units vest on the second anniversary of the grant date and an additional one-third will vest on each of the third and fourth anniversaries of the grant date.
- One-third of these options vest on each anniversary of the grant date.
- On February 27, 2008, the reporting person was granted an option to purchase 23,059 shares of common stock. The options vest in 2011 subject to Fiserv's achievement of annual or cumulative cost synergy goals and annual or cumulative internal revenue growth goals. The performance criteria with respect to the cost synergy goal for 2008 was achieved. Accordingly, 7/30 of the award was earned.
- The options will vest and become exercisable on the date in 2011 that the compensation committee certifies whether the 2010 and cumulative performance criteria have been satisfied.

/s/ Charles W. Sprague (attorney-in-fact) 03/02/2009

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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.

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 Number.