FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

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

## 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

Name and Address of Reporting Person*     Chiarello Guy					2. Issuer Name <b>and</b> Ticker or Trading Symbol FISERV INC [ FISV ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) 255 FISERV	(First)	) (1	Middle)		12/0	3. Date of Earliest Transaction (Month/Day/Year) 12/03/2021							х	Officer (g below)	ve title Other (specify below) ief Operating Officer			specify
(Street) BROOKFIEL (City)	D WI		73045 Zip)	4. If .	4. If Amendment, Date of Original Filed (Month/Day/Year)								vidual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
		T	able I - No	n-Der	ivativ	ve S	ecuri	ties Ac	quired,	Dis	posed of	, or Benef	icially Ow	ned				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Ye		Execution Date,		on Date,	3. Transaction Code (Instr. ) 8)			es Acquired (A tr. 3, 4 and 5)	) or Disposed	Securities Beneficiall Following	y Owned Form or Inc		nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) or (D)	Price	Transactio (Instr. 3 an				(Instr. 4)
Common Stock					12/03/2021				М		60,000	) A	\$36.54	257,375			D	
Common Stock				12/03	/03/2021				S		60,000	) D	\$100.18(1)	197,375			D	
Common Stock														26,1	.18		I	By Trust <sup>(2)</sup>
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ise (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yes	Co	e, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Dat	Securities Underly		derlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s ally	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	ode	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Employee Stock Option (right to buy)	\$36.54	12/03/2021		М				60,000	07/11/201	14 <sup>(3)</sup>	07/11/2023	Common Stock	60,000	\$0.00	<b>\$</b> 0.00 189,292		D	

## Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$100.00 to \$100.26. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 2. Held by The Guy Chiarello 2020 Trust for the benefit of the reporting person's spouse and children and of which the reporting person's spouse serves as trustee and the reporting person serves as investment advisor.
- 3. This option vested in five equal installments on each anniversary of the grant date, July 11, 2013.

## Remarks:

/s/ Eric C. Nelson (attorney-in-

fact)

12/03/2021

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.