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

| 1. Name and Address of Reporting Person* ROBAK KIM M | | | | | Issuer Name and Ticker or Trading Symbol FISERV INC [FISV] Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | all applicabl | e) | erson(s) to Issuer 10% Owr | | · |
|--|--|--|---|-----------|---|--|---------|-----------------------------|---------------------------------|------------------|---|---------------|---------|---|---|--|---|--|--|
| (Last) | (First) | , | Middle) | | 05/25/2016 | | | | | | | | | | Officer (give title below) | | Other (spelow) | | specify |
| MUELLER ROBAK, LLC 530 SOUTH 13TH STREET, SUITE 110 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| (Street) LINCOLN | NE | NE 68508 | | | | | | | | | | | | | Form filed | d by More | than O | ne Reportin | g Person |
| (City) | (State |) (2 | Zip) | | | | | | | | | | | | | | | | |
| | | Т | able I - No | n-Deri | vative | Sec | curit | ies Ac | quired, | Dis | posed of | , or Be | nefic | ially Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Da | | | n Date, | 3. Transac Code (In 8) | | 4. Securities Acquired (A) or I Of (D) (Instr. 3, 4 and 5) | | | or Disposed | Following | curities neficially Owned llowing Reported | | nership Direct (D) irect (I) 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | Price | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 05/25. | | | | | | 5/2016 | | М | | 5,096 | A | | \$26.49 | 40,4 | 412 | | D | | |
| Common Stock 05/25 | | | | | 5/2016 | | S | | 5,096 | Г | | \$104.31(1) | 35,3 | 316 | | 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 Da if any (Month/Day/\) | Code (Ins | | | | 6. Date Expiration (Month/D | n Date | 9 | 7. Title a Securitie Derivativ 3 and 4) | s Und | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti | e s illy | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Co | de V | , (| (A) (D) | | Date Exercisable | | Expiration Date | or Nu | | Amount or Number of Shares | | (Instr. 4) | | | |
| Stock Option (right to buy) | \$26.49 | 05/25/2016 | | | М | 5, | | 5,096 | 05/23/200 | 8 ⁽²⁾ | 05/23/2017 | Comm Stock | | 5,096 | \$0.00 | 0 | | D | |

Explanation of Responses

1. This transaction was executed in multiple trades at prices ranging from \$104.04 to \$104.48. 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.

Remarks:

/s/ Lynn S. McCreary (attorney-infact) 05/26/2016

** 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.

 $^{2. \} This \ option \ vested \ in \ five \ equal \ installments \ on \ each \ anniversary \ of \ the \ grant \ date, February \ 23, \ 2007.$