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 * YABUKI JEFFERY W						2. Issuer Name <b>and</b> Ticker or Trading Symbol FISERV INC [FISV]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/17/2016									Director 10% Owne Officer (give title Other (spe below) below)  President and CEO					
255 FISERV DRIVE  (Street)  BROOKFIELD WI 53045  (City) (State) (Zip)					4. If #	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Та	ble I - No	on-De	rivativ	e S	ecuriti	es Ac	quired	, Dis	posed of	, oı	r Benef	icially Ow	ned					
Date				Date	e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					or Disposed	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
		Code	v	Amount						(A) or (D)	Price	(Instr. 3 an				(Instr. 4)				
Common Stock 08						1			S		8,000(1)		D	\$101.58(2)	336,994			D		
Common Stock 0					7/2016				S		4,000(1)		D	\$102.36(3)	332,994		D			
Common Stock													61,714			I	By Trust <sup>(4)</sup>			
			Table II -								sed of, o			ally Own	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transac Code (Ir 8)		Deriva Secur Acqui or Dis (D) (In	5. Number of Derivative Securities Acquired (A) or (D) (Instr. 3, 4 and 5)		e Exer ation D h/Day/	ate Year)		Title and A ecurities U erivative S nstr. 3 and	nderlying ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s nilly g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. This sale was effected pursuant to a Rule 10b5-1 trading plan which was entered into by the reporting person for estate and financial planning purposes.
- 2. This transaction was executed in multiple trades at prices ranging from \$101.16 to \$101.98. 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.
- 3. This transaction was executed in multiple trades at prices ranging from \$101.99 to \$102.70. 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.
- 4. By the Yabuki Family Foundation of which Mr. Yabuki serves as trustee.

## Remarks:

/s/ Lynn S. McCreary (attorney-infact) 08/18/2016

\*\* Signature of Reporting Person Dat

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.