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								

Ownership (Instr. 4)

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 OLEARY DEN	. 0		I .	er Name and Ticker RV INC [FIS	0 ,	mbol		ionship of Reporting F all applicable)	.,			
(Last) (First) (Middle)			3. Date 02/14	of Earliest Transact /2017	tion (Month/Da	y/Year)	X	Director Officer (give title below)	10% Owner Other (specify below)			
255 FISERV DRIVE				nendment, Date of C	Original Filed (M	lonth/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)							X	Form filed by One F		ng Doroon		
BROOKFIELD	WI	53045						Form filed by More	man One Reportii	ig Person		
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
Date		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	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			

(A) or (D) (Instr. 3 and 4) Code Amount Price 02/14/2017 M 2,530 A \$24.7 24,138 D 02/14/2017 S 2,530 D \$110.1 21,608 D M 02/14/2017 \$25.5 27,732 D 6,124 Α 02/14/2017 S 6,124 D \$110.06(1) 21,608 D

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

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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. Transac Code (Ir 8)		Derivative		6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	9. Number of derivative Securities Beneficially Owned Following Reported	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	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (right to buy)	\$24.7	02/14/2017		М			2,530	05/21/2008 ⁽²⁾	01/21/2018	Common Stock	2,530	\$0.00	0	D	
Stock Option (right to buy)	\$25.5	02/14/2017		M			6,124	05/20/2009(3)	05/21/2018	Common Stock	6,124	\$0.00	0	D	

Explanation of Responses:

Common Stock

Common Stock

Common Stock

Common Stock

- 1. This transaction was executed in multiple trades at prices ranging from \$110.02 to \$110.09. 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. This option vested in full on May 21, 2008.
- 3. This option vested in full on May 20, 2009.

Remarks:

/s/ Lynn S. McCreary (attorney-in-02/16/2017 fact)

Following Reported Transaction(s)

** 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.