1. Name and Address of Reporting Person*  
Chiarello Guy  
(Last)  (First)  (Middle)  
255 FISERV DRIVE  
(Street)  
BROOKFIELD  WI  53045  
(City)  (State)  (Zip)

2. Issuer Name and Ticker or Trading Symbol  
FISERV INC [ FISV ]

5. Relationship of Reporting Person(s) to Issuer  
Director

3. Date of Earliest Transaction (Month/Day/Year)  
02/15/2021

6. Individual or Joint/Group Filing (Check Applicable Line)  
X Form filed by One Reporting Person

4. If Amendment, Date of Original Filed (Month/Day/Year)

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

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>3A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>4. Transaction Code (Instr. 8)</th>
<th>4A. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>5A. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>6. Nature of Indirect Beneficial Ownership Code V Amount (A) or (D) Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>02/15/2021</td>
<td></td>
<td>F</td>
<td>25,930(D)</td>
<td>263,707</td>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

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 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 Code V (A) (D) Date Exercisable Expiration Date Title Amount or Number of Shares |
|------------------------------------------|-----------------------------------------------------|------------------------------------|---------------------------------------------|-----------------------------|--------------------------------------------------------------------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|

Explanation of Responses:
1. Reflects payment of tax liability by withholding securities incident to vesting of restricted stock units.

Remarks:

\[/\] Lynn S. McCreaey  
(attorney-in-fact)  
02/17/2021

** 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).


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.