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FISERV INC Form 4								
April 04, 2017 FORM 4 UNITED		RITIES AND EXCHANGE	COMMISSION	-	PPROVAL			
UNITED	OMB Number:	3235-0287						
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Expires: Estimated a burden hou response	irs per						
(Print or Type Responses)								
1. Name and Address of Reporting RENWICK GLENN M	Person <u>*</u> 2. Issu Symbol	er Name and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer					
	FISERV INC [FISV]				heck all applicable)			
(Last) (First) (6300 WILSON MILLS ROA	(Month/	of Earliest Transaction /Day/Year) 2017	X Director Officer (give t below)		b Owner er (specify			
(Street)	Filed(Month/Day/Year) Applicabl			by One Reporting Person				
MAYFIELD VILLAGE, OF	H 44143		Form filed by Mo Person	ore than One Re	eporting			
(City) (State)	(Zip) Tal	ble I - Non-Derivative Securities A	cquired, Disposed of,	or Beneficial	lly Owned			
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	SecuritiesForBeneficially(D)Owned(I)	orm: Direct)) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Reminder: Report on a separate line	e for each class of sec		r indirectly. pond to the collect ained in this form a		EC 1474 (9-02)			

required to respond to the collection of SEC 1 information contained in this form are not (9 required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Se
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(I

	Derivative Security				(A Di of (In	cquired) or isposed (D) nstr. 3, d 5)	d					
			Cc	ode N	Ι (1	A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Compensation Notional Units	(1)	03/31/2017	P	A	22	24		<u>(1)</u>	<u>(1)</u>	Common Stock	224	\$

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
RENWICK GLENN M 6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143	Х					
Signatures						
/s/ Lynn S. McCreary (attorney-in-fact)	C	4/04/2017				
<u>**</u> Signature of Reporting Person		Date				

Explanation of Responses:

- * 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).

These deferred compensation notional units were allocated under the Fiserv, Inc. Non-Employee Director Deferred Compensation Plan (the "Plan"), under which director fees otherwise payable in cash may be deferred in exchange for the allocation of notional units under the Plan. This Form 4 reports the crediting of units under the Plan on March 31, 2017 in respect of \$25,750 of deferred compensation.

(1) The number of notional units credited is calculated by dividing the amount of compensation that is deferred by the closing price of the company's common stock on the date of deferral, or last business day prior. On March 31, 2017, the closing price of Fiserv's common stock was \$115.31 per share. Upon termination of the reporting person's service to the company, each notional unit will be settled in shares of Fiserv common stock on a one-for-one basis.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.