Instruction 1(b)

Form 3 Holdings Reported.

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNEDSHID

OMB APPR	OVAL							
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 4	Transactions F	teported.	File	ed pursuant to or Section					ities Excha ompany Ac								
1. Name and Address of Reporting Person* ERNST MARK A				2. Issuer Name and Ticker or Trading Symbol FISERV INC [FISV]							5. Relationship of Reporting (Check all applicable) Director X Officer (give title below) Chief Opera				10% Owner		
(Last) (First) (Middle) 255 FISERV DRIVE				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017						Year)					below)		
(Street) BROOKFIELD WI 53045 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date (Month/Day/Year)			2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Securiti Benefic		es ally	6. Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership	
				(Month/Day/Year) 8		8)		Amoui	nt	(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)
Common	Stock		11/16/2016			G5		1,	490	D	D \$0.00		56,049			D	
Common Stock			12/12/2017		G		}	1,	900	D	\$0.00		54,365(1)			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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rative rities ired r osed)	Expir. (Mont	te Exercisable and ation Date th/Day/Year) Expiration cisable Date		Amou Secu Unde Deriv Secu and 4	rities rlying ative rity (Instr. 3	-		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)

Explanation of Responses:

1. Includes 216 shares acquired under the Fisery, Inc. Employee Stock Purchase Plan.

Remarks:

/s/ Lynn S. McCreary (attorney-in-fact) 02/13/2018

** 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.