FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGE</b>	S IN BENEFICIA	L OWNERSHIP

OMB APPROVAL								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Chiarello Guy						2. Issuer Name and Ticker or Trading Symbol FISERV INC [ FISV ]								ck all application	tionship of Reporting all applicable) Director Officer (give title		Person(s) to Issuer  10% Owner Other (specify		
(Last) 255 FISI	(F ERV DRIV	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/08/2021								below)			below)	ow)	
(Street) BROOKFIELD WI 53045				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. In Line							
(City)	(S	state)	(Zip)											Person					
		Та	ble I - N	on-De	rivati	ve S	ecur	ities Ac	quire	d, Dis	sposed of	, or Ber	neficially	Owned					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,					Acquired (A) or (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 (Instr. 4)				
									Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			msu. 4)	
Common Stock 01/0				01/0	8/202	021		M		20,000(1)	A	\$36.54	270,360			D			
Common Stock 01/08/2				8/202	021			S		11,422(1)	D	\$114.92	258	,938		D			
Common Stock 01/08/20				8/202	021		S		8,578(1)	D	\$115.52	250,360			D				
			Table II								oosed of, o			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code ( 8)				6. Date Exer Expiration D (Month/Day/		ate	of Securi Underlyin	ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(	e s lly	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		(Instr. 4)							
Employee	1	l	I		l		1	I	1			I	1	I	I			1	

## **Explanation of Responses:**

\$36.54

- 1. This option exercise and sale was effected pursuant to a Rule 10b5-1 trading plan entered into by the reporting person for estate and financial planning purposes.
- 2. This transaction was executed in multiple trades at prices ranging from \$114.48 to \$115.35. 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.

07/11/2014<sup>(4)</sup>

20,000<sup>(1)</sup>

- 3. This transaction was executed in multiple trades at prices ranging from \$115.36 to \$115.76. 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. This option vested in five equal installments on each anniversary of the grant date, July 11, 2013.

## Remarks:

Stock

Option (right to

/s/ Lynn S. McCreary (attorneyin-fact) 01/11/2021

20,000

\$0.00

399 292

D

Common

Stock

07/11/2023

\*\* 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).

01/08/2021

\*\* 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.