FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

gton, D.C. 20549	OMB APPROVAL

	OMB Number:	3235-0287								
l	Estimated average burden									
l	hours per response:	0.5								

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

Name and Address of Reporting Person* OLEARY DENIS						2. Issuer Name and Ticker or Trading Symbol FISERV INC [FISV]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
														X Directo	r	10% Ow		ner		
(Last)	Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 02/28/2019								(give title		Other (s below)	pecify		
255 115211, 214 12						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)							4. II Amendinent, Date of Original Flied (Month/Ddy/1ear)								Line)					
(Street) BROOKFIELD WI 53045														X Form filed by One Reporting Person						
DICONFIELD WI 33043														Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)											Persor	Person					
		Tal	ole I - No	n-Deri	ivativ	re Se	curi	ties Ac	quired,	, Dis	sposed o	f, or Bei	neficial	y Owned						
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						ar) E	any	emed on Date, /Day/Year	Code (I	Transaction Disposed O Code (Instr.		es Acquired (A) or Of (D) (Instr. 3, 4 and		Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock 02/28/2						2019		М		13,728	A	\$11.6	2 52	52,014		D				
Common Stock 02/28/2					8/2019	2019		S		13,728	D	\$85.08	38,286			D				
			Table II -	Deriv (e.g.,	ative puts,	Sec , call	uritio	es Acq arrants	uired, [s, option	Disp ns,	osed of, convertib	or Bene ole secu	eficially rities)	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execution Date,			ransaction ode (Instr.		ı of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares							
Stock Option (right to buy)	\$11.62	02/28/2019			M			13,728	05/26/201	.1 ⁽²⁾	05/26/2020	Common Stock	13,728	\$0.00	0		D			

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$85.07 to \$85.13. 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 26, 2011.

Remarks:

/s/ Lynn S. McCreary (attorneyin-fact) 03/01/2019

** 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.