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| FISERV IN Form 4 July 03, 20 | | | | | | | | |
|---|---|--|---|--|---|--|--------------------------|--|
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | OMB APPROVAL | | | |
| Washington, D.C. 20549 | | | | OMB Number: | 3235-0287 | | | |
| Check this box if no longer subject to Section 16. SECURITIES | | | | | | Expires: Estimated a burden hou response | urs per | |
| (Print or Type | e Responses) | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Simons Doyle | | | 2. Issuer Name and mbol ISERV INC [FI | I Ticker or Trading | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) 220 OCCIDENTAL AVENUE SOUTH | | | Date of Earliest Tr Ionth/Day/Year) 6/30/2017 | ransaction | (Check all applicable) X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| (Street) SEATTLE, WA 98104 | | | If Amendment, Da led(Month/Day/Year | - | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | Table I - Non-F | Derivative Securities A | | f or Beneficia | llv Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Dat any (Month/Day/Y | 3. te, if Transaction Code | 4. Securities nAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or | 5. Amount of Securities I Beneficially (Owned (| 6. Ownership Form: Direct D) or Indirect I) | 7. Nature of Indirect | |
| Reminder: Ro | eport on a separate lin | e for each class | of securities benef | information cont required to respo | or indirectly. pond to the collec ained in this form and unless the for ntly valid OMB cor | are not m | SEC 1474 (9-02) | |

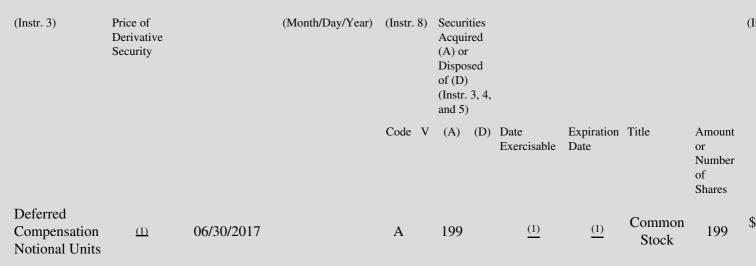
 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (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 |

number.

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|--|---------------|-----------|---------|-------|--|
| | Director | 10% Owner | Officer | Other | |
| Simons Doyle 220 OCCIDENTAL AVENUE SOUTH SEATTLE, WA 98104 | Х | | | | |
| Signatures | | | | | |
| /s/ Lynn S. McCreary (attorney-in-fact) | 07/03 | /2017 | | | |
| **Signature of Reporting Person | Da | te | | | |

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 June 30, 2017 in respect of \$24,294 of deferred compensation. The

(1) 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 June 30, 2017, the closing price of Fiserv's common stock was \$122.34 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.