SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2025-02-07** | Period of Report: **2025-02-05** SEC Accession No. 0000798354-25-000027

(HTML Version on secdatabase.com)

REPORTING OWNER

Chiarello Guy

CIK:1654667

Type: 4 | Act: 34 | File No.: 001-38962 | Film No.: 25603050

Mailing Address 600 N. VEL R. PHILLIPS AVENUE MILWAUKEE WI 53203

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ISSUER

FISERV INC

CIK:798354| IRS No.: 391506125 | State of Incorp.:WI | Fiscal Year End: 1231

SIC: 7389 Business services, nec

Mailing Address 600 N. VEL R. PHILLIPS AVENUE MILWAUKEE WI 53203 Business Address 600 N. VEL R. PHILLIPS AVENUE MILWAUKEE WI 53203 2628795000

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL											
OMB Number:	3235-0287										
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Estimated average b	ourden										
nours per response	0.5										

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

,			2. Issuer Name and Ticker or Trading Symbol FISERV INC [FI]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/05/2025	_X_ Officer (give titleOther (specify below) Chief Operating Officer				
600 N. VEL R. P	HILLIPS AVEN	UE						
(Street) MILWAUKEE, WI 53203			4. If Amendment, Date Original Filed(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-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)	2A. Deemed Execution Date, if	ution Code (Instr.		4. Securities Ad Disposed of (D		tr. 3, 4 and 5)	Securities Beneficially Owned	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		any (Month/ Day/Year)	Code	V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	,		
Common Stock	02/05/2025		<u>A</u>		66,387 ⁽¹⁾	A	\$ 0	228,436	D		
Common Stock	02/05/2025		<u>F</u>		33,326 ⁽²⁾	D	\$229.53	195,110	D		
Common Stock								37,381	I	By Trust (3)	

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)	3. Transaction Date (Month/ Day/Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transa Code (Instr. 8		of	rative rities ired r osed)			Amount of Securities Underlying		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Reflects the issuance of shares on February 5, 2025, upon the vesting of performance share units granted on February 23, 2022.

- 2. Reflects payment of tax liability by withholding securities incident to vesting of performance share units.
- 3. Held by The Denise Chiarello 2021 Trust for the benefit of the reporting person and the reporting person's children and of which the reporting person serves as trustee.

Signatures

/s/ Eric C. Nelson (attorney-in-fact)

02/07/2025

Date

** Signature of Reporting Person

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.