#### **MASTERCARD INC**

Form 4

February 14, 2014

## FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue.

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* MasterCard Foundation

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Middle)

MASTERCARD INC [MA]

(Check all applicable)

(Last)

(First)

3. Date of Earliest Transaction (Month/Day/Year)

Director Officer (give title

\_X\_\_ 10% Owner \_ Other (specify

2 ST. CLAIR AVENUE EAST,

(Street)

SUITE 301

Class A

Common

02/14/2014

4. If Amendment, Date Original

Applicable Line)

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

S

02/12/2014

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

118,404,650 D

below)

TORONTO, A6 M4T 2T5

(City)	(State)	(Zip) Tal	ble I - Non-	-Derivative	Secur	ities Acquire	ed, Disposed of, o	r Beneficially	Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securitie onDisposed o (Instr. 3, 4)	f (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Class A Common Stock, par value \$.0001	02/12/2014				Ì	\$ 76.0818	118,674,530	D	
Class A Common Stock, par value \$.0001	02/13/2014		S	134,920	D	\$ 75.8555	118,539,610	D	

134,960 D

76.8244

Stock, par value \$.0001

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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		4. T	5.	6. Date Exer		7. Title		8. Price of	9. Nu
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if		orNumber	Expiration D		Amount		Derivative	Deriv
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
		Derivative				Securities			(Instr. 3	and 4)		Own
		Security				Acquired			, , , ,		Follo	
						(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						` ′						(111Sti
						(Instr. 3,						
						4, and 5)						
									Д	Amount		
									0			
						Date Expira Exercisable Date	Expiration		Number			
							Date					
								0				
					Code V	(A) (D)			S	hares		

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting of the remaining	Director	10% Owner	Officer	Other			
MasterCard Foundation 2 ST. CLAIR AVENUE EAST, SUITE 301		X					
TORONTO, A6 M4T 2T5							

# **Signatures**

The MasterCard Foundation By: /s/ Peggy Woo; Chief Financial 02/14/2014 Officer

> \*\*Signature of Reporting Person Date

# **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).

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.

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