## Edgar Filing: Mastercard Inc - Form 4

Mastercard Form 4	Inc												
January 19,	2017												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL				
UNITED STATES		SECURITIES AND EXCHANGE CO Washington, D.C. 20549						JMMISSION	OMB Number:	3235-0287			
Check t if no los subject Section Form 4	nger to <b>STATE</b> 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES								Expires: Estimated av burden hours	•		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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 1(b).									0.0				
(Print or Type	Responses)												
									5. Relationship of Reporting Person(s) to Issuer				
						Fransaction	L		(Check all applicable)				
				Month/Day/Year) 1/17/2017					Director 10% Owner Officer (give title Other (specify below) below)				
				-					6. Individual or Joint/Group Filing(Check				
Filed(M TORONTO, A6 M5B 2L7					Yea	ar)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tal	ble I - N	on-	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficially	<b>Owned</b>		
1.Title of Security (Instr. 3)	ty (Month/Day/Year) Execution Date, if			Code (Instr. 3, 4 and 5)					Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)			
Class A Common Stock, par value \$.0001	01/17/2017			S		68,345	D	\$ 108.3142	2 114,064,442	D			
Class A Common Stock, par value \$.0001	01/18/2017			S		68,345	D	\$ 108.831	113,996,097	D			
Class A Common	01/19/2017			S		68,345	D	\$ 108.823	113,927,752 5	D			

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 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Date

## 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>					
	Director	10% Owner	Officer Other		
MasterCard Foundation 250 YONGE STREET, SUITE 2400 TORONTO, A6 M5B 2L7		Х			
Signatures					
The MasterCard Foundation By: /s/ Po Officer	01/19/2017				

\*\*Signature of Reporting Person

## **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.