Mastercard Inc Form 4 November 21, 2016

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

Check this box if no longer subject to

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 4 or Form 5 obligations may continue. See Instruction

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).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \*

MasterCard Foundation

(First)

(Middle)

2. Issuer Name and Ticker or Trading Symbol

Mastercard Inc [MA]

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

250 YONGE STREET, SUITE 2400 11/18/2016

> (Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

**OMB APPROVAL** 

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Director \_ 10% Owner Other (specify Officer (give title below)

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

TORONTO, A6 M5B 2L7

| (City)  | (State)                              | (Zip) Tal   | ble I - Non     | -Derivative  | Secu | rities Acquire    | ed, Disposed of, o   | or Beneficially  | Owned   |
|---|--------------------------------------|---|-----------------|--|------|-------------------|--|--|---|
| 1.Title of<br>Security<br>(Instr. 3)                | 2. Transaction Date (Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | Code (Instr. 8) | TransactionDisposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or |      |                   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| Class A<br>Common<br>Stock, par<br>value<br>\$.0001 | 11/18/2016                           |   | Code V S        | Amount 24,208  | (D)  | Price \$ 104.7233 | 114,157,003  | D  |   |
| Class A<br>Common<br>Stock, par<br>value<br>\$.0001 | 11/21/2016                           |   | S               | 24,216   | D    | \$<br>105.2358    | 114,132,787  | D  |   |

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

### Edgar Filing: Mastercard Inc - Form 4

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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.         | 6. Date Exerc    | cisable and | 7. Title a | and    | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|------------------|-------------|------------|--------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | orNumber   | Expiration Date  |             | Amount     | of     | 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 |
|             |             |                     |                    |            | (Instr. 3, |                  |             |            |        |             |        |
|             |             |                     |                    |            | 4, and 5)  |                  |             |            |        |             |        |
|             |             |                     |                    |            |            |                  |             |            | mannt  |             |        |
|             |             |                     |                    |            |            |                  |             |            | mount  |             |        |
|             |             |                     |                    |            | Date       | Expiration       | or          |            |        |             |        |
|             |             |                     |                    |            |            | Exercisable Date |             | umber      |        |             |        |
|             |             |                     |                    | G 1 17     | (A) (D)    |                  |             | of         |        |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |                  |             | S          | hares  |             |        |

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

MasterCard Foundation 250 YONGE STREET, SUITE 2400 TORONTO, A6 M5B 2L7

X

## **Signatures**

The MasterCard Foundation By: /s/ Reeta Roy; President and CEO 11/21/2016

\*\*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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