FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* GPE VI FT Co-Investment Limited Partnership			Date of Event equiring Staten Month/Day/Year 3/21/2012	ring Statement h/Day/Year) Vantiv, Inc. [VNTV]							
(Last) (First) (Middle) C/O ADVENT INTERNATIONAL					Relationship of Reporting Perso (Check all applicable) Director Officer (give title	on(s) to Issuer 10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year)			
CORPORATION 75 STATE STREET, 29TH FLOOR					below) Member of Group >10%			6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
(Street) BOSTON	MA	02109							Form filed by Reporting Po	y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Class A Common Stock					9,750,832	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expira		2. Date Exerc Expiration Da (Month/Day/\	ate	3. Title and Amount of Securities Underlying Derivative Security (Ins		4. Convers or Exerc	rcise Form	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Derivative Security		or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

/s/ Jarlyth H. Gibson, Compliance Officer 03/21/2012

** Signature of Reporting Person Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).