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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>ADVENT INTERNATIONAL GPE VI-F</u> <u>LP</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Vantiv, Inc. [VNTV] | | | | | | | | | Check all ap Dire | plicable) ctor cer (give title | | Owner (specify |
|--|---|--|--|---|---|-----|-------------|--|----------|---|---|------|---|--|--|--|--|
| (Last) (First) (Middle) C/O ADVENT INTERNATIONAL CORPORATION | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/10/2014 | | | | | | | | |] | Member of | Group >10% | |
| 75 STATE STREET, 29TH FLOOR | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | |
| (Street) BOSTON MA 02109 (City) (State) (Zip) | | | | _ | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | saction | tion 2A. Dee | | ed Date, | 3. Transa Code (8) | action | 4. Securiti | es Acquired (A) or Of (D) (Instr. 3, 4 an | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Class A Common Stock 03/10/2 | | | | 0/2014 | 2014 | | S | | 1,430,46 | | | \$31 | - `- | 0 | D | | |
| 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) | rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | te | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | of | nber ıres | | | | |

Explanation of Responses:

Remarks:

/s/ Jarlyth H. Gibson, Risk Officer

03/12/2014

** Signature of Reporting Person

Date

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.