#### VISA INC. Form 3 February 06, 2014 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires:

# **SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> KELLY ALFRED F JR			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol VISA INC. [V]					
(Last)	(First)	(Middle)	01/29/2014	4. Relationship of Reportin Person(s) to Issuer		g 5. If Amendment, Date Origi Filed(Month/Day/Year)			
P.O. BOX 899	)9						× • •		
(Street)			(Check all applicable)			6. Individual or Joint/Group			
SAN FRANCISCO	CAÂ	94128		X Director Officer (give title below	Othe		Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
	(State)	(Zip)	Table I - 1	Non-Derivat	tive Securiti	ies Be	neficially Owned		
1.Title of Security (Instr. 4)	y			of Securities	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ture of Indirect Beneficial orship		
Class A Comr	non Stoc	k	0		D	Â			
Reminder: Report owned directly or	indirectly. Perso inform	ns who res nation cont	ach class of securities benefic spond to the collection of ained in this form are no ond unless the form disp	r s t	EC 1473 (7-02	2)			
	currer	ntly valid O	MB control number.						

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

2005

0.5

Estimated average burden hours per

response...

Shares

(I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
KELLY ALFRED F JR P.O. BOX 8999 SAN FRANCISCO, CA 94128		Â	Â	Â		
Signatures						
/s/ Jenny Kim, Attorney-In-Fact	02/06/20	)14				
**Signature of Reporting Person	Date					

### **Explanation of Responses:**

\* 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).

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.