FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

I	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burden										
l	hours per response:	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Addr	2. Issuer Name and Ticker or Trading Symbol Shift4 Payments, Inc. [FOUR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner											
(Last) (First) (Middle) 2202 N. IRVING ST							3. Date of Earliest Transaction (Month/Day/Year) 03/10/2022								Officer (g below)	ive title Chairma		Other (s	·	
(Street) ALLENTOWN PA 18109 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indivi	dividual or Joint/Group Filing (Check Applicable Line) K Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	vative	rative Securities Acquired, Disposed of, or Beneficial									lly Owned									
1. Title of Security (Instr. 3) 2. Transa Date (Month/D:							2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or D Of (D) (Instr. 3, 4 and 5)					y Owned Reported	Form	nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D) Price		9	(Instr. 3 and 4)				(111341.4)				
Class A Commo)/2022				P		26,643	A	\$48.72(1)(2)		149,530			D						
Class A Commo)/2022				P		41,263	A	\$49	.54(2)(3)	190,793			D						
Class A Commo	0/2022				P		14,094	A	\$50	\$50.25(2)(4)		204,887		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)	rivative Conversion Date Execution			Date, Transaction Code (Instr					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		ying ty	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V		(A)	(D)	Date Exercisable		Expiration Date	or Nur		ount nber Shares		(Instr. 4)					

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$48.06 to \$49.05, inclusive.
- 2. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnotes (1), (3) and (4).
- 3. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$49.06 to \$50.05, inclusive.
- 4. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$50.06 to \$50.45, inclusive.

Remarks:

/s/ Jordan Frankel, Attorney-in-Fact for Jared Isaacman

** Signature of Reporting Person Date

03/10/2022

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.