FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
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

Name and Address of Reporting Person* Schultz Kevin J				<u>C</u>	2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 10 GLENLAKE PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 10/10/2005									Officer (gi below)	ve title Other (spec below) ef Marketing Officer		specify		
NORTH TOWER					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) ATLANTA	GA	:	30328										X		•	•	ng Person ne Reportin	g Person	
(City)	(Stat	e)	(Zip)																
		-	Table I - Nor	-Deriva	tive S	Securities	s Acq	uired, I	Disp	osed of	, or Ben	efici	ally Ow	ned					
Da				Date	2. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis		Securities Acquired (A) or sposed Of (D) (Instr. 3, 4 and			Securities Beneficially Following F	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) (D)	or	Price	(Instr. 3 and 4)				(111501.4)				
Common Stock 10/1					0/2005		A ⁽¹⁾		14,80	6 ⁽²⁾	\	\$0	14,806			D			
Common Stock													240			I	By IRA		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year))	7. Title and Amou Securities Under Derivative Securi 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s illy	f 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisat		xpiration ate	Title	N	mount or umber of hares		Transacti (Instr. 4)				
Stock Option (right to buy)	\$40.52	10/10/2005		A		100,000(2)		(3) 1		0/10/2015	Common Stock 10		00,000	\$0 100,000		00	D		

- 1. Grant to reporting person of restricted stock from the Global Payments Inc. Amended and Restated 2005 Incentive Plan.
- 2. The number on this Form 4 has been adjusted to reflect the Company's 2-for-1 stock split: record date October 14, 2005; distribution date October 28, 2005.
- 3. Grant to reporting person of option to buy shares of stock. The option will become exercisable in 25% increments on the first (October 10, 2006), second (October 10, 2007), third (October 10, 2008) and fourth (October 10, 2007). 2009) anniversary of the grant.

Remarks:

01/11/2006 By: Suellyn P. Tornay

** 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.