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 Sec	ction 30(h) of the I	nvestment	Com	pany Act c	of 1940	0								
Name and Address of Reporting Person* Hyde Joseph C					2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Picotos 109/ Owner 109/ O						
(Last) (First) (Middle) 10 GLENLAKE PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 02/17/2009								Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer						
NORTH TOWER				4	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) ATLANTA GA 30328														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)) (Z	lip)																	
		T	able I - Noi	n-Deriva	tive S	ecurit	ies Acc	quired, C)isp	osed of	f, or	Benefi	cially Ow	ned						
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				and 5) Securities Beneficiall Following		Form:	nership : Direct (D) lirect (I) : 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock				02/17/2	17/2009		M		1,200		A	\$16.905	36,220		D					
Common Stock				02/17/2	17/2009		S ⁽¹⁾		1,200		D	\$34.22	35,020		D					
Common Stock 02/				02/17/2	17/2009		M		1,550		A	\$18.235	36,570		D					
Common Stock 02/				02/17/2	17/2009		S ⁽¹⁾		1,550		D	\$34.22	35,020		D					
			Table II - I					ired, Dis						ed						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) Price of Derivative			4. Transaction Code (Instr.				6. Date Exercisable a Expiration Date (Month/Day/Year)				erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	· v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		Transaction(s (Instr. 4)					
Non-Qualified Stock Option (right to buy)	\$16.905	02/17/2009		М			1,200	(2)	0	08/07/2013		ommon Stock	1,200	\$0	0		D			
Non-Qualified Stock Option	\$18.235	02/17/2009		М			1,550	(3)	0	06/03/2012		ommon Stock	1,550	\$0	8,250	0	D			

Explanation of Responses:

- 1. Pursuant to 10b(5)-1 Sales Plan executed by reporting person, when he/she was not in possession of material nonpublic information.
- 2. This option will become exercisable in 25% increments on the first (August 7, 2004), second (August 7, 2005), third (August 7, 2006) and fourth (August 7, 2007) anniversary of the grant date.
- 3. This option will become exercisable on the anniversary of the grant date in the following increments: 20% on the second anniversary (June 3, 2004), 25% on the third anniversary (June 3, 2005), 25% on the fourth anniversary (June 3, 2006) and 30% on the fifth anniversary (June 3, 2007).

<u>Joseph C Hyde</u> <u>02/19/2009</u>

** 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.