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

| 1. Name and Address of Reporting Person* Hyde Joseph C | | | | | 2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN] | | | | | | | | | | all applicabl | e) | orting Person(s) to Issuer | | I |
|---|--|--|--|--------|---|------|--|--------|--|-------|------------------|---|---------------|--|---|--|---|---|---|
| (Last) 10 GLENLAK | (First) | , | fiddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2009 | | | | | | | | | X | Officer (g below) Ch | | e title Other (sp below) sef Financial Officer | | specify |
| NORTH TOWER | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Indi | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| Street) ATLANTA GA 30328 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (State) | (Z | ip) | | | | | | | | | | | | | | | | |
| | | Ta | able I - Nor | -Deriv | ative | Secu | uritie | es Acq | uired, C | isp | osed of | , or l | Benefic | ially Ov | /ned | | | | |
| Dat | | | | | Transaction ite onth/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disp | | | Securities Acquired (A) or sposed Of (D) (Instr. 3, 4 and | | | 5. Amount Securities Beneficially Following I Transaction | / Owned Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | (Instr. 3 and 4) | | | | (111501.4) |
| Common Stock 05/1 | | | | | 15/2009 | | | M | | 2,750 | | A | \$18.235 | 37,770 | | | D | | |
| Common Stock 05/1. | | | | | /15/2009 | | | | S ⁽¹⁾ | | 2,750 | | D | \$31.19 | 35,0 | 35,020 | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Yea | Cod | 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 Amour Securities Underly Derivative Security 3 and 4) | | erlying | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported | e s illy | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| Non-Qualified | | | | Cod | le V | (A | (A) (D) | | | | xpiration ate | Title c | | Amount or Number of Shares | | Transaction(s (Instr. 4) | | | |
| Stock Option (right to buy) | \$18.235 | 05/15/2009 | | M | M | | | 2,750 | (2) | 0 | 6/03/2012 | | mmon stock | 2,750 | \$0 | 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 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).

Joseph C Hyde

05/19/2009

** 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.