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* JACOBS WILLIAM I | | | | | 2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN] | | | | | | | | | (Check | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|---|---------------------------------|--|--|---|---------|---|--------|---|------|---|-------|---|-------------------------------------|---|---|----------------|--|--|--|
| (Last) | (First) | , | fiddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2011 | | | | | | | | | | Officer (g below) | | | · | | |
| 10 GLENLAKE PARKWAY NORTH TOWER | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | dividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) ATLANTA | GA | 30 | 0328 | | Form filed by More than One | | | | | | | | ne Reportin | g Person | | | | | | |
| (City) | (State |) (Z | lip) | | | | | | | | | | | | | | | | | |
| | | T | able I - Noı | n-Deri | vative | Se | curiti | es Acq | uired, [| Disp | osed of | f, or | Benefi | cially Ow | ned | | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Year) | | ar) E | 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 | | | | 5. Amount Securities Beneficially Following | y Owned Reported | | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock | Common Stock | | | | 2/16/2011 | | | | М | | 2,00 | 0 | A | \$14.875 | 13,239 | | | D | | |
| Common Stock | | | | 02/10 | 02/16/2011 | | | | S ⁽¹⁾ | | 2,00 | 0 | D \$49.615 | | 11,239 | | D | | | |
| Common Stock | k | | | | | | | | | | | | 21,646 | | | | | I | by Trust | |
| | | | Table II - I | | | | | | | | sed of, o | | | | ed | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | rcise (Month/Day/Year) of tive | 3A. Deemed Execution Da if any (Month/Day/Y | Co | e, Transaction Code (Instr. | | Derivative | | 6. Date Exercisal Expiration Date (Month/Day/Year | | Securiti | | Title and Amount of curities Underlying rivative Security (Instr. ınd 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securitie Beneficia Owned Following Reported | e s ally | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode V | , | (A) | (D) | Date Exercisab | | expiration Pate | Title | | Amount or Number of Shares | | Transacti (Instr. 4) | | | | |
| Non-Qualified Stock Option (right to buy) | \$14.875 | 02/16/2011 | | | М | | | 2,000 | (2) | 1 | 0/25/2011 | | ommon Stock | 2,000 | \$0 | 364 | | 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: 25% on the second anniversary (October 25, 2003), 20% on the third anniversary (October 25, 2004), 25% on the fourth anniversary (October 25, 2005) and 30% on the fifth anniversary (October 25, 2006).

William I Jacobs

02/18/2011

** 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.