FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | | |
| 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* HART ALEX W | | | | | 2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN] | | | | | | | | | | ationship of R all applicab Director | | Person(| s) to Issuer 10% Ov | vner |
|---|--|------------|-------|--|---|---|-----|--|---|---|--------------------|----------------|--|-------------------------------------|---|--|--|---|--|
| (Last) | (First) | (Mi | ddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/06/2015 | | | | | | | | | Officer (g below) | ive title | | Other (s below) | specify | |
| 10 GLENLAKE PARKWAY NORTH TOWER | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | lividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person | | | | | | |
| (Street) ATLANTA (City) | GA (State) | 30 (Zij | 328 | | | | | | | | | | | | Form file | d by More | than O | ne Reportin | g Person |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | | nth/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | ties Acquired (A) or I Of (D) (Instr. 3, 4 and | | | 5. Amount Securities Beneficially Following | y Owned Reported | Form: | nership Direct (D) irect (I) 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transactio (Instr. 3 and | | | | (Instr. 4) | |
| Common Stock 02/0 | | | | | /06/2015 | | | | S | | 5,000 |) | D | \$90.5 | 22,063 | | | 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) | erivative Conversion Date Executi | | | ate, | | ransaction ode (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | e Securities U | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction | e s lly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code V | | (A) | (D) | | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | | | |

Explanation of Responses:

/s/ David L. Green, attorney-in-fact 02/09/2015 for Mr. Alex W. Hart

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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.

^{*} 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).