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* Green David Lawrence | | | | | 2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN] | | | | | | | | | | 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) 08/18/2015 | | | | | | | | | Officer (g below) | pive title Other (below) P and General Counsel | | specify | |
| NORTH TOWER | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| Street) ATLANTA GA 30328-3473 | | | | | | | | | | | | | | | Form file | d by More | than O | ne Reportin | g Person |
| (City) | (State) | (Zi _l | p) | | | | | | | | | | | | | | | | |
| | | Та | ble I - Noı | n-Deri | ivativ | e Se | curitie | s Acqı | uired, l | Disp | osed of, | or l | Benefi | cially Ow | ned | | | | |
| Date | | | | | th/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | ties Acquired (A) or I Of (D) (Instr. 3, 4 and | | | Securities Beneficially Following | Beneficially Owned Following Reported | | nership Direct (D) irect (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 08/1 | | | | | | 8/2015 F ⁽¹⁾ 293 D | | \$117.62 | 13,2 | 13,222 | | 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) | rivative Conversion Date Execution Date, | | | ate, | 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 Amo Securities Unde Derivative Secu (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code V (A | | (A) | (D) | | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | | <u> </u> | |

Explanation of Responses:

1. Represents the disposition of shares to the company to cover taxes on the vesting of awards.

/s/ David L. Green

08/19/2015

** 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.