FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL							
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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 * BALDWIN ROBERT H B JR					2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [ GPN ]									(Chec	S. Relationship of Reporting Person(s) to Issu (Check all applicable)     X Director 10%				/ner
(Last) 10 GLENLAKI NORTH TOWN		,	iddle)		04/22	3. Date of Earliest Transaction (Month/Day/Year) 04/22/2016 4. If Amendment, Date of Original Filed (Month/Day/Year)								Officer (g below) vidual or Joir	nt/Group Fi	Other (specify below)  ling (Check Applicable Line)  Reporting Person		pecify	
(Street) ATLANTA	GA	30	308													d by More			g Person
(City)	(State)	(Zi																	
Dat				2. Tran Date	2. Transaction		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securitie Disposed 0	es Ac	quired (A	) or	5. Amount of Securities Beneficially Ow Following Repo				7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	Amount (A) or Pr		Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 04/					2/2016				<b>A</b> <sup>(1)</sup>		367,57	6	A	\$75.86(2	367,576		D		
Common Stock				04/2	04/22/2016				A <sup>(3)</sup>		989		A	\$73.29	368,	565	65 D		
Common Stock				04/22/2016					A <sup>(1)</sup>		20,356	5	A	\$75.86 <sup>(2</sup>	20,3	356	1	[	Robert H.B. Baldwin, Jr. Trust U/A/D June 30, 2004 <sup>(4)</sup>
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Execuse Security (Instr. 3) or Exercise (Month/Day/Year) if any		3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	Owners Form: Direct (I) Or Indirect (I) (Instr	vnership orm:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Explanation of Re	2000001				Code V (A)		(D)	Date Exercisa	able	Expiration Date	Title	1	Amount or Number of Shares		(Instr. 4)	UII(3)			

- 1. Acquired pursuant to an Agreement and Plan of Merger dated as of December 15,2015, by and among Global Payments Inc. and Heartland Payments Systems Inc., and certain wholly owned subsidiaries of Global Payments Inc. (the "Merger Agreement").
- 2. Represents the volume weighted average trading price of Global Payment Inc.'s common stock on the New York Stock Exchange for the five consecutive trading days preceding the closing date, in accordance with the terms of the Merger Agreement.
- 3. Represents fully-vested shares of common stock, which were granted to the reporting person as compensation for service as a non-employee director.
- 4. Shares held by the Robert H.B. Baldwin, Jr. Trust U/A/D June 30, 2004 (the "Trust"). The reporting person disclaims beneficial ownership of the securities held in the Trust, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or any other.

/s/ David L. Green, attorney-in-fact 04/26/2016 for Mr. Robert H.B. Baldwin, Jr.

\*\* Signature of Reporting Person

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.