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*     Elliott Jane Marie					2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [ GPN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) 10 GLENLAK		,	fiddle)		3. Date of Earliest Transaction (Month/Day/Year) 07/29/2016								X	Officer (gi		Other (specify below)		· I	
NORTH TOWER  (Street)  ATLANTA GA 30328				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(State)	(Z	ip)																
		Ta	able I - Nor	า-Deriva	tive S	ecuritie	s Acq	uired, [	Disp	osed of	, or Be	enefic	ially Ow	ned					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and 5)			5. Amount Securities Beneficially Following F	Owned Form or In Reported (Inst		nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A)	) or )	Price	(Instr. 3 and				(111341.4)		
Common Stock					/29/2016					684	.	A	\$74.66	11,607			D		
Common Stock 07					30/2016			F <sup>(2)</sup>		1,39	4	D	\$74.66	10,213			D		
			Table II - I	Derivativ e.g., put										ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Code	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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		Transacti (Instr. 4)	ion(s)			
Non-qualified Stock Option (Right to Buy)	\$74.66	07/29/2016		A		2,334		(3)	0	7/29/2026	Comm		2,334	\$0	2,334	4	D		

## **Explanation of Responses:**

- 1. Represents restricted shares of common stock, which were granted to the reporting person as compensation. The restricted shares will vest in equal installments on each of the first three anniversaries of the grant date.
- $2. \ Represents the \ disposition \ of \ shares \ to \ the \ company \ to \ cover \ taxes \ on \ the \ vesting \ of \ awards.$
- 3. Represents unvested options to purchase shares of common stock, which were granted to the reporting person as compensation. The stock options will vest in equal installments on each of the first three anniversaries of the grant date.

/s/ David L. Green, attorney-in-fact 08/02/2016 for Jane M. Elliott

Date

\*\* Signature of Reporting Person

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

- $^{\star}$  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.