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

1. 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) 3550 LENOX	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 07/26/2017									X	Officer (give title below)		Other (spec below)		-
(Street) ATLANTA (City)	GA (State)	30 (Zi <sub>l</sub>	326		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	dividual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person				
		Та	ble I - Noı	n-Der	ivativ	e Se	curitie	s Acq	uired, l	Disp	osed of,	, or I	Benefi	cially Ow	/ned				
Date				e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)					urities Acquired (A) or sed Of (D) (Instr. 3, 4 ar			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	nount (A) or (D)		Price	(Instr. 3 an				(111501.4)	
Common Stock 07/2					//26/2017				F <sup>(1)</sup>		328		D	\$95.3	28,0	,032(2)		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any (Month/Day/Year) Coc (Month/Day/Year)		Transact Code (In	ransaction ode (Instr. )  Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date		or Nun		derlying curity ) Amount	mount r umber		er of e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## Explanation of Responses:

- 1. Represents the disposition of shares to the company to cover taxes on the vesting of awards.
- $2.\ Balance\ includes\ shares\ acquired\ under\ the\ company's\ dividend\ reinvestment\ plan\ and\ employee\ stock\ purchase\ plan.$

/s/ David L. Green

07/28/2017

\*\* Signature of Reporting Person

Date

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.