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* BALDWIN ROBERT H B JR					2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN]									(Check	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First)	(M	iddle)			Date of Earliest Transaction (Month/Day/Year) 6/05/2020									Officer (give title below)			Other (s below)	·	
3550 LENOX ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ATLANTA	GA	30	326									X	Form filed by One Reporting Person Form filed by More than One Reporting			g Person				
(City)	(State)	(Zi	p)																	
		Та	ble I - Nor	n-Der	ivativ	e Se	curitie	s Acq	uired, l	Disp	osed of,	or	Benefi	cially Ow	ned					
				2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securiti Disposed				5. Amount Securities Beneficially Following	y Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock				06/0	06/05/2020				G	V	1,200		D	\$0 ⁽¹⁾	36,402		D			
Common Stock				06/12/2020					S		64		D	\$178.37	8,792		I		By Trust ⁽²⁾⁽³⁾	
Common Stock			06/12/2020					G	V	850		D	\$0 ⁽¹⁾	7,942		I		By Trust ⁽²⁾⁽³⁾		
	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	(Month/Day/Year) e of vative	Execution Date,		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date I Expirati (Month/	on Da	Derivative Securit (Instr. 3 and 4)		nderlying ccurity 1)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)			Expiration Date	or piration Nu		Amount or Number of Shares	(Instr. 4)					

Explanation of Responses:

- Shares were transferred without consideration.
- 2. Represents shares acquired by the reporting person in connection with a family member moving into the reporting person's household.
- 3. Shares held by the The Robert H.B. Baldwin, Jr. Trust U/A June 30, 2004 FBO J. Spencer Baldwin (the "Trust"). The reporting person disclaims beneficial ownership of the securities held through the Trust except to the extent of his pecuniary interest therein and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

/s/ David L. Green, attorney-in-fact of Mr. Robert H.B. Baldwin, Jr. 06/15/2020

** 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.