FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Ш

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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 Addre | | | 2. Issuer Name and Ticker or Trading Symbol <u>GLOBAL PAYMENTS INC</u> [GPN] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|-------------------|---------|----------|---|--|--|--|--|--|--|--|
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2021 | X Director 10% Owner Officer (give title Other (specify | | | | | | |
| (Last) | (First) | (Middle) | 03/13/2021 | below) below) | | | | | | |
| 3550 LENOX ROAD | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | X Form filed by One Reporting Person | | | | | | |
| ATLANTA | GA | 30326 | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following 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 | 04/30/2021 | | A ⁽¹⁾ | | 932 | A | \$214.63 | 4,979 | D | | |
| Common Stock | 03/15/2021 | | G | v | 15,082 | D | (2) | 26,894 | I | By grantor retained annuity trust 2020 | |
| Common Stock | 03/15/2021 | | G | v | 15,082 | A | (2) | 17,907 | Ι | John T Turner Revocable Trust Dated 5/14/74 | |
| Common Stock | | | | | | | | 466,617 | I | By W C Bradley Investments | |
| Common Stock | | | | | | | | 65 | I | The Amanda Turner Revocable Trust dated 8/2/85 | |

| | 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) | | 4. Transaction Code (Instr. 8) | | 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) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |

Explanation of Responses:

1. Represents fully-vested shares of common stock, which were granted to the reporting person as compensation for service as a non-employee director.

2. Shares were transferred without consideration.

/s/ David L. Green, attorney-in-fact 04/30/2021 for John T. Turner

** 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.