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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

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

10b5-1(c). See Ir	nstruction 10.				
1. Name and Address of Reporting Person* Green David Lawrence			2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN]	5. Relationship of Reporting Po (Check all applicable)	erson(s) to Issuer
(Last) 3550 LENOX	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/28/2025	X Officer (give title below) Chief Adminis	Other (specify below)
(Street) ATLANTA	GA (State)	30326	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Fili X Form filed by One R Form filed by More t	, ,

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)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)
Common Stock	02/28/2025		A ⁽¹⁾		9,618	A	\$105.28	78,068	D	
Common Stock	02/28/2025		A ⁽²⁾		3,791	A	\$105.28	81,859	D	
Common Stock	03/01/2025		F ⁽³⁾		2,163	D	\$105.28	79,696	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (Right to Buy)	\$105.28	02/28/2025		A		22,621		(4)	02/28/2035	Common Stock	22,621	\$105.28	22,621	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 restricted shares of common stock, which were granted to the reporting person as compensation. The restricted shares will vest in their entirety on the first anniversary of the grant date.
- ${\it 3. Represents the disposition of shares to the company to cover taxes on the vesting of awards.}\\$
- 4. 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

03/03/2025

** 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.