Edgar Filing: Bready Cameron M - Form 4

| Bready Came Form 4 | eron M | | | | | | | | | | |
|---|---|-------|--|--|------------|------------------------------|--|---|---|---|--|
| Form 4 March 02, 2018 FORM 4 UNITED STATES SECURITIES AND EXCHANGE 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). STATEMENT OF CHANGES IN BENEFICIAL OV SECURITIES Filed pursuant to Section 16(a) of the Securities Exchar Section 17(a) of the Public Utility Holding Company Act 30(h) of the Investment Company Act of 19 | | | | | | LOWN Exchange y Act of | ERSHIP OF Act of 1934, 1935 or Sectior | OMB Number: Expires: Estimated a burden hour response | • | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Bready Cameron M | | | 2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) 3550 LENOX ROAD | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018 | | | | | (Check all applicable) <u></u> Director <u></u> 10% Owner <u>X_</u> Officer (give title <u></u> Other (specify below) Senior Executive VP and CFO | | | |
| | | | | nendment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| ATLANTA, | , GA 30326 | | | | | | | Form filed by M Person | ore than One Rej | porting | |
| (City) | (State) | (Zip) | Tabl | le I - Non-E | Derivative | Secur | ities Acqu | iired, Disposed of, | , or Beneficiall | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | 3. Transactio Code (Instr. 8) Code V | (Instr. 3, | spose | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 03/01/2018 | | | F <u>(1)</u> | 732 | D | \$ 111.45 | 139,430 | D | | |

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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| 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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | int of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|--------------------|--|-----------------------------|-------|--|--|--|--|
| | Director 10% Owner | | Officer | Other | | | | |
| Bready Cameron M 3550 LENOX ROAD ATLANTA, GA 30326 | | | Senior Executive VP and CFO | | | | | |
| Signatures | | | | | | | | |
| /s/ David L. Green, attorney-in-fact for Cameron M. Bready | | | 03/02/2018 | | | | | |
| **Signature of Reporti | ng Person | | Date | | | | | |

Explanation of Responses:

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).

(1) Represents the disposition of shares to the company to cover taxes on the vesting of awards.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.