FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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)

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* MUMA LESLIE M					2. Issuer Name and Ticker or Trading Symbol Fidelity National Information Services, Inc.								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MUMA LESLIE M				1	[FIS]							_	X Director			10% Ov	vner	
(Last)	.ast) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)						\dashv	Officer (give title below)			Other (s below)	specify	
601 RIV	601 RIVERSIDE DR.					02/24/2017												
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
JACKSONVILLE FL 32713												X Form filed by One Reporting Person						
(City)	City) (State) (Zip)											Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				:	Execution Date,			, Transaction Disposed Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4		nd Secu Bene Owne	icially d Following	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) o	Price		ted action(s) 3 and 4)			(Instr. 4)	
		Т	able II - Der (e.g								, or Ben ble secu		y Owne	d				
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/Yea	Code	action (Instr.			6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		xpiration ate	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$66.18	02/24/2017		A		2,081		(1)	1	1/05/2022	Common Stock	2,081	\$0	2,08	1	D		
Stock Option (Right to	\$58.23	02/24/2017		A		4,243		(2)	1	1/04/2021	Common Stock	4,243	\$0	8,48	_	D		

Explanation of Responses:

1. On November 5, 2015, the reporting person was granted an option to purchase 6,245 shares of common stock. The option vests in three equal installments based on FIS's satisfaction of certain performance criteria for each of the calendar years ending December 31, 2016, 2017, and 2018. Based on FIS's Annual Report on Form 10-K filed on February 23, 2017, the Compensation Committee of FIS determined that the performance criteria for 2016 had been met, resulting in vesting of the option as to 2,081 shares.

2. On November 4, 2014, the reporting person was granted an option to purchase 12,730 shares of common stock. The option vests in three equal installments based on FIS's satisfaction of certain performance criteria for each of the calendar years ending December 31, 2015, 2016, and 2017. Based on FIS's Annual Report on Form 10-K filed on February 23, 2017, the Compensation Committee of FIS determined that the performance criteria for 2016 had been met, resulting in vesting of the option as to 4,243 shares.

> /s/ Marc M. Mayo, attorney-in-02/27/2017 <u>fact</u>

** 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.