## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
notruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  BICKETT BRENT B						Issuer Name and Ticker or Trading Symbol     Fidelity National Information Services, Inc.     [ FIS ]									k all app Direct Office	er (give title	10 <sup>0</sup> Oth	6 Owner er (specify
(Last) (First) (Middle) 601 RIVERSIDE AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 07/20/2011								A	belov Cor	v) porate EVI	bel P, Corp. Fir	<i>'</i>
(Street)  JACKSONVILLE FL 32204  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date						Execution Date			Transaction Disposed Code (Instr. 5)		4. Securiti Disposed 5)						6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect
									Code	v	Amount	(A) (D)	or Pr	ice	Transa	ction(s) 3 and 4)		(,
Common Stock 07/20/2					/2011	2011		F		6,882	Ι	\$	30.47	137,	717.9168	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. Deem Execution if any (Month/Da	n Date,	4. Transaction Code (Instr. 8)		n of		6. Date E Expiration (Month/E	n Dat		Amour Securit Underl Derivat			rice of ivative urity tr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Shares	er				

**Explanation of Responses:** 

/s/ Stacey A. Lombardi, attorney-in-fact

07/22/2011

\*\* 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.