I

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

3235-0287

| IERSHIP | OMB Number: 3            |
|---------|--------------------------|
|         | Estimated average burden |
|         | hours per response:      |

| obligations may continue. See<br>Instruction 1(b).                         | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934                                         |                                                                                        | hours per response:          | 0.5    |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|------------------------------|--------|
|                                                                            | or Section 30(h) of the Investment Company Act of 1940                                                         |                                                                                        |                              |        |
| 1. Name and Address of Reporting Person <sup>*</sup><br>Gravelle Michael L | 2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Fidelity National Information Services, Inc.</u> [ FIS ] | 5. Relationship of F<br>(Check all application)<br>Director<br>X Officer (gi<br>below) | 10% Own                      | ner    |
| (Last) (First) (Middle)<br>601 RIVERSIDE AVENUE                            | 3. Date of Earliest Transaction (Month/Day/Year)<br>03/20/2008                                                 | í (                                                                                    | en'l Counsel, Asst. Sect     |        |
| (Street)                                                                   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                                       | 6. Individual or Joir<br>Line)                                                         | nt/Group Filing (Check Appli | icable |
| JACKSONVILLE FL 32204                                                      |                                                                                                                | X Form filed                                                                           | by One Reporting Person      |        |
| (City) (State) (Zip)                                                       |                                                                                                                | Form filed<br>Person                                                                   | l by More than One Reporti   | ng     |

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

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transa<br>Code (<br>8) |   | Owned Following<br>Reported   |               | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |           |
|---------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|---|-------------------------------|---------------|-------------------------------------------------------------------|-------------------------------------------------------------------|---|-----------|
|                                 |                                            |                                                             | Code                         | v | Amount                        | (A) or<br>(D) | Price                                                             | Transaction(s)<br>(Instr. 3 and 4)                                |   | (1130. 4) |
| Common Stock                    | 03/20/2008                                 |                                                             | A                            |   | 2 <b>,</b> 200 <sup>(1)</sup> | Α             | \$0.00                                                            | 3,975                                                             | D |           |

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | 5. Nu<br>of<br>Deriv<br>Secu<br>Acqu<br>(A) or<br>Dispo<br>of (D)<br>(Instr<br>and 5 | ative<br>rities<br>ired<br>osed<br>. 3, 4 | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y | ate                | 7. Title<br>Amour<br>Securit<br>Underl<br>Derivat<br>Securit<br>and 4) | nt of<br>ties<br>ying                  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|-----------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|---|--------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------|--------------------|------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|
|                                                     |                                                                       |                                            |                                                             | Code                         | v | (A)                                                                                  | (D)                                       | Date<br>Exercisable                            | Expiration<br>Date | Title                                                                  | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                                                                            |                                                                          |                                                                    |

Explanation of Responses:

1. Grant of restricted common stock vesting in eight equal increments on the last day of every fiscal quarter beginning June 30, 2008. The grant shall be 100% vested on March 31, 2010. **Remarks:** 

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| Michael  | L. | Gravel   | le  |
| witchaci | ц, | Ulaver   | IC. |

\*\* Signature of Reporting Person

03/20/2008

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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWN