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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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 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

| OMB APPROVAL | | | | | | | | | |
|-------------------|-----------------|--|--|--|--|--|--|--|--|
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|---|--------------------------|-----|
| | hours per response: | 0.5 |
| | Estimated average burden | |

| 1. Name and Address of R | 1 0 | * | 2. Issuer Name and Ticker or Trading Symbol Fidelity National Information Services, Inc. | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|-----|----------|--|---|-------------------------------------|-----------------------|--|--|--|
| FOLEY WILLIAM P II | | | [FIS] | X | Director | 10% Owner | | | |
| (Loot) (Eirst) (Middle) | | (Middle) | | Х | Officer (give title below) | Other (specify below) | | | |
| (Last) (First) (Middle) 601 RIVERSIDE AVENUE | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 03/20/2008 | | Executive Chain | , | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | /idual or Joint/Group Filing (| Check Applicable | | | |
| JACKSONVILLE FI | | 32204 | | X | Form filed by One Report | ing Person | | | |
| (City) (Stat | te) | (Zip) | | | Form filed by More than C Person | One Reporting | | | |

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) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
|---------------------------------|--|---|------------------------------|---|---|---------------------|---|---|---|--|--|--|
| | | | Code | v | Amount | (A) or (D) Price | | Transaction(s) (Instr. 3 and 4) | | (instr. 4) | | |
| Common Stock | 03/20/2008 | | A | | 25,800 ⁽¹⁾ | A | \$0.00 | 845,828 | D | | | |
| Common Stock | | | | | | | | 1,316,404 | Ι | Folco Development Corporation | | |
| Common Stock | | | | | | | | 311,222 | Ι | Foley Family Charitable Foundation | | |
| Common Stock | | | | | | | | 27,872.01 | I | Reporting Person's ESPP/401(k) accounts | | |

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

| | (e.g., puis, cans, 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. Transa Code (8) | | ו of ו | | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 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 | | | | |

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:

William P. Foley II

** Signature of Reporting Person

03/21/2008

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.