## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

·			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner  Officer (give title below) Other (specify below)					2. Issuer Name and Ticker or Trading Symbol Fidelity National Information Services, Inc.  [FIS]  3. Date of Earliest Transaction (Month/Day/Year) 11/05/2009								(Middle)	irst) VENUE	•	•	(Last) 601 RI								
				Li	. If Amendment, Date of Original Filed (Month/Day/Year)									_		32204 (Zip)	state)	ILLE F	CKSO	(Street)  JACKS (City)								
unt of 6. Cores (D) (I) (I) (I) (I)	5. Amount of Securities Beneficially Owned Following		or	(A) or	uired (A	ties Acquire	4. Securities Acquisposed Of (D) (5)		3. Transaction		ed Date,	ction 2A. Deemed Execution Date if any (Month/Day/Ye		saction	2. Trai	le I - No		rity (Insti	le of S	1. Title o								
ction(s)	Transacti (Instr. 3 a	e Trans (Instr.	rice \$0	Price	)	(A) or (D)	ount 500 <sup>(1)</sup>	,	\	Code			9	05/200	11/			ck	ımon	Commo								
9. Number of	Owned  8. Price of Derivative Security (Instr. 5)	Illy Owned  S)  Int B. Price Derivative Security (Instr. 5)	ally Ces)  ount E	Title and Amount Securities Inderlying Perivative Security		of Securities Underlying Derivative Secu (Instr. 3 and 4)						6. Date Exercis Expiration Date (Month/Day/Yea		5. Number 6.		ansaction of Universe (A) or Universe (A) of (D) (Instr.		transaction Code (Instr. 8)  5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (ii			ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr.		Deriv (e.g.,		3. Transaction Date (Month/Day/Year)	oversion exercise e of evative urity	e of ative rity . 3)	1. Title of Derivativ Security (Instr. 3)
15,800	\$0	s	res	of Shares	of Sh	Title  Common		Dat	ble	Date Exercisa		(A)	v	Code			11/05/2009	22 55	n	Stock Option								
	y Owned  5. Amou Securiti Benefic Owned Reporte Transac (Instr. 3	X Forr Forr Forr Pers    Sally Owner   S. Am Security	cially or 4 and rice \$0 ally Ces) ount burnt ober res	Price \$  Price    Price    Amount    Amount	or I I I I I I I I I I I I I I I I I I I	(A) or (D)  (A) or (D)  (B)  (A) or (D)  (C)  (B)  (A) or (D)  (C)  (C)  (D)  (E)  (E)  (E)  (E)  (E)  (E)  (E	bunt 5500 <sup>(1)</sup> I of, cc	pos COI	Dispose Dispos	3. Trans Code 8) Code A uired, 16, optio 6. Date Expiration (Month/E	Acquants,  oer 6 es (ded nstr. 5)	A. Deeme xecution any Month/Da rities / 6, Warra 5. Numb of Derivatir Acquire (A) or Dispose of (D) (Ir 3, 4 and	2 E ii (()	saction //Day/Ye 25/200 ative puts, 4. Transa Code (	2. Trai Date (Mont)	(Zip)  Fable II -  3A. Deeme Execution if any	Tab tr. 3)  3. Transaction Date	ck	e of S  e of ative tity 3)	JACKS (City)  1. Title of Derivative Security (Instr. 3)								

## **Explanation of Responses:**

- 1. Shares of restricted stock granted pursuant to the Metavante Technologies, Inc. 2007 Equity Incentive Plan. Subject to the additional requirements of the next sentence, one-third of the aggregate number of shares of restricted stock granted vest on each of the first three anniversaries of the date of grant. In addition, the vesting of the restricted stock is subject to the Company achieving \$280 million in synergy cost savings on or before December 15, 2011.
- 2. This option was granted pursuant to the Metavante Technologies, Inc, 2007 Equity Incentive Plan and vests in three equal annual installments beginning on November 5, 2010.

/s/ Stacey A. Lombardi, as

11/09/2009

Attorney-in-Fact

\*\* 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.