SEC Form 4	
------------	--

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287

0.5

Estimated average burden hours per response:

	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

1. Name and Address of Reporting Person [*] Ferris Stephanie						ymbol on Services, Inc.		tionship of Reportin all applicable) Director Officer (give title	10% (ssuer Owner (specify	
(Last) 347 RIVEI	(First) RSIDE AVE	(Middle)	3. Date 02/28	e of Earliest Transa /2024	ction (Month/E	Day/Year)		below) CEO and	below d President)	
(Street) JACKSONVILLE FL 32202				nendment, Date of	Original Filed	(Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)		eck this box to indica	ite that a transa	on Indication ction was made pursuant to a lle 10b5-1(c). See Instruction		instruction or written	plan that is intende	ed to satisfy	
		Table I - Non	-Derivative S	ecurities Acq	uired, Dis	posed of, or Benefi	cially	Owned			
1. Title of Se	curity (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	

		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	02/28/2024	М		22,092	Α	\$ <mark>0</mark>	106,629.321	D	
Common Stock	02/28/2024	F		7,293(1)	D	\$66.98	99,336.321	D	
Common Stock	02/28/2024	М		5,600	Α	\$ <mark>0</mark>	104,936.321	D	
Common Stock	02/28/2024	F		1,363(1)	D	\$66.87	103,573.321	D	

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

	(e.g., puts, 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)		of Deri Sec Acq (A) Disp of (I	umber ivative urities uired or oosed O) (Instr. and 5)			of Securities		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				
Restricted Stock Units	\$0 ⁽²⁾	02/28/2024		м			22,092	02/28/2024 ⁽³⁾	(3)	Common Stock	22,092	\$0	44,185	D	
Restricted Stock Units	\$0 ⁽²⁾	02/28/2024		М			5,600	02/28/2023 ⁽³⁾	(3)	Common Stock	5,600	\$0	5,601	D	

Explanation of Responses:

1. Represents shares to satisfy withholding tax obligation for Restricted Stock Unit vesting.

2. Each restricted stock unit represents a contingent right to receive one share of FIS common stock.

3. The restricted stock units vest and distribute in three equal annual installments on each anniversary date.

Remarks:

/s/ Matthew Ricciardi, attorneyin-fact for Stephanie L. Ferris 03/01/2024

** 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.