FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AP	PROVAL	

OMB Number: Estimated average burden hours per response: 0.5

instruction ±(b).	or Section 30(h) of the Investment Company Act of 1934
Name and Address of Reporting Person*	2. Issuer Name and Ticker or Trading Symbol

Name and Address of Reporting Person* FOLEY WILLIAM P II					Fi	Issuer I <mark>delit</mark> FIS]	Name and y Natio	d Tic Ona	ker or T l Info	rading rma	Symbol tion Serv	<u>C.</u> 5. (C	Relationship of theck all application X Director Officer	10%		o Issuer % Owner ner (specify			
(Last) (First) (Middle) 601 RIVERSIDE AVENUE (Street) JACKSONVILLE FL 32204					Date o		Trans	saction	(Month	n/Day/Year)		below)	give title			below)			
				4.	If Ame	ndment, D	ate (of Origin	nal File	ed (Month/Day		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)										Person						
		Tal	ble I - N	lon-Der	ivativ	e Se	curities	Ac	quire	d, Di	sposed o	f, or Be	neficia	lly Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye		Execution Date,		· '	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5)			5. Amount of Securities Beneficially Owned Follow	Form: Dir (D) or Indi		ect Indi irect Ben I) Owr	eficial ership			
									Code V		Amount	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			03/29/	03/29/2017				A		3,124(1)	A	\$0	205,270)	D	D		
Common	Stock													269	I By Wife			Wife	
Common	Stock																co velopment poration		
Common Stock													155,238		I	Cha	Foley Family Charitable Foundation		
			Table I								posed of, convertib			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I	med	e, Transac Code (In		5. Number of Derivative		1			7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amoun or Numbe of Shares	er	(Insti				
Stock Option (Right to Buy)	\$62.92	03/29/2017			A		9,067 ⁽²⁾		03/29)/2017	03/29/2023	Common Stock	9,067	7 \$0		9,067	D		
Stock Option	\$80.03	03/29/2017			A		19,639		(3)	03/29/2024	Common	19,63	9 \$0	1	9,639	D		

Explanation of Responses:

(Right to

Buy)

- 1. On March 29, 2017, the reporting person was granted time-based restricted stock, which vests in three equal annual installments commencing on the first anniversary of the date of grant.
- 2. On March 29, 2016, the reporting person was granted an option to purchase 27,203 shares of common stock. The option vests in three equal installments based on FIS's satisfaction of certain performance criteria for each of the calendar years ending December 31, 2016, 2017, and 2018. Based on FIS's Annual Report on Form 10-K filed on February 23, 2017, the Compensation Committee of FIS determined that the performance criteria for 2016 had been met, resulting in vesting of the option as to 9,067 shares.
- $3. \ The \ option \ vests \ in \ three \ equal \ installments \ commencing \ on \ the \ first \ anniversary \ date \ of \ the \ grant.$

/s/ Marc M. Mayo, attorney-in-

03/31/2017

fact

Stock

** Signature of Reporting Person

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.