Shea Brian T			
Form 3/A			
June 22, 2018			
FORM 3	UNITED STATES SECURITIES AND EXCHANGE COMMISSION	OMB AP	PROVAL
	Washington, D.C. 20549	OMB Number:	3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Shea Brian T		2. Date of Event RequiringStatement(Month/Day/Year)	³ 3. Issuer Name and Ticker or Trading Symbol Fidelity National Information Services, Inc. [FIS]				
(Last) 601 RIVERS	(Street)		06/11/2018	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Officer 10% Owner Officer (specify below)) Owner r	 5. If Amendment, Date Original Filed(Month/Day/Year) 06/14/2018 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)	Table I - N	Non-Deriva	tive Securit	ies Be	neficially Owned
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	1
Common Sto	ock		2,920		D	Â	
Common Sto	ock		1,050		Ι	UGN acco	MA custodial for children unts

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Shea Brian T 601 RIVERSIDE AVE JACKSONVILLE, FL 32204	ÂX	Â	Â	Â		
Signatures						
/s/ Marc M. Mayo, attorney-in-fact	06/2	22/2018				
**Signature of Reporting Person		Date				

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.