FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per response       | 0.5       |  |  |  |  |  |  |  |

|  | tion 1(b).  | nue. S <i>ee</i> |           | File                                   |  |   |         |                                  | a) of the Secu<br>Investment (   |                 |   |  | 934                                       |   | nours p  | per respons       | se:<br> | 0.5       |
|--|---|------------------|-----------|--|--|---|---------|----------------------------------|--|-----------------|---|--|---|---|--|-------------------|---------|-----------|
| Name and Address of Reporting Person*     Hook Lisa  |   |                  |           | Fid                                    | 2. Issuer Name and Ticker or Trading Symbol Fidelity National Information Services, Inc. [FIS] |   |         |                                  |  |                 | C. Cr   | neck all appl  | or  | 1   | ,<br>0% Ow   | ner               |         |           |
| (Last)<br>347 RIV  | (Fi<br>ERSIDE AV  |                  | Middle)   |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 05/24/2023   |         |                                  |  |                 |   |  | Officer<br>below)                         | (give title   |  | other (s<br>elow) | pecify  |           |
| (Street) JACKSONVILLE FL 32202   |   |                  |           | 4. If <i>A</i>                         | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                       |   |         |                                  |  |                 | Lin   | . Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |  |                   |         |           |
| (City)   | (St   | ate) (           | Zip)      |  |  | Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |         |                                  |  |                 |   |  |   | ed to   |  |                   |         |           |
|  |   | Table            | e I - Non | -Deriv                                 | ative \$   | Sec   | urities | s Ac                             | quired, D  | ispose          | d of, or  | Ben  | eficia                                    | lly Owne  | d  |                   |         |           |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da   |   |                  |           | Execution Date,                        |  | 3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3)  5)  |         |                                  |  | Benefic         | es<br>ially<br>Following                            | Form: Dire   | rm: Direct or Indirect (Instr. 4)         | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |                   |         |           |
|  |   |                  |           |  |  |   |         |                                  | Code   | V Amo           |   | (A) or<br>(D)  | Price                                     | Transac<br>(Instr. 3  | tion(s)  |                   |         | 111301.4) |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |                  |           |  |  |   |         |                                  |  |                 |   |  |   |   |  |                   |         |           |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any |                  |           | Fransaction of Code (Instr. Derivative |  | Expiration Date<br>(Month/Day/Year)   |         | Amou<br>Secur<br>Under<br>Deriva | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4)                   | Own<br>Forn<br>Direct<br>or In<br>(I) (Ir | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                   |         |           |
|  |   |                  |           |  | Code   | v   | (A)     | (D)                              | Date<br>Exercisable  | Expiration Date | on<br>Title   | 0<br>N   | Amount<br>or<br>Number<br>of<br>Shares    |   |  |                   |         |           |
| Restricted<br>Stock<br>Units   | (1)   | 05/24/2023       |           |  | A  |   | 3,854   |                                  | (2)  | (2)             | Comn  |  | 3,854                                     | \$0   | 3,854  |                   | D       |           |

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of FIS common stock.
- 2. This restricted stock unit vests in full on May 24, 2024. The reporting person elected to defer distribution of the vested common stock until the end of service as a director.

## Remarks:

/s/ Charles H. Keller, attorney-05/26/2023 in-fact for Lisa Hook

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.