FORM 4

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

Common Stock 11/30/2021 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2021 4. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Date (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Date (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Date (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Date (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Date (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Date (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Line) 2. Transaction (Month/Day/Year) 6. Individual or Joint/Group Filing/Check Applicable Lin	GOLISANO B THOMAS					PAYCHEX INC [PAYX]						(Check all applicable) _X_ Director _X_ 10% Owner							
ROCHESTER, NY 14625 (City) (Slate) (Zep) Table I - Non-Derivative Securities Acquired, (A) or Disposed of, or Beneficially Owner Floring (Instr. 3) A periodic (Instr. 4) Table I - Non-Derivative Securities Acquired, (A) or Disposed of, or Beneficially Owner Floring (Instr. 4) Table I - Non-Derivative Securities Acquired (Instr. 3) A periodic (Instr. 3) A periodic (Instr. 4) Table I - Non-Derivative Securities Acquired (Instr. 3) A periodic (Instr. 4) Table I - Non-Derivative Securities Acquired (Instr. 3) A periodic (Instr. 4) Table I - Non-Derivative Securities Acquired (Instr. 3) A periodic (Instr. 4) Table I - Non-Derivative Securities Acquired (Instr. 3) A periodic (Instr. 4) Table I - Non-Derivative Securities Acquired (Instr. 3) A periodic (Instr. 4) Table II - Non-Derivative Securities Acquired (Instr. 4) Table II - Derivative Securities Acquired (Instr. 4) Table II - Derivative Securities Acquired (Instr. 3) Table II - Derivative Securities Acqu	` ′		` ′				iest Tra	nsact	ion ((Month/Da	ay/Yea	r)		Office	r (give title belo	ow)	Othe	r (specify belo	w)
Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) Date (Month/	ROCHES	STER, NY	, ,		4. If	Amendmo	ent, Dat	e Ori	ginal	l Filed(Mon	nth/Day/Y	Year)		_X_ Form fil	ed by One Repo	orting Person	1	• •	Line)
Common Stock 11/30/2021 Securities Code C	(City))	(State)	(Zip)			Table	I - N	on-I	Derivative	Secur	ities A	cqui	ired, Dispe	osed of, or I	Beneficia	lly Ow	ned	
Common Stock 11/30/2021 G V 656 (II) D S 123.73 51,898 I Cynthia A. Golisano Irrevocable Trust U/A dtd 6/13/2005 Common Stock 37,508,852 D		ecurity		Date	Execut any	ion Date, i	f Code (Instr		tion	(A) or Di	4 and 3	d of (D)) I	Beneficiall Reported T	y Owned For ransaction(s	llowing	Owne Form: Direct or Ind (I)	rship India Bend (Inst	ect eficial ership
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 control number. Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of Derivative Conversion Security or Exercise (Instr. 3) A. Deemed Execution Date Or Exercise (Instr. 3) Date Or Derivative Securities Acquired (Month/Day/Year) Owner/Derivative Securities Operivative Se	Common	Stock		11/30/2021								\$		51,898			(Instr.	Cyr Gol Irre Tru dtd	isano vocable st U/A
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 control number. Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) Title of Derivative Security (Instr. 3) Price of Derivative Security Security (Instr. 3) Price of Derivative Security Securities Security Securities Securi	Common	Stock											3	37,508,8	52		D		
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	Derivative Security	Conversion or Exercise Price of Derivative	Date	Execution Execution any	ned n Date, if	4. Transacti Code	5. Num of Der Seco Acq (A) Disp of (I (Ins	nber ivativ urities urited or posed D) tr. 3,	6. an (N	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration 7. Au Uu Se (II 4)		7. Ti Amo Undo Secu (Inst 4)	Amount or Number	Derivative Security (Instr. 5) Reporte Transac (Instr. 4		ve es ally ng d	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial Ownership (Instr. 4)	

Reporting Owners

D 4 0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GOLISANO B THOMAS 911 PANORAMA TRAIL S.	X	X					
ROCHESTER, NY 14625	Λ	Λ					

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	12/03/2021

**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Quarterly distribution pursuant to the irrevocable trust for which Mr. Golisano was named trustee on 7/22/08.

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.