# FORM 4

(Print or Type Responses)

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

OMB APPROVAL
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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 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

1. Name and Address of Reporting Person – GOLISANO B THOMAS					2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]								Check all applicable)  _X_ Director  Check all applicable)  _X_ Director						
(Last) (First) (Middle) 911 PANORAMA TRAIL S.				3. Date of Earliest Transaction (Month/Day/Year) 08/21/2009							•		r (give title belo			er (specify belo	ow)		
(Street)  ROCHESTER, NY 14625			4. If	4. If Amendment, Date 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)			Т	able I	- No	n-D	erivative	Securi	ties A	cqui	red, Dispo	osed of, or I	Beneficia	lly Ow	ned	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	any	eemed tion Date n/Day/Y		3. Tra Code (Instr.	8)	tion V	4. Securi (A) or D (Instr. 3,	isposed	of (D	) B R (I	Beneficially	of Securities y Owned Fo ransaction(s 1 4)	llowing	6. Owner Form: Direct or Ind (I) (Instr.	ership : Bend t (D) lirect (Inst	eficial ership
Common	ı Stock		08/21/2009				G		V	95 (1)	D	\$ 28.2	7	<sup>7</sup> 2,415			Ι	Gol Irre Tru dtd	isano vocable st U/A
Common	Stock												3	37,609,24	<del>1</del> 7		D		
Reminder:	Report on a s	separate line	for each class of second Table II	- Deriv	ative Se	curi	ties Ac	quir	Per contract the	rsons wintained in form die Disposed	no res in this splays	form s a cu Benefi	are irren	not requ	ction of inf uired to res OMB conf	spond u	nless	SEC 14	174 (9-02)
Derivative Conversion Date			Execution D any	l Pate, if	e.g., puts, calls, w  4. te, if Transaction Code Year) (Instr. 8)  Code V		5. Number of Operivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. and (M	Date Exercisable  Expiration Date (Month/Day/Year)  Date Exercisable  Expiration  Date		e I	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		ve es ally ng d	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (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	08/25/2009
Stephanie L. Schaeffer, Attorney-in-fact	00/23/2007

**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 of shares 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.