FORM 4

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

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

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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * GOLISANO B THOMAS					2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) 911 PANORAMA TRAIL S.					3. Date of Earliest Transaction (Month/Day/Year) 11/22/2011						Office	er (give title belo	ow)	Othe	r (specify b	elow)		
(Street) ROCHESTER, NY 14625				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City		(State)	(Z	Zip)		,	Гable I	- No	on-D	erivative	Securit	ies Ac	quired, Disp	osed of, or l	Beneficia	lly Ow	ned	
1.Title of Security (Instr. 3)		2. Transac Date (Month/Da	h/Day/Year) Exect		eemed tion Date, if n/Day/Year	Code (Instr. 8)			4. Securities Acquir (A) or Disposed of ((Instr. 3, 4 and 5) (A) or		of (D)	Beneficiall	Transaction(s	ned Following		rship Ind Be (D) Ov	Nature of lirect neficial wnership str. 4)	
Common Stock		11/22/20	2/2011			G		V	398 (1)	D	\$ 27.99	70,481			I G		onthia A. olisano revocable ust U/A d 13/2005	
Common	Stock												37,609,2	47		D		
Reminder:	Report on a s	separate line			· Deriv	ative Secur	ities A	equi	Pe co the	rsons who ntained it form di Disposed	ho responding this splays	form a cur	to the colle are not req rently valic	uired to res I OMB con	spond u	nless	SEC	1474 (9-02)
l	T.	1	. 1		` ' '	outs, calls,		ts, o	_					1	I			1
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transacti Date (Month/Day	y/Year) Exc		ate, if	4. Transactio Code (Instr. 8)	5. Num of Deriv Secu Acqu (A) c Disp of (E (Institute 4, an	vative rities prosed osed osed	an (N	and Expiration Date (Month/Day/Year)		Title and mount of inderlying ecurities nstr. 3 and	Derivative Security (Instr. 5) Benefi Owner Follow Repor		es Form of Derivativ Security: ng Direct (D or Indirection(s) (I)		(Instr. 4)	
						Code V	(A)	(D)		ate xercisable	Expira Date	tion T	Amount or Number of Shares					

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	11/23/2011

**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.