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

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

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

Instru	ction 1(b).			Iı	ives	stmei	nt Com	pany Ac	t of	1940)						
(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * TUCCI JOSEPH M				2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]							ı		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 911 PANORAMA TRAIL S.				3. Date of Earliest Transaction (Month/Day/Year) 07/01/2013							ar)	-		e title below)		r (specify below	w)
		(Street)		4. If An	nendi	ment,	Date Or	iginal Filed	d(Mont	th/Day/	Year)				p Filing(Check .	Applicable Line	e)
ROCHESTER, NY 14625												_	X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Cit	y)	(State)	(Zip)				Table	I - Non-E)eriva	ative S	Securitie	s Acquire	ed, Disposed	of, or Bene	ficially Owne	d	
(Instr. 3) Date			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		if Code (Instr		(A) or Disposed of)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
						Co	ode V	Am	ount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock 0			07/01/2013			N	Л	10,	,000	A	\$ 29.55	6,824	,824		D		
Reminder:	Report on a	separate line for each	h class of securities l	peneficia	lly o	wned	directly	Pers in th	ons is fo	rm a	re not re	equired t			ion containe form displa		1474 (9-02)
			Table II					quired, Di					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Code Securit (Instr. 8) Securit		imber erivative rities nired (A) isposed 0) r. 3, 4,	vative ies (Month/Day ed (A) cosed		ate Year) S		7. Title of Unde Securiti	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivativ Security: Direct (I or Indire	Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal	ble	Expi Date	iration	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4))
Stock Option	\$ 29.55	07/01/2013		М			10,000	07/10/2	2005	07/1	10/2013	Comm	. 110.000	\$ 0	0	D	
Stock Option	\$ 31.79							07/08/2	2006	07/0	08/2014	Comm	. 110.000)	10,000	D	
Stock Option	\$ 33.68							07/07/2	:006	07/0	07/2015	Comm	on 10,000)	10,000	D	
Stock Option	\$ 36.87							07/13/2	2007	07/1	13/2016	Comm	1 0 000		6,000	D	
Stock Option	\$ 43.91							07/17/2	2008	07/1	17/2017	Comm			6,000	D	
Stock Option	\$ 31.95							07/10/2	:009	07/0	09/2018	Comm			6,250	D	
Stock Option	\$ 24.21							07/09/2	2010	07/0	08/2019	Comm	on 6,250		6,250	D	
Stock	\$ 26.02							07/07/2	2011	07/0	06/2020	Comm			7,686	D	

11,468

15,052

Stock Common

Stock

Common

Stock

07/07/2012 07/06/2021

07/12/2013 07/11/2022

11,468

15,052

D

D

Reporting Owners

\$ 31.63

\$ 31.5

Option

Stock

Option

Stock

Option

Relationships

Reporting Owner Name / Address	Director	10% Owner	Officer	Other
TUCCI JOSEPH M				
911 PANORAMA TRAIL S.	X			
ROCHESTER, NY 14625				

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	07/02/2013		
**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) Exercise of stock options approaching 10-year expiration date.

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.