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 * HILL KEVIN N				2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]								:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
911 PANORAMA TRAIL SOUTH (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 10/21/2013								Ī	X_Officer (give title below) Other (specify below) Vice President							
(Street)				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								
ROCHESTER, NY 14625																				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu								es Acqui	uired, Disposed of, or Beneficially Owned							
(Instr. 3) Date			2. Transaction Date (Month/Day/Year	,		f Code (Inst	(Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)							6. Ownershi Form: Direct (D	p of l Bei	Nature Indirect neficial mership		
						С	Code		Am	ount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	t (In:	str. 4)	
Common Stock 1			10/21/2013]	M		25,	,317	A	\$ 24.21	52,7	50			D		
Common Stock 10			10/21/2013					S		25,	,317	1) 1	\$ 42.2	27,433			D			
	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																			
1 77:1 6	l _a	la m	24 5 1		uts,							le securi				0 D: C	0.37 1	6 10		11. Natur
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		Code		of De Secur Acqui or Dis of (D)	5. Number of Derivative Expiration Date (Month/Day/Year) 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Underlying Securities (Instr. 3 and 4) 7. Title and Amount of Underlying Securities (Instr. 3 and 4)				ţ	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Owne Form Deriv Secur Director Ind	Ownership Form of Derivative Security: Direct (D) or Indirect					
				Code	v	(A)	(D)	Date Exer	cisable		Expira Date	ation	Title	c N	Amount or Number of Shares		(Instr.	(Instr. 4)		
Stock Option	\$ 24.21	10/21/2013		M		2	25,317	07/0	09/20	10	07/08	8/2019	Comm		25,317	\$ 0	6,330	Γ)	
Stock Option	\$ 31.95							07/	10/200	09	07/09	9/2018	Comm		20,000		20,000 D)	
Stock Option	\$ 31.95							07/	10/200	09	07/09	9/2018	Comm	non ek	6,337		6,337	Г)	
Stock Option	\$ 26.02							07/0	07/201	11	07/06	6/2020	Comm		17,872		17,872	Г)	
Stock Option	\$ 31.34							07/0	06/20	12	07/05	5/2021	Comm		26,587		26,587	Г)	
Stock Option	\$ 31.63							07/07/2014		14	07/06	6/2021	Comm		100,000		100,000) [)	
Stock Option	\$ 31.65							07/11/2013		13	07/10	0/2022	Comm		31,414		31,414	Г)	
Stock Option	\$ 38.48							07/	10/20	14	07/09	9/2023	Comm		26,956		26,956	Γ)	

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				

HILL KEVIN N 911 PANORAMA TRAIL SOUTH ROCHESTER, NY 14625	Vice President	
Signatures		

Stephanie L. Schaeffer, Attorney-in-fact	10/22/2013
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).

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.