# 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  X_ 10% Owner						
(Last) (First) (Middle) 911 PANORAMA TRAIL S.				3. Date of Earliest Transaction (Month/Day/Year) 02/26/2014								(give title belo	ow)		r (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 PersonForm filed by More than One Reporting Person							
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year	any	eemed tion Date, h/Day/Yea	if C	. Trans Code Instr. 8		4. Securi (A) or D (Instr. 3,	isposeo	d of (D	() B R ()	Beneficially	of Securities Owned Fo ransaction(s 14)	llowing	6. Owne Form: Direct or Ind (I) (Instr.	rship Indi Ben Owr irect (Inst	eficial ership
Common	Stock		02/26/2014				G		169 (1)		\$ 41.2		70,312			I	Cyr Gol Irre Tru dtd	nthia A. isano vocable st U/A
Common	Stock											3	37,587,27	72		D		
Reminder:	Report on a s	separate line	for each class of se	curities l	beneficiall	y ow	rned dir	Pe	rsons w	ho res	form	are	not requ	ction of inf ired to res OMB conf	spond u	nless	SEC 14	174 (9-02)
			Table II		ative Secu				-				ly Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversio or Exercis Price of Derivative Security		se (Month/Day/Year) any (Month/I		(8/1 / /		5 ion N c I S A (() I	5. 6. Number ar		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ve es fally ng d tion(s)	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	V	(A) (I	E	ate xercisable		e Title Nu of		or Number of Shares					

#### **Reporting Owners**

B 41 0 V /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GOLISANO B THOMAS 911 PANORAMA TRAIL S. ROCHESTER, NY 14625	X	X				

### **Signatures**

Stephanie L. Schaeffer, Attorney-in-fact	03/04/20

**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.