FORM 4

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

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

Instru	ction 1(b).			Ir	ives	stme	nt Com	pany Act	01	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]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner Officer (give title below) Other (specify below)						
(Last) (First) (Middle) 911 PANORAMA TRAIL S.				3. Date of Earliest Transaction (Month/Day/Year) 04/15/2014							-							
		(Street)		4. If Am	end	ment,	, Date Or	ginal Filed	(Mont	h/Day/	Year)					Filing(Check A	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-D	eriva	ative S	Securitie	s Acquir	red, Di	isposed o	of, or Benef	icially Owned	i	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		if Code (Instr	. 8)	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5) (A) or Amount (D)		f (D)	Transaction(s) Form: (Instr. 3 and 4) Direct (1)		Ownership Form: Direct (D) or Indirect I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock			04/15/2014			N	1	10,	,000		\$ 31.79	38,38	388		I)		
						calls,	warrant	in thi a cur quired, Dis s, options,	s fo rent spose conv	rm ai ily va ed of, vertib	re not re lid OME or Benef ble securi	equired 3 contro ficially (ties)	to resol num	spond ι nber.	inless the	on containe form displa	ys	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction of Code Se (Instr. 8) or of (Ir		of D Secu Acq or D of (I	urities uired (A) bisposed D) tr. 3, 4,	Expiration (Month/D	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		g		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Ownershi (Instr. 4) D)	
				Code	v	(A)	(D)	Date Exercisab	le	Expi Date	ration	Title	1	Amount or Number of Shares		(msu. 1)	(msu. 1)	
Stock Option	\$ 31.79	04/15/2014		М			10,000	07/08/20	006	07/0	08/2014	Comr		10,000	\$ 0	0	D	
Stock Option	\$ 33.68							07/07/20	006	07/0	07/2015	Comr		10,000		10,000	D	
Stock Option	\$ 36.87							07/13/20	007	07/1	13/2016	Comr		6,000		6,000	D	
Stock Option	\$ 43.91							07/17/20	800	07/1	17/2017	Comr		6,000		6,000	D	
Stock Option	\$ 31.95							07/10/20	009	07/0	09/2018	Comr		6,250		6,250	D	
Stock Option	\$ 24.21							07/09/20	010	07/0	08/2019	Comr		6,250		6,250	D	
Stock Option	\$ 26.02							07/07/20	011	07/0	06/2020	Comr		7,686		7,686	D	
Stock	\$ 31.63							07/07/20	012	07/0	06/2021	Comr	non	11,468		11,468	D	

Stock

Common

Stock

Common

Stock

15,052

12,156

15,052

12,156

D

D

07/12/2013 07/11/2022

07/11/2014 07/10/2023

Reporting Owners

\$ 31.5

\$ 38.89

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	04/16/2014		
**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.