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).

(Print or Type Responses)

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 * Schaeffer Stephanie L | | | | | 2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|------------------------|---------------------------|--|--|-----------------------------|-----------|---|---------------------------------------|-----------|------------------------|---|---------------------|---------------------------------------|--------------------------------|----------------------|--|
| 911 PANORAMA TRAIL SOUTH (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/11/2014 | | | | | | | Ĺ | X Officer (give title below) Other (specify below) CLO, Secretary | | | | | |
| (Street) ROCHESTER, NY 14625 | | | | 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 | | | | | |
| (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | |
| 1.Title of S | Security | | 2. Transaction | 2A. De | eme | | | | | ities Aco | | 5. Amount of | | | 6. | 7. N | ature |
| (Instr. 3) | | | Date (Month/Day/Year | Execution Date, if | | Date, if | Co (In | de | (A) or Disposed (Instr. 3, 4 and 5 | | of (D) | Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | Ownership o Form: E Direct (D) | of In Bene Own | f Indirect eneficial wnership |
| | | | | | | | Code V | Amount | mount (A) or (D) Price | | | | | or Indirect (Ins (I) (Instr. 4) | | tr. 4) | |
| Common Stock 07/11/2 | | | 07/11/2014 | | | | | S | 295 (1) D \$ 33,331 | | | D | | | | | |
| Reminder: | Report on a | separate line for each | n class of securities l | peneficial | lly o | wned d | irect | ly or indirectly | 7. | | | | | | | | |
| | • | • | | | | | | Perso in this | ns who | are not | required | collection of | unless the | | ed SEC | 1474 | (9-02) |
| | | | Table II · | - Derivat | ive S | Securit | ies A | displa Acquired, Disp | - | - | | MB control n Owned | umber. | | | | |
| 1 77:1 6 | l _a | la m .: | 24 5 1 | | ts, c | | arra | nts, options, c | | | | 1.4 | lo D: 6 | 0.37 1 | 6 10 | | 11.37. |
| 1. Title of Derivative | 1. Title of 2. 3. Transaction Berivative Conversion Date 3A. Execute 2. | | | 4. Transact | nsaction 5. | | er | 6. Date Exercisable and Expiration Date | | nd | 7. Title a of Under | | | 9. Number of Derivative | | | Nature of Indirect |
| Security (Instr. 3) | or Exercise Price of Derivative | vative |) any (Month/Day/Year) | Code (Instr. 8) |) | of Deriva Securi | | (Month/Day/ | onth/Day/Year) | | Securitie (Instr. 3 | | Security (Instr. 5) | Securities Beneficially Owned | Form of Derivati Security | ive (| Beneficial Ownership Instr. 4) |
| | Security | | | | | Acquir (A) or | red | | | | | | | Following Reported | Direct (| D) | |
| | | | | | | Dispos of (D) (Instr. | 3, | | | | | | | | (s) (I) (Instr. 4 |) | |
| | | | | | | 4, and | 5) | | | | | Amount | _ | | | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expira Date | ation | Title | or Number of Shares | | | | | |
| Stock Option | \$ 33.68 | | | | | | | 07/07/2006 | 6 07/0 | 7/2015 | Comm | 9.000 | | 9,000 | D | | |
| Stock Option | \$ 36.87 | | | | | | | 07/13/2007 | 07/13 | 3/2016 | Comm | 1 12.000 | | 12,000 | D | | |
| Stock Option | \$ 43.91 | | | | | | | 07/17/2008 | 07/1 | 7/2017 | Comm | 1 1 2.000 | | 12,000 | D | | |
| Stock Option | \$ 31.95 | | | | | | | 07/10/2009 | 07/09 | 9/2018 | Comm | 1 14 / 13 | | 14,713 | D | | |
| Stock Option | \$ 31.95 | | | | | | | 07/10/2009 | 07/09 | 9/2018 | Commo Stock | | | 4,662 | D | | |
| Stock Option | \$ 24.21 | | | | | | | 07/09/2010 | 07/08 | 8/2019 | Comm | | | 31,647 | D | | |
| Stock Option | \$ 26.02 | | | | | | | 07/07/2011 | 07/00 | 6/2020 | Comm | | | 14,893 | D | | |
| Stock Option | \$ 31.34 | | | | | | | 07/06/2012 | 07/03 | 5/2021 | Comm | | | 22,156 | D | | |
| Stock Option | \$ 31.63 | | | | | | | 07/07/2014 | 07/00 | 6/2021 | Comm | 11(0)(0)(0) | | 100,000 | D | | |
| Stock Option | \$ 31.65 | | | | | | | 07/11/2013 | 07/10 | 0/2022 | Comm | 20.450 | | 29,450 | D | | |
| Stock | \$ 38.48 | | | | | | | 07/10/2014 | 1 07/09 | 9/2023 | Comm | | | 26,956 | D | | |

| Stock Option | \$ 41.7 | | | | | | | 07/09/2015 | 07/08/2024 | Common Stock | 22,135 | | 22,135 | D | | |
|-----------------|---------|--|--|--|--|--|--|------------|------------|-----------------|--------|--|--------|---|--|--|
|-----------------|---------|--|--|--|--|--|--|------------|------------|-----------------|--------|--|--------|---|--|--|

Reporting Owners

| | Relationships | | | | | | |
|--|---------------|--------------|----------------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Schaeffer Stephanie L 911 PANORAMA TRAIL SOUTH ROCHESTER, NY 14625 | | | CLO, Secretary | | | | |

Signatures

| Stephanie L. Schaeffer | 07/14/2014 |
|-------------------------------|------------|
| Signature of Reporting Person | Date |

Explanation of Responses:

- \star 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) Disposition of shares to satisfy tax withholding obligations arising from lapse of restrictions applicable to restricted stock.

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.