FORM	4
------	---

(D...;

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

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

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 Type Responses)										
1. Name and Address of Reporting Pers FLASCHEN DAVID J S	2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director10% Owner			
(Last) (First) 911 PANORAMA TRAIL S.		3. Date of Earliest Transaction (Month/Day/Year) 09/26/2014					Officer (give title below)O	ther (specify belo	ow)	
(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 Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: H	Beneficial
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	1
Common Stock	09/26/2014		М		10,000 (1)	А	\$ 33.68	29,894	D	
Common Stock 09/26/2014			S		10,000	D	\$ 43.8	19,894	D	
Common Stock - Family Trust								14,707	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 SEC 1474 (9-02) 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

(e.g., puts, calls, warrants, options, convertible securities)																	
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Code		of E Secu Acq or E of (I	Derivative urities uired (A) Disposed D) tr. 3, 4,	(Month/Day/Y	e	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		of Underlying Securities		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	v	(A)	(D)	Date Exercisable	Expiration Date		Amount or Number of Shares						
Stock Option	\$ 33.68	09/26/2014		М			10,000	07/07/2006	07/07/2015	Common Stock	10,000	\$ 0	0	D			
Stock Option	\$ 36.87							07/13/2007	07/13/2016	Common Stock	6,000		6,000	D			
Stock Option	\$ 43.91							07/17/2008	07/17/2017	Common Stock	6,000		6,000	D			
Stock Option	\$ 31.95							07/10/2009	07/09/2018	Common Stock	6,250		6,250	D			
Stock Option	\$ 24.21							07/09/2010	07/08/2019	Common Stock	6,250		6,250	D			
Stock Option	\$ 26.02							07/07/2011	07/06/2020	Common Stock	7,686		7,686	D			
Stock Option	\$ 31.63							07/07/2012	07/06/2021	Common Stock	11,468		11,468	D			
Stock Option	\$ 31.5							07/12/2013	07/11/2022	Common Stock	15,052		15,052	D			
Stock Option	\$ 38.89							07/11/2014	07/10/2023	Common Stock	12,156		12,156	D			
Stock Option	\$ 41.7							07/09/2015	07/08/2024	Common Stock	10,850		10,850	D			

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
FLASCHEN DAVID J S 911 PANORAMA TRAIL S. ROCHESTER, NY 14625	Х						

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	09/29/2014
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.