FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
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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 * JOSEPH PAMELA A				2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner				
911 PANORAMA TRAIL SOUTH (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 07/07/2016)	_	Officer (give	e title below)	Oth	er (specify belo	w)
(Street) ROCHESTER, NY 14625				4. If Amendment, Date Original Filed(Month/Day/Year)							ear)		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) (Stata) (7in)					e I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
(Instr. 3) Da			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Dat any (Month/Day/Y		Date, if	Date, if Code (Inst		(A	A) or Disposed o				ecurities Beneficially ing Reported		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
							C	ode	V A	mount	(A) or (D)	Price			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock			07/07/2016			1	A		089	A	\$ 0 1	19,791		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 (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code		5. Number		6. Date Exerc Expiration Da (Month/Day/Y		isable and te		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form of Derivat Security Direct (or Indir (s) (I)	Ownershi y: (Instr. 4) D) ect
				Code	v	(A)	(D)		cisable	Expir Date	ation	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)
Stock Option	\$ 60.59	07/07/2016		A		10,220)	07/0	7/2017	07/0	6/2026	Comm	. 110.220	\$ 60.59	10,220	D	
Stock Option	\$ 43.91							07/1	7/2008	07/1	7/2017	Comm			6,000	D	
Stock Option	\$ 31.95							07/1	0/2009	07/0	9/2018	Comm			6,250	D	
Stock Option	\$ 24.21							07/0	9/2010	07/0	8/2019	Comm			6,250	D	
Stock Option	\$ 26.02							07/0	7/2011	07/0	6/2020	Comm			7,686	D	
Stock Option	\$ 31.63							07/0	7/2012	07/0	6/2021	Comm		3	11,468	D	
Stock Option	\$ 31.5							07/1	2/2013	07/1	1/2022	Comm			15,052	D	
Stock Option	\$ 38.89							07/1	1/2014	07/1	0/2023	Comm	11/130		12,156	D	
Stock Option	\$ 41.7							07/0	9/2015	07/0	8/2024	Comm			10,850	D	
Stock Option	\$ 47.43							07/0	9/2016	07/0	8/2025	Comm			11,489	D	

Reporting Owners

Relationships	ı
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Reporting Owner Name / Address	Director	10% Owner	Officer	Other
JOSEPH PAMELA A 911 PANORAMA TRAIL SOUTH ROCHESTER, NY 14625	X			

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	07/08/2016		
^{**} 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.
- (1) Award of restricted stock, subject to vesting, pursuant to the Amended and Restated 2002 Stock Incentive Plan.

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.