# 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]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X DirectorX 10% Owner								
911 PANORAMA TRAIL S. (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 08/25/2016							-	Office	r (give title belo	w)	Othe	er (specify	below)	)		
(Street)				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 Person Form filed by More than One Reporting Person								
ROCHES (City)	STER, NY			(7:-)													*				
(City)	,	(State)		(Zip)			T	able I	- Noi	n-D	erivative	Securit	ties A	cquir	red, Dispo	osed of, or E	Beneficia	lly Ow			
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea				Execut any	Deemed cution Date, if	, if	Code (Instr. 8)		(A) or D		rities Acquired Disposed of (D) 4, 4 and 5)		) Bo	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		lowing	Ownership Form: Direct (D)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				(Month/Day/Y		ear)	Cod	e	V	Amount	(A) or (D) Price			(Instr. 3 and 4)							
Common	Stock		08/25	5/2016				G		V	515 (1)	D	\$ 60.7	60	6,430			Ι	In T d	olisa revo rust td	nia A. ano ocable U/A
Common	Stock													3′	7,587,27	72		D			
Reminder: I	Report on a s	separate line	for each	Table II -	- Deriv	ative Sec	curit	ties Ac	quir	Per cor the	rsons wh ntained i e form dis	ho responding the thick th	form a cu Benefi	are irren	not requ tly valid	ction of inf ired to res OMB cont	pond u	nless	SEC	C 1474	4 (9-02)
Derivative Conversion Date					l Pate, if	4. Transaction Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. and (M	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiratio			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	ve es ally ng d	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	ship of I in the street of the	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
						Code	V	(A)	(D)		xercisable	Date		Title	Number of Shares						

#### **Reporting Owners**

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

### **Signatures**

Stephanie L. Schaeffer, Attorney-in-fact 09/06/2016	y-in-fact 09/06/2016
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**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 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.