FORM 4

(Print or Type Responses)

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

OMB APPROVAL
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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_ Director _X_ 10% Owner								
(Last) (First) (Middle) 911 PANORAMA TRAIL S.					3. Date of Earliest Transaction (Month/Day/Year) 02/23/2017							-	Officer	(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								
	STER, NY																one report	ang reis			
(City	r)	(State)		(Zip)			T	able I	- No	n-De	erivative	Securit	ies Ac	cquir	red, Dispo	sed of, or I	Beneficia	lly Ow	ned		
1.Title of Security (Instr. 3)		Date	nsaction h/Day/Year)	Execution Date, if any (Month/Day/Year) Code (Instr. 8		. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)) Be Re (Ir	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
Commor	ı Stock		02/23	3/2017				G	e	V	539 (1)	D D	\$ 59.6		5,341			(Instr.		Golis rrevo	ocable U/A
Common	Stock													37	7,587,27	2		D			
Reminder:	Report on a s	separate line	for each	r class of secu	Deriv	ative Sec	urit	ties Ac	quir	Per cor the	rsons whatained in form dis	no responding this is splays	form a cu	are rren cially	not requ itly valid	ction of inf ired to res OMB cont	spond u	nless	SEC	C 1474	4 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transacti Date (Month/Day		3A. Deemed Execution D any (Month/Day	ate, if	4. Transact Code	tion	5. Numb of Deriv Secur Acqui (A) of Dispo of (D) (Instr 4, and	ative ities ired r osed) . 3,	6. land (M	te ercisable	cisable on Date	Ton	7. Tit Amor Unde Secur (Instr 4)	tle and unt of brlying rities r. 3 and Amount or Number of Shares	8. Price of Derivative Security (Instr. 5)	9. Numb Derivati Securitie Benefici Owned Followir Reported Transact (Instr. 4)	ve es ally ng d	10. Owner Form of Deriva Securit Direct or Indi (I) (Instr.	ship of tive (by: (D) rect	11. Nature of Indirect Beneficial Ownershij (Instr. 4)

Reporting Owners

D 41 0 N /		Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GOLISANO B THOMAS 911 PANORAMA TRAIL S. ROCHESTER, NY 14625	X	X					

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	03/02/2017
Stephanie L. Schaeffer, Attorney-in-ract	03/02/2017

**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.