FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287

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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

(Print or Type Responses)										
Name and Address of Reporting Person * Bottini Mark Anthony		2. Issuer Name and Ticker or T. PAYCHEX INC [PAYX]			rading Symbol			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner		
911 PANORAMA TRAIL SOUTH		3. Date of Earliest Transaction (Month/Day/Year) 12/23/2016			X_ Officer (give title below) Other (specify below) Sr. VP of Sales					
(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								
(Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: of Indire Benefic	Beneficial
			Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) Ownership or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	12/23/2016		J	V	1,625 (1)	D	\$ 61.5	47,007	D	
Common Stock	04/27/2017		M		35,000	A	\$ 28.06	82,007	D	
Common Stock	04/27/2017		S		35,000	D	\$ 60.01	47,007	D	
Common Stock								674	I	401(k)
Reminder: Report on a separate line for each cl	ass of securities be	eneficially owned dire		Perso	ons who	re not r	equired	e collection of information contain I to respond unless the form displa		1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and Amount 8. Price of 9. Number of 10. 11. Nature Derivative Conversion Date Execution Date, if Transaction of Derivative **Expiration Date** of Underlying Derivative Derivative Ownership of Indirect (Month/Day/Year) any Securities (Month/Day/Year) Securities Beneficial or Exercise Code Security Securities Form of Security (Instr. 3) (Month/Day/Year) (Instr. 8) Acquired (A) (Instr. 3 and 4) (Instr. 5) Beneficially Derivative Ownership Price of or Disposed Derivative Owned (Instr. 4) Security: Security Following of (D) Direct (D) (Instr. 3, 4, Reported or Indirect and 5) Transaction(s) (T)(Instr. 4) (Instr. 4) Amount Expiration Date Title Exercisable Date Number V (A) (D) Code of Shares Stock Common \$ 28.06 04/27/2017 M 35,000 10/18/2014 10/17/2021 35,000 \$0 63,750 D Option Stock Stock Common 10/17/2021 \$ 28.06 10/18/2012 35,063 35,063 D Option Stock Stock Common \$ 31.65 07/11/2013 07/10/2022 58,901 58,901 D Option Stock Stock Common \$ 38.48 07/10/2014 07/09/2023 53,911 53,911 D Option Stock Stock Common \$41.7 07/09/2015 07/08/2024 44,271 44,271 D Option Stock Stock Common \$47.32 07/08/2016 07/07/2025 46,875 46,875 D Option Stock Stock Common \$60.84 07/06/2017 07/05/2026 43,760 43,760 D Option Stock Stock Common 07/06/2017 07/05/2026 \$ 60.84 147,405 147,405 D Option Stock

Reporting Owners

Relationships

Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Bottini Mark Anthony 911 PANORAMA TRAIL SOUTH ROCHESTER, NY 14625			Sr. VP of Sales		

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	04/28/2017	
**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) Shares were gifted to the Bottini Family Fund.

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.