# 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. 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) 08/24/2018						-	Officer	(give title belo	ow)	Othe	er (specif	y 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							
ROCHES	STER, NY	14625												Form filed by More than One Reporting Person						
(City	·)	(State)		(Zip)		1	Γable 1	I - No	n-D	erivative	Securit	ies Ac	quire	ed, Dispo	sed of, or I	Beneficial	lly Ow	ned		
(Instr. 3) Date (Month/Day/Year) at			Execut any	Execution Date, if		Code (Instr. 8)		on 4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)	(D) Beneficial		nt of Securities ally Owned Following Transaction(s)		Ownership Form: Direct (D)		7. Nature of Indirect Beneficial Ownership			
				(Monu	wondin Day Teal)		de	V	(A) or Amount (D) Price			(Instr.								
Common	ı Stock		08/24/	2018			G	ì	V	737 (1)	D	\$ 72.74	4 61	,519			I		Golis Irrevo Trust dtd	hia A. sano ocable tu/A
Common	Stock												37	,587,27	72		D			
Reminder:	Report on a s	separate line	for each o		- Deriv	ative Secur	ities A	cquir	Pe co the	rsons whentained in the form disposed	no responding this splays	form a cur	are r rrent	not requally valid	ction of inf lired to res OMB conf	spond u	nless	SE	C 147	4 (9-02)
Derivative	2. Conversion or Exercise		H	3A. Deemed Execution D	l	4.	5.		6. an	Date Exer d Expirati	cisable on Date	7 A	. Titl		8. Price of Derivative Security	Derivativ	ve		rship	11. Nature of Indirect Beneficial
Security (Instr. 3)	Price of Derivative Security	(Month/Day	/	any (Month/Day	/Year)		Deri Secu Acqu (A) o	osed O) r. 3,	e 🗋	Sec		Securi Instr.	derlying urities str. 3 and Security (Instr. 5)		Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Derivative		Ownershi (Instr. 4)	
						Code V	(A)	(D)	Ex	ate xercisable	Expira Date	tion T	itle	Amount or Number of Shares						

### **Reporting Owners**

D 41 0 N /		nips			
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		
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08/28/2018

**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.