FORM 4	4
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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).

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

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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 Pe Vossler Jennifer R.	2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner			
911 PANORAMA TRAIL SOU	TUDIT	3. Date of Earliest Transaction (Month/Day/Year) 07/06/2019					X_Officer (give title below)Other (specify below) _			
(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								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		(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) (Instr. 3 and 4)	Ownership of Ind Form: Bene	Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Insu. 5 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	06/01/2019		J		44 <mark>(1)</mark>	А	\$ 0	21,745	D	
Common Stock	07/06/2019		S		2,304 (2)	D	\$ 85.31	19,441	D	
Common Stock								922 (3)	Ι	401(k)

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 $\rm SEC\ 1474\ (9-02)$ 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)														
Security	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		5. Numi of Deriv Secur Acqu (A) o Dispo of (D (Instr 4, and	ber vative rities ired r osed) :. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Securities Beneficially Owned Following	Derivative Security: Direct (D) or Indirect	Beneficial
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Option	\$ 31.63							07/07/2014	07/06/2021	Common Stock	33,000	33,000	D	
Stock Option	\$ 31.65							07/11/2013	07/10/2022	Common Stock	29,450	29,450	D	
Stock Option	\$ 38.48							07/10/2014	07/09/2023	Common Stock	26,956	26,956	D	
Stock Option	\$ 41.7							07/09/2015	07/08/2024	Common Stock	22,135	22,135	D	
Stock Option	\$ 47.32							07/08/2016	07/07/2025	Common Stock	23,438	23,438	D	
Stock Option	\$ 60.84							07/06/2017	07/05/2026	Common Stock	24,311	24,311	D	
Stock Option	\$ 60.84							07/06/2017	07/05/2026	Common Stock	76,652	76,652	D	
Stock Option	\$ 57.24							07/12/2018	07/11/2027	Common Stock	19,436	19,436	D	

Reporting Owners

ſ		Relationships						
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
	Vossler Jennifer R. 911 PANORAMA TRAIL SOUTH ROCHESTER, NY 14625			VP/Controller				

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	07/09/2019	
Signature of Reporting Person	Date	
	1	

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) Updated balance reflects 44 shares acquired through the Dividend Reinvestment Program.
- (2) Disposition of shares to satisfy tax withholding obligations arising from lapse of restrictions applicable to restricted stock.
- (3) 401(k) balance as of June 1, 2019.

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.