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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

longer subject to Section 16. Form 4 or

\$ 31.63

\$ 31.34

\$ 60.84

\$ 57.24

\$ 69.54

Option

Stock

Option

Stock

Option

Stock

Option

Stock

Option

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

may c	5 obligations ontinue. <i>See</i> ction 1(b).		suant to Section					ies Exc mpany	_			4 or Section	on 30(h)	of the			
(Print or Ty	pe Response	s)															
Name and Address of Reporting Person * Schaeffer Stephanie L				2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]							ol	5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 07/12/2019							ear)	_>	X_Officer (give title below) Other (specify below) CLO, Secretary				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							y/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												, 1 omi med 0,		Treporting Terson		
(Cit	y)	(State)	(Zip)				Tabl	le I - Non	ı-Der	ivative	Securition	es Acquire	l, Disposed	of, or Bene	eficially Own	ed	
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if r) (Month/Day/Year)		Coc (Ins	Transaction de str. 8)	(A) or D	Securities Acquired (a) or Disposed of (D) (b) (c) (c) (d)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		ed 0	Ownership Form:	7. Nature of Indirect Beneficial	
				(Month	/Day	y/ Y ear		Code	V A	Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		07/12/2019					S	2	258 (1)		\$ 85.72 51	,374]	D	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	(e.g., puts, calls, 4. 5. Transaction Nur Code of (Instr. 8) Der See Acc (A)		5. Numl of	ber vative rities rired	6. Date Expirate	cquired, Disposed of, or Beneficts, options, convertible securities. 6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an of Underly Securities	ficially Owned ties) 7. Title and Amount of Underlying		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form of Derivati Security Direct (or Indire	Owners (Instr. 4
						of (D (Instr 4, and) : 3,								(Instr. 4)	(Instr. 4	
				Code	V	(A)	(D)	Date Exercis	able	Expir Date	ration	Title	Amount or Number of Shares				
Stock Option	\$ 60.84							07/06/	201	7 07/0	5/2026	Commo	n 20,665		20,665	D	
Stock Option	\$ 47.32							07/08/	2010	6 07/0	7/2025	Commo Stock	n 23,438		23,438	D	
Stock Option	\$ 41.7							07/09/	/201:	5 07/0	8/2024	Commo Stock	n 22,135		22,135	D	
Stock Option	\$ 38.48							07/10/	/2014	4 07/0	9/2023	Commo Stock	n 26,956		26,956	D	
Stock Option	\$ 31.65							07/11/	2013	3 07/1	0/2022	Commo Stock	n 29,450		29,450	D	
Stock	¢ 21 62							07/07/	/201	1 07/0	6/2021	Commo	n 63 000		62 000	D	

07/07/2014 07/06/2021

07/06/2012 07/05/2021

07/06/2017 07/05/2026

07/12/2018 07/11/2027

07/11/2019 07/10/2028

63,000

22,156

76,652

20,579

15,826

Stock

Common

Stock

Common

Stock

Common

Stock

Common

Stock

63,000

22,156

76,652

20,579

15,826

D

D

D

D

D

|--|

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Schaeffer Stephanie L 911 PANORAMA TRAIL SOUTH ROCHESTER, NY 14625			CLO, Secretary				

Signatures

Stephanie L. Schaeffer	07/15/2019
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) Disposition of shares to satisfy tax withholding obligations arising from lapse of restrictions applicable to restricted stock.

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.