FORM 4

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

Instru	ction 1(b).				1003	tillelit	C011	трипу	7101 01	1710								
(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person* TUCCI JOSEPH M				2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
911 PAN	St) NORAMA	TRAIL S.	(Middle)	3. Date 07/15/		arliest Ti O	ransa	ction (1	Month/Γ	Day/Yea	r)			Officer (give	title below)	Othe	er (specify belo	ow)
(Street)				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						
ROCHE	STER, NY	14625														Reporting Person		
(Cit	ty)	(State)	(Zip)			-	Γabl	e I - No	n-Deriv	vative S	ecuritie	s Acqu	ired,	Disposed	of, or Bene	ficially Own	ed	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		Date, if	(Instr. 8)		(4	4. Securities Acqu (A) or Disposed or (Instr. 3, 4 and 5)		of (D) Owned Follow				Form:	7. Nature of Indirect Beneficial Ownership	
						•	C	ode	V A	mount	(A) or (D)	Price	Ì				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 0			07/15/2020				A	1	,082	A	\$ 0	51,9	24			D		
D amin dam	Domont on a	separate line for each	along of goognities	hanafiaid	11	.vvmad di	ma atl	on in a	lina atly									
			Table II			Securiticalls, wa		ii c cquirec	n this f lisplay: d, Dispo	orm ares a cur	e not re rently v or Bene	equire /alid C ficially	d to i	espond control n	unless the	tion contain e form	ed SEC	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code Deriva		Expiration (Month/Datities red		ation Da	Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		ng 4)	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Owner (Instr. 4	
				Code	V	(A)	(D)	Date Exerc	isable	Expira Date	ation	Title		Amount or Number of Shares				
Stock Option	\$ 73.53	07/15/2020		A		5,793		07/1:	5/2021	07/14	1/2030		mon ock	5,793	\$ 73.53	5,793	D	
Stock Option	\$ 31.63							07/0	7/2012	07/06	5/2021	Com Sto	mon ock	11,468		11,468	D	
Stock Option	\$ 31.5							07/12	2/2013	07/1	1/2022	Com Sto	mon ock	15,052		15,052	D	
Stock Option	\$ 38.89							07/1	1/2014	07/10	0/2023		ock	12,156		12,156	D	
Stock Option	\$ 41.7							07/09	9/2015	07/08	3/2024	Com Sto	mon ock	10,850		10,850	D	
Stock Option	\$ 47.43							07/09	9/2016	07/08	3/2025	Com Sto	mon ock	11,489		11,489	D	
Stock Option	\$ 60.59							07/0	7/2017	07/06	6/2026	Com Sto	mon ock	10,220		10,220	D	
Stock Option	\$ 57.2							07/13	3/2018	07/12	2/2027	Com	mon ock	9,615		9,615	D	
Stock Option	\$ 70.37							07/12	2/2019	07/1	1/2028	Com	mon ock	8,641		8,641	D	
Stock Option	\$ 85.33							07/1	1/2020	07/10)/2029	Com	mon ock	7,929		7,929	D	

Reporting Owners

P 4 0 Y 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
TUCCI JOSEPH M 911 PANORAMA TRAIL S. ROCHESTER, NY 14625	X						

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	07/17/2020		
**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) Award of restricted stock, subject to vesting, pursuant to the Amended and Restated 2002 Stock Incentive Plan.

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.