FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

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

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					PA	2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]									ationship of R all applicab Director		Person(o Issuer 10% Owner	
(Last)	(First)	`	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/30/2022									Officer (g below)	ive title	Othe belov		specify	
911 PANORAMA TRAIL S.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) ROCHESTER	NY	14	625													•	•	ng Ferson ne Reportir	ng Person	
(City)	(State)	(Zi	p)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
D D			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			11/30/2022					G	V	813(1)		D	\$122.78	49,035		I		Cynthia A. Golisano Irrevocable Trust U/A dtd 6/13/2005		
Common Stock												37,508,852		D						
			Table II -								sed of, o				ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	nversion Date Exercise (Month/Day/Year) if any (Month/Day/Year) curity			4. Transac Code (Ir 8)		5. Nun Deriva Securi Acqui or Dis (D) (In and 5)	Expira (Month	tion Da n/Day/Y		Securities Under Derivative Securi (Instr. 3 and 4) Am or Nu		nderlying ecurity 4) Amount	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. Quarterly distribution pursuant to the irrevocable trust for which Mr. Golisano was named trustee on 7/22/08.

Remarks:

Stephanie L. Schaeffer, Attorney12/01/2022 in-fact

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} 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).