#### Edgar Filing: PAYCHEX INC - Form 4

| PAYCHEX   | INC                 |                |  |   |                         |        |                    |   |                                       |                         |  |
|---|---------------------|----------------|--|---|-------------------------|--------|--------------------|---|---------------------------------------|-------------------------|--|
| Form 4  |                     |                |  |   |                         |        |                    |   |                                       |                         |  |
| January 26, 2   |                     |                |  |   |                         |        |                    |   |                                       |                         |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION                           |                     |                |  |   |                         |        |                    |   | OMB APPROVAL                          |                         |  |
| <b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b><br>Washington, D.C. 20549 |                     |                |  |   |                         |        |                    | OMB<br>Number:                            | 3235-0287                             |                         |  |
| Check th  |                     |                | V V CCL  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <b>D</b> .C. <b>2</b> 0 | 017    |                    |   |                                       | January 31,             |  |
| if no long  | - NIATH             | MENT O         | F CHAN   | GES IN                                  | BENEF                   | ICIA   | LOW                | NERSHIP OF                                | Expires:                              | 2005                    |  |
| subject to<br>Section 1   |                     |                |  | SECURITIES                              |                         |        |                    |   | Estimated average<br>burden hours per |                         |  |
| Form 4 o  | r                   |                |  |   |                         |        |                    |   | response 0.5                          |                         |  |
| Form 5<br>obligation  | <b>n</b> c <b>1</b> |                |  |   |                         |        | U                  | e Act of 1934,                            |                                       |                         |  |
| may cont  |                     |                |  | •                                       | •                       | · ·    | •                  | 1935 or Section                           | n                                     |                         |  |
| See Instru  |                     | 30(h)          | of the In  | vestment                                | Compar                  | iy Ac  | t of 194           | 40  |                                       |                         |  |
| 1(b).   |                     |                |  |   |                         |        |                    |   |                                       |                         |  |
| (Print or Type I  | Responses)          |                |  |   |                         |        |                    |   |                                       |                         |  |
| × 51  | 1                   |                |  |   |                         |        |                    |   |                                       |                         |  |
| 1. Name and Address of Reporting Person *2. IssuerVossler Jennifer R.Symbol       |                     |                |  | Name and Ticker or Trading              |                         |        | ng                 | 5. Relationship of Reporting Person(s) to |                                       |                         |  |
|   |                     |                |  | C                                       |                         |        |                    | Issuer                                    |                                       |                         |  |
| PAYC  |                     |                | PAYCH  | CHEX INC [PAYX]                         |                         |        |                    | (Check all applicable)                    |                                       |                         |  |
| (Last)  | (First)             | (Middle)       | 3. Date of                                       | Earliest Tr                             | ansaction               |        |                    | (Chee                                     | k all applicable                      | ·)                      |  |
|   |                     |                | (Month/D   | Day/Year)                               |                         |        | Director 10% Owner |   |                                       |                         |  |
| 911 PANORAMA TRAIL SOUTH 01/25/20   |                     |                |  | 2017                                    |                         |        |                    | XOfficer (give titleOther (specify below) |                                       |                         |  |
|   |                     |                |  |   |                         |        |                    | /   | P/Controller                          |                         |  |
|   | (Street)            |                | 4. If Ame  | ndment, Da                              | te Origina              | 1      |                    | 6. Individual or Jo                       | oint/Group Filir                      | g(Check                 |  |
|   |                     |                | Filed(Mor  | th/Day/Year                             | )                       |        |                    | Applicable Line)                          |                                       |                         |  |
| DOCUERT   |                     |                |  |   |                         |        |                    | _X_ Form filed by C<br>Form filed by N    | One Reporting Pe<br>Iore than One Re  |                         |  |
| ROCHESTI  | ER, NY 14625        |                |  |   |                         |        |                    | Person                                    |                                       | Porting                 |  |
| (City)  | (State)             | (Zip)          | Tabl   | e I - Non-D                             | erivative               | Secur  | rities Acq         | uired, Disposed of                        | , or Beneficial                       | ly Owned                |  |
| 1.Title of  | 2. Transaction D    | ate 2A. Dee    | med  | 3.                                      | 4. Securi               | ties A | cquired            | 5. Amount of                              | 6. Ownership                          | 7. Nature of            |  |
| Security  | (Month/Day/Yea      |                | on Date, if                                      | Transaction(A) or Disposed of (D)       |                         |        |                    | Securities                                | Form: Direct Indirect                 |                         |  |
| (Instr. 3)  |                     | any<br>(Month/ | Code (Instr. 3, 4 and 5)<br>Day/Year) (Instr. 8) |   |                         |        |                    | 2   | (D) or<br>Indirect (I)                | Beneficial<br>Ownership |  |
|   |                     | (11101111)     | 2 uj, 1 cui)                                     | (1115411-0)                             |                         |        |                    | Following                                 | (Instr. 4)                            | (Instr. 4)              |  |
|   |                     |                |  |   |                         | (A)    |                    | Reported                                  |                                       |                         |  |
|   |                     |                |  |   |                         | or     |                    | Transaction(s) (Instr. 3 and 4)           |                                       |                         |  |
| Common  |                     |                |  | Code V                                  | Amount                  | (D)    | Price<br>\$        | ````                                      |                                       |                         |  |
| Stock   | 01/25/2017          |                |  | S                                       | 5,876                   | D      | ه<br>62.01         | 23,483                                    | D                                     |                         |  |
|   |                     |                |  |   |                         |        | 02.01              |   |                                       |                         |  |
| Common  |                     |                |  |   |                         |        |                    | 850                                       | Ι                                     | 401(k)                  |  |
| Stock   |                     |                |  |   |                         |        |                    |   |                                       |                         |  |

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 in this form are not required to respond unless the form displays a currently valid OMB control number.

#### Edgar Filing: PAYCHEX INC - Form 4

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) | Expiration Date<br>(Month/Day/Year) |                    | Underlying Securities (Instr. 3 and 4) |                                     | 8. Pri<br>Deriv<br>Secu<br>(Instr |
|---|---|---|---|--|---|-------------------------------------|--------------------|--|-------------------------------------|-----------------------------------|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable                 | Expiration<br>Date | Title                                  | Amount<br>or<br>Number<br>of Shares |                                   |
| Stock<br>Option                                     | \$ 24.21  |   |   |  |   | 07/09/2010                          | 07/08/2019         | Common<br>Stock                        | 11,155                              |                                   |
| Stock<br>Option                                     | \$ 26.02  |   |   |  |   | 07/07/2011                          | 07/06/2020         | Common<br>Stock                        | 16,383                              |                                   |
| Stock<br>Option                                     | \$ 31.34  |   |   |  |   | 07/06/2012                          | 07/05/2021         | Common<br>Stock                        | 24,372                              |                                   |
| Stock<br>Option                                     | \$ 31.63  |   |   |  |   | 07/07/2014                          | 07/06/2021         | Common<br>Stock                        | 63,000                              |                                   |
| Stock<br>Option                                     | \$ 31.65  |   |   |  |   | 07/11/2013                          | 07/10/2022         | Common<br>Stock                        | 29,450                              |                                   |
| Stock<br>Option                                     | \$ 38.48  |   |   |  |   | 07/10/2014                          | 07/09/2023         | Common<br>Stock                        | 26,956                              |                                   |
| Stock<br>Option                                     | \$ 41.7   |   |   |  |   | 07/09/2015                          | 07/08/2024         | Common<br>Stock                        | 22,135                              |                                   |
| Stock<br>Option                                     | \$ 47.32  |   |   |  |   | 07/08/2016                          | 07/07/2025         | Common<br>Stock                        | 23,438                              |                                   |
| Stock<br>Option                                     | \$ 60.84  |   |   |  |   | 07/06/2017                          | 07/05/2026         | Common<br>Stock                        | 24,311                              |                                   |
| Stock<br>Option                                     | \$ 60.84  |   |   |  |   | 07/06/2017                          | 07/05/2026         | Common<br>Stock                        | 76,652                              |                                   |

### **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |               |       |  |  |  |
|--|---------------|-----------|---------------|-------|--|--|--|
| 1  | Director      | 10% Owner | Officer       | Other |  |  |  |
| Vossler Jennifer R.<br>911 PANORAMA TRAIL SOUTH<br>ROCHESTER, NY 14625 |               |           | VP/Controller |       |  |  |  |

# Signatures

Stephanie L. Schaeffer, Attorney-in-fact

01/26/2017

\*\*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).

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.