(City)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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)

(State)

(Zip)

or Section 30(h) of the Investment Company Act of 1940 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 2. Issuer Name and Ticker or Trading Symbol 1. Name and Address of Reporting Person* Paylocity Holding Corp [PCTY] **Gaty Edward W** Director 10% Owner Officer (give title Other (specify 3. Date of Earliest Transaction (Month/Day/Year) below) below) (Last) (First) (Middle) 08/17/2018 SVP of Product and Technology C/O 1400 AMERICAN LANE 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable (Street) Line) SCHAUMBURG IL Form filed by One Reporting Person 60173 Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(mour 4)	
08/17/2018		F		5,605	D	\$68.07	112,168 ⁽¹⁾	D		
08/18/2018		F		776	D	\$68.92	111,392	D		
	2. Transaction Date (Month/Day/Year)	2. Transaction Date (Month/Day/Year) 24. Deemed Execution Date, if any (Month/Day/Year) 08/17/2018	2. Transaction Date (Month/Day/Year)	2. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	2. Transaction Date (Month/Day/Year) (Month/Day/Year) 24. Deemed Execution Date (Transaction Code (Instr. 8)	2. Transaction Date (Month/Day/Year) Month/Day/Year) 2A. Deemed Execution Date Transaction Code (Instr. 8)	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date (if any (Month/Day/Year) Code V Amount Code (D) Price	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year) Code V Amount (A) or (D) Price Transaction(S) (Instr. 3 and 4) 08/17/2018 F 5,605 D \$68.07 112,168(1)	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year) Code V Amount Code V Amount Code Cod	

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

(e.g., pais, vairaits, options, convertible securities)													1			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	'		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

1. Amount of securities beneficially owned reflects the forfeiture of certain performance-based restricted stock units previously reported in Table I.

Remarks:

/s/ Scott Mayhew, attorney-in-08/21/2018 fact to Edward Gaty

** Signature of Reporting Person

Date

Person

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

- * 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.

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.