FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject	STATE
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

EMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Sarowitz Steven I					2. Issuer Name and Ticker or Trading Symbol Paylocity Holding Corp [PCTY]										ationship callapp Direc		Ū	erson(s) to I		
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 02/15/2024									Office	er (give title v)		Other (below)	specify	
C/O 1400 AMERICAN LANE					4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X		filed by On				
SCHAUMBURG IL 60173																orm filed by More than One Reporting erson				
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication														
											ansaction was ditions of Rule					ruction or wri	tten pl	lan that is int	ended to	
		Table	I - N	Ion-Deriva	tive \$	Secui	rities	Ac	quire	ed, Di	isposed o	f, or E	Benefici	ally	Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			ear) i	emed on Date, /Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5)	Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price		Transa	saction(s) r. 3 and 4)			(msu. 4)		
Common Stock, par value \$0.001 02				02/15/202	24				S		3,705(1)	D	\$175.3	9,584,167		84,167	D			
Common	Stock, par value \$0.001 02/15/202			24				S		679(1)	D	\$176.3	4(3)	9,583,488		D				
		Tal	ole I	l - Derivati (e.g., pu							posed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed ution Date, y tith/Day/Year)	4. Transa Code (8)	(Instr.			Expi (Mor	iration nth/Day	/Year)	Amou Secur Under Derive Secur 3 and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. The transaction indicated was conducted under an approved 10b5-1 Plan adopted by the reporting person on September 15, 2023.
- 2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$175.00 to \$176.00, inclusive. The reporting person undertakes to provide to Paylocity Holding Corporation, any security holder of Paylocity Holding Corporation, or the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnotes 2 and 3 of this Form 4.
- 3. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$176.03 to \$176.56, inclusive.

Remarks:

/s/ Kris Kang, attorney-in-fact to Steven I. Sarowitz

02/20/2024

** Signature of Reporting Person Date

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.