FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	ction 1(b).	ide. See		Filed							ties Exchang mpany Act o		1934		nours	per respon	iise.	0.5
Name and Address of Reporting Person*     Rost Nicholas					2. Issuer Name <b>and</b> Ticker or Trading Symbol Paylocity Holding Corp [ PCTY ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) C/O 140	(Last) (First) (Middle) C/O 1400 AMERICAN LANE				3. Date of Earliest Transaction (Month/Day/Year) 11/15/2023								A belo	Officer (give title below)  VP & Chief Act		Other (sp below) ccounting Office		
(Street) SCHAUMBURG IL 60173					4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Forn	or Joint/Group Filing (Check Applicable in filed by One Reporting Person in filed by More than One Reporting son				
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	quired	, Dis	posed of	, or Be	enefic	ally Owr	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4		nd Secur Benef Owne	icially d Following	6. Owne Form: D (D) or In (I) (Instr.	irect direct	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock, par value \$0.001 11/15/20					:023		F		91	D	\$149	.99	9 5,297					
		Tal	ble II -								osed of, convertib				d			
1. Title of Derivative Security  (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Yea			Execut if any	Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Own For Dire or I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	,,	(A)	(D)	Date Exerci	cablo	Expiration Date		or Number of						

**Explanation of Responses:** 

Remarks:

/s/ Kris Kang, attorney-in-fact to Nicholas Rost

11/17/2023

\*\* Signature of Reporting 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.