SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287						
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*				2. Issuer Name and Ticker or Trading Symbol Paylocity Holding Corp [PCTY]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Williams Toby J.</u>												,	10% Owner		ner		
(Last) (First) (Middle) C/O 1400 AMERICAN LANE					3. Date of Earliest Transaction (Month/Day/Year)							C Officer	(give title	Other (specify below)		pecify	
					09/07/2023							,		t and Co-CEO			
	U AIVIERIC	AINLAINE			<u> </u>						_						
(Street)					4. If Am	nendment, Date of	Original	l Filed	(Month/Day	y/Year)	6. In Line	dividual or ()	loint/Group	o Filing (C	Check App	licable	
SCHAUMBURG IL 60173			60173								2	Form f	led by One Reporting Person			1	
								Form filed by More than One Reporting Person				ting					
(City)	(S	tate)	(Zip)		Rule	Rule 10b5-1(c) Transaction Indication											
						eck this box to indica						act, instructio	n or written	plan that is	s intended	to satisfy	
					the	affirmative defense	conditior	ns of R	ule 10b5-1(c)). See Instru	ction 10.						
		Tal	ole I - Non-	-Deriva	ative S	ecurities Acq	uired,	Dis	posed of	f, or Ber	eficially	y Owned					
D			2. Transaction Date (Month/Day/Year)							and 5) Securities Beneficially Owned Fol							
1. Title of	Security (Ins	tr. 3)	C	Date		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)			es Acquirec Of (D) (Instr) Securitie Benefici Owned F	es ally Following	6. Owne Form: D (D) or In (I) (Instr.	Direct lindirect E . 4) C	7. Nature of ndirect Beneficial Dwnership Instr <i>4</i>)	
1. Title of	Security (Ins	tr. 3)	C	Date		Execution Date, if any	Transa Code () Securitie Benefici	es ally Following d tion(s)	Form: D (D) or In	Direct lindirect E . 4) C	ndirect Beneficial	
		tr. 3) value \$0.001	C	Date	ay/Year)	Execution Date, if any	Transa Code (8)	Instr.	Disposed	Of (D) (Instr (A) or (D)	. 3, 4 and 5) Securitie Benefici Owned F Reporte Transac (Instr. 3	es ally Following d tion(s)	Form: D (D) or In	Direct In Indirect E . 4) (ndirect Beneficial Dwnership	
Common	Stock, par		C	Date (Month/Da	/2023	Execution Date, if any	Transa Code (8) Code	Instr.	Disposed of Amount	Of (D) (Instr (A) or (D)	. 3, 4 and 5 Price) Securitie Benefici Owned R Reporte Transac (Instr. 3	es ally Following d tion(s) and 4)	Form: D (D) or In (I) (Instr.	birect Idirect ((()	ndirect Beneficial Dwnership	
Common	Stock, par	value \$0.001 value \$0.001	Table II - D	Date (Month/D 09/07/ 09/07/ Derivat	/2023 /2023 tive Sec	Execution Date, if any (Month/Day/Year)	Transa Code (8) Code M F ired, E	v Dispe	Disposed 0 Amount 8,679 ⁽¹⁾ 4,188 osed of,	Of (D) (Instr (A) or (D) A D Or Bene	3, 4 and 5 Price \$0 \$201,5 ficially) Securitie Benefici Owned R Reporte Transac (Instr. 3 127 5 123	es ally Following d tion(s) and 4) 7,639	Form: D (D) or In (I) (Instr.	birect Idirect ((()	ndirect Beneficial Dwnership	
Common	Stock, par	value \$0.001 value \$0.001	Table II - D	Date (Month/D 09/07/ 09/07/ Derivat	/2023 /2023 tive Sec	Execution Date, if any (Month/Day/Year)	Transa Code (8) Code M F ired, E	v Dispe	Disposed 0 Amount 8,679 ⁽¹⁾ 4,188 osed of,	Of (D) (Instr (A) or (D) A D Or Bene	3, 4 and 5 Price \$0 \$201,5 ficially) Securitie Benefici Owned R Reporte Transac (Instr. 3 127 5 123	es ally Following d tion(s) and 4) 7,639	Form: D (D) or In (I) (Instr.	birect Idirect ((()	ndirect Beneficial Dwnership	
Common	Stock, par	value \$0.001 value \$0.001	Table II - D	Date (Month/Da 09/07/ 09/07/ Derivat e.g., pi ate, 4. Tr c.	/2023 /2023 tive Secuts, ca	Execution Date, if any (Month/Day/Year) Curities Acqu IIs, warrants, 5. Number of Derivative	Transa Code (8) Code M F ired, E option	Unstr.	Amount 8,679 ⁽¹⁾ 4,188 osed of, convertibusable and	Of (D) (Instr (A) or (D) A D Or Bene	Price Price \$0 \$201.5 ficially ities)) Securitie Benefici Owned R Reporte Transac (Instr. 3 127 5 123	es ally Following d tion(s) and 4) 7,639	Form: D (D) or in (I) (Instr.	birect line direct E (() ()	ndirect Beneficial Dwnership	

or Number of Shares Date Exercisable Expiration Date (A) (D) Title Commor Market Stock. 7,232⁽²⁾ 09/07/2023 Stock \$<mark>0</mark> Μ (3) (4) 7,232 \$<mark>0</mark> Units par valu \$0.001

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Code

Explanation of Responses:

1. Represents shares of Issuer Common Stock issued upon the settlement of Market Stock Units granted on August 14, 2020, based on the achievement by the Issuer of certain total shareholder return objectives over the three-year performance period ending August 31, 2023.

2. Each Market Stock Unit entitles the Reporting Person to a payout of shares of Issuer Common Stock equal to between 0% and 200% of such Market Stock Unit depending on the relative performance of the total shareholder return of Issuer Common Stock compared with that of a peer group over a three-year performance period ending August 31, 2023.

3. The Market Stock Units vested upon determination by the Compensation Committee of the level of achievement of the performance criteria.

4. Market Stock Units do not expire; they either vest or are canceled prior to or upon the vesting date.

Remarks:

/s/ Kris Kang, attorney-in-fact 09/11/2023 to Toby J. Williams

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** 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.