| SEC Form 4 | |
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| FORM | 4 |

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(h) |
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Check this box to indicate that a transaction was made pursuant to a

contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

| 1. Name and Address of Reporting Person [*] <u>Rost Nicholas</u> (Last) (First) (Middle) C/O 1400 AMERICAN LANE | | | 2. Issuer Name and Ticker or Trading Symbol <u>Paylocity Holding Corp</u> [PCTY] 3. Date of Earliest Transaction (Month/Day/Year) 11/19/2024 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) below) VP CAO & Treasurer | | | | |
|---|----------------|----------------|--|---|---|------------|--|--|
| (Street) SCHAUMBUR((City) | GIL (State) | 60173 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi Line) | dual or Joint/Group Filing (Form filed by One Report Form filed by More than C Person | ing Person | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction | | 4. Securities Disposed Of 5) | | | Securities Beneficially | Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|-------------|---|------------------------------------|---------------|----------|------------------------------------|---------------------------------|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock, par value \$0.001 | 11/19/2024 | | S | | 212(1) | D | \$193.29 | 7,364 | D | |

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

| | | | | | | | | | | | | | | i i | | | | |
|---|---|--|---|-----------------------------------|---|--|-----|---------------------|--------------------|--|--|-------|---|---|--|--|--|--|
| 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) | Transaction Code (Instr. 8) | | tion Date, Transaction Code (Instr. | | tion of | | 6. Date Exerc Expiration Da (Month/Day/h | ate | Deriv | int of rities rlying ative rity (Instr. | 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. The transaction indicated was conducted under an approved 10b5-1 Plan adopted by the reporting person on March 13, 2024.

Remarks:

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

<u>/-m-fact</u> <u>11/20/2024</u>

** 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.