### Edgar Filing: Haske Michael R - Form 4

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Form 4											
Washington, D.C. 20549     N       Check this box     if no longer       subject to     STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF       Section 16.     SECURITIES								OMB Number: Expires: Estimated a burden hour response	•		
(Print or Type ]	Responses)										
Haske Michael R Syn			Symbol		I Ticker or		6	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. (M			(Month/E	3. Date of Earliest Transaction (Month/Day/Year) 05/15/2018				(Check all applicable)          Director       10% Owner         Officer (give title       0ther (specify below)         President and COO			
				endment, Date Original onth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
	ON HEIGHTS, I							Person			
(City) 1.Title of Security (Instr. 3)	(State)(Zip)Table2. Transaction Date2A. Deemed(Month/Day/Year)Execution Date, ifany(Month/Day/Year)			<ul> <li>a I - Non-Derivative Securities Acq</li> <li>3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)</li> </ul>				irred, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock, par value \$0.001	05/15/2018			Code V S	Amount 39,587 (1)	(D) D	Price \$ 54.6 (2)	1,094,157	D		
Common Stock, par value \$0.001	05/15/2018			S	10,413 (1)	D	\$ 55.44 ( <u>3)</u>	1,083,744	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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# required to respond unless the form displays a currently valid OMB control number.

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

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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Expiration D (Month/Day/ e	ation Date th/Day/Year)		e and int of lying ities 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
I generation of the	Director	10% Owner	Officer	Other		
Haske Michael R C/O 3850 N. WILKE ROAD ARLINGTON HEIGHTS, IL 60004			President and COO			
<u></u>						

## Signatures

/s/ Scott Mayhew, attorney-in-fact to Michael R. Haske

\*\*Signature of Reporting Person

# **Explanation of Responses:**

- \* 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).
- (1) The transaction indicated was conducted under an approved 10b5-1 Plan adopted by the reporting person on August 16, 2017.

The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$54.27 to \$55.27 inclusive. The reporting person undertakes to provide to Paylocity Holding Corporation, any security holder of Paylocity

05/16/2018

Date

- (2) 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 \$55.28 to \$55.57, inclusive.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.