FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPR	OVAL							
OMB Number:	3235-0287							
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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 Pe VILLAR RAUL JR.  (Last) (First) C/O PAYCOR HCM, INC. 4811 MONTGOMERY ROAD  (Street) CINCINNATI OH  (City) (State)	(Middle) 45212 (Zip)		3. Da 01/2	2. Issuer Name and Ticker or Trading Symbol PAYCOR HCM, INC. [ PYCR ]  3. Date of Earliest Transaction (Month/Day/Year) 01/23/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)								(Check X X	X Officer (give title Other (specify below)  Chief Executive Officer  Individual or Joint/Group Filing (Check Applicable ne)				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				tion 2A. Deemed Execution Date,		3. 4. Securities Transaction Disposed Of Code (Instr. 5)		es Acquired (A) or Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)	Pric	e	Report Transa (Instr. 3	ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock	2023	023			F		5,666(1)	D	\$2	4.46	270,761			D			
Common Stock													25,000			I	By Villar Joint Family Trust
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. Transactio Date (Month/Day/N	ear) Execu	emed tion Date, n/Day/Year)	4. Transa Code ( 8)			ative rities ired sed	6. Date Exerci Expiration Dat (Month/Day/Ye		te Amount of		t of ies /ing ive y (Instr					10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercis	able	Expiration Date		Amoun or Numbe of Shares						

1. Represents shares withheld to satisfy tax withholding obligations upon vesting of restricted stock units

## Remarks:

/s/ Alice Geene, by Power of **Attorney** 

01/25/2023

\*\* 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.