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**

Washington, [	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	itinde. Goo		Filed	l pursua or Se	ant to Section 3	Section 30(h) d	n 16(a) of the li	of the S	ecurit ent Co	ies Exchang mpany Act o	e Act of f 1940	1934			nours	s per response:	0.5
1. Name and Address of Reporting Person*  VILLAR RAUL JR.				2. Issuer Name and Ticker or Trading Symbol PAYCOR HCM, INC. [ PYCR ]									5. Relationship of Reporti (Check all applicable) X Director			ng Person(s) to Issuer		
(Last)	(Last) (First) (Middle) C/O PAYCOR HCM, INC.				3. Date of Earliest Transaction (Month/Day/Year) 01/09/2024									X	belov	,	Othe belo cutive Office	,
4811 MONTGOMERY ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) CINCINNATI OH 45212													X	'				
(City)	(:	State)	(Zip)		Ru	le 10	)b5-	·1(c)	Tran	sac	tion Ind	icatio	n					
											saction was mons of Rule 1					uction or writt	ten plan that is i	ntended to
		Tabl	e I - No	n-Deriva	tive \$	Secu	rities	Acq	uired	, Dis	posed of	, or B	enefi	cially	Own	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquir Disposed Of (D) (Instr. 5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)		ce		ction(s) 3 and 4)		(Instr. 4)		
Common	ommon Stock 01		01/09/2	2024				F		5,993(1)	D	\$2	0.28	53	9,254	D		
Common	Stock														2:	25,000 I By Villar Joint Family Trust		
		T	able II -								osed of,				Owne	d		
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		(Month/Day/Year) if any		emed 4. Transa Code (/Day/Year) 8)		action	5. Number ction of		6. Date Exercisable and Expiration Date (Month/Day/Year)		isable and	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. F Der Sed (Ins	Price of rivative curity str. 5)	ative derivative ity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Benefici Ownersi ct (Instr. 4)
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date		Amoun or Numbe of Shares	r					

## **Explanation of Responses:**

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

/s/ Alice Geene, by Power of <u>Attorney</u>

01/11/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.