Instruction 1(b).

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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* <u>GLEESPEN MICHAEL W</u>						2. Issuer Name and Ticker or Trading Symbol CBIZ, Inc. [ CBZ ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) C/O CBIZ, INC. 6050 OAK TREE BOULEVARD SOUTH						3. Date of Earliest Transaction (Month/Day/Year) 05/09/2018								X Officer (give title below) Other (specify below)  Corp. Secretary						
OUSU OAN TREE BOULEVARD SOUTH						If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable					
(Street) CLEVELAND OH 44131														X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)															Person					
		Tak	ole I - N	on-Deriv	vativ	e Sec	curities	s Ac	quire	d, Di	sposed o	f, or Be	neficia	ally O	wned					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N						Execution Date,						ities Acquired (A) or d Of (D) (Instr. 3, 4 a		Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3		tion(s)			(Instr. 4)	
Common stock <sup>(1)</sup> 05/09/20						18		A		12,000	A	\$0.000	000(2) 1		,712	D				
			Table II								posed of, convertil				ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deer Execution if any (Month/I	on Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable a Expiration Date (Month/Day/Year)		ate	7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershij Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	r						
Employee Stock Option <sup>(3)</sup>	\$19.45	05/09/2018			A		36,000		05/09/2	2019	05/09/2024	Common stock	36,000	0 \$0.0	0000 <sup>(4)</sup>	36,000		D		
Employee Stock Option	\$6.52								05/09/2	2014	05/09/2019	Common stock	9,000			9,000		D		
Employee Stock Option	\$8.36								05/14/2	2015	05/14/2020	Common stock	18,000	0		18,000		D		
Employee Stock Option	\$9.35								05/15/2	2016	05/15/2021	Common stock	27,000	0		27,000		D		
Employee Stock Option	\$10.35								05/10/2	2017	05/10/2022	Common stock	36,000	0		36,000		D		
Employee Stock	\$15.55								05/10/2	2018	05/10/2023	Common	36,00	0		36,000		D		

## **Explanation of Responses:**

Option

- 1. Consists of restricted shares issued under the CBIZ, Inc. 2014 Stock Incentive Plan. Restrictions lapse with respect to 25% of the granted restricted shares on each of the first, second, third and fourth anniversaries of the grant date, provided grantee is still providing services to CBIZ on such vesting dates, and grantee has complied with the applicable CBIZ client non-interference policy.
- 2. No consideration was provided for this grant.
- 3. Consists of Options granted on 05/09/2018 vesting in 25% increments each year beginning 05/09/2019 and expiring on 05/09/2024.
- 4. Options priced at closing NYSE price of \$19.45 on 05/09/2018.

/s/ Michael W. Gleespen

stock

05/11/2018

\*\* 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.