SEC Form 4	
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

	3235-0201
Estimated average burd	en
hours per response:	0.5

obligat	tions may continution 1(b).	nue. See		Eil	led nur	suant	to Sec	tion 16	a) of the Se	curiti	ies Evchan	ine Act of 1	034		hours	per response:	0.5	
									e Investmen				934		<u>[-</u>			
1. Name and Address of Reporting Person [*] GROVE WARE H						2. Issuer Name and Ticker or Trading Symbol CBIZ, Inc. [CBZ]								5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Ow				
(Last) (First) (Middle) C/O CBIZ, INC.						3. Date of Earliest Transaction (Month/Day/Year) 05/27/2020								X Officer below)		Other below F.O.	(specify)	
6050 OA	K TREE B	OULEVARD SO	OUTH															
(Street) CLEVELAND OH 44131					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicat Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)		-									Person				
		Tab	le I - Noi	n-Deri	vativ	e Se	curit	ies A	cquired,	Dis	posed o	of, or Be	neficia	lly Owned	t			
1. Title of Security (Instr. 3)			2. Tran Date (Month		ear) I	2A. Deemed Execution Date,		3. 4. Securities Acquired (A e, Transaction Disposed Of (D) (Instr. 3 Code (Instr. 5) 5)			ed (A) or tr. 3, 4 and	Benefic Owned	unt of ies cially 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			05/2	7/202	0			M ⁽¹⁾		5,000) A	\$ <mark>9.</mark> 3	5 254	4,076	D		
Common	Stock			05/2	7/202	0			M ⁽¹⁾		5,000) A	\$ <mark>9.</mark> 3	5 259	9,076	D		
Common Stock 05/27				7/202	/2020			S		5,000) D	\$23.	1 254	4,076	D			
Common	Stock			05/2	7/202	0			S		5,000) D	\$23.2	2 ⁽²⁾ 249	9,076	D		
				(e.g.,	puts,		s, wa	arrant	s, option	s, c	onverti	ble secu	rities)	/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Deversion Date Execution Exercise (Month/Day/Year) if any ice of privative				4. Transaction Code (Instr. 8)		n of 🛛		ercisa Date y/Yea		7. Title and of Securiti Underlying Derivative (Instr. 3 an	es Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficia Ownersh t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration bate	Title	Amount or Number of Shares					
Employee Stock Option	\$9.35	05/27/2020			M ⁽¹⁾			5,000	05/15/201	5 0	5/15/2021	Common Stock	5,000	\$0	35,000) D		
Employee Stock Option	\$9.35	05/27/2020			M ⁽¹⁾			5,000	05/15/201	5 0	5/15/2021	Common Stock	5,000	\$0	30,000) D		
Employee Stock Option	\$10.35								05/10/201	7 0	5/10/2022	Common Stock	75,000		75,000) D		
Employee Stock Option	\$15.55								05/10/201	3 0	5/10/2023	Common Stock	75,000		75,000	D D		
									05/09/201		5/09/2024	Common Stock	75,000		75,000) D		
Employee Stock Option	\$19.45																	
	\$19.45 \$0								03/20/2020	+	3/20/2022	Common Stock	21,051		21,05	1 D		

1. Exercise and sale of Employee Stock Options granted 05-15-2015 at \$9.35 exercise price, expiring 05-15-2021.

2. Weighted average sale price of price range between \$23.24 and \$23.17. Will provide upon request number of shares sold at each separate price.

Michael W. Gleespent,

Attorney-In-Fact for Ware H. Grove

** Signature of Reporting Person Date

05/28/2020

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.