FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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* GLEESPEN MICHAEL W					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						
GEELOT EIV WIIGITALE W																		·	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)							\dashv	X Officer below)	low) below		Other (s below)	specify	
C/O CBIZ, INC.						05/09/2016								Corp. Secretary					
6050 OAK TREE BOULEVARD SOUTH																			
- OOSO OAN TREE DOOLE VARD SOUTH						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line) X Form filed by One Reporting Person					
CLEVEL	LAND C	H	44131												•		•		
					-1									Persor		e tnan	One Repor	rung	
(City)	(5	State)	(Zip)																
		Tab	le I - N	on-Der	ivativ	e Sec	curities	s Ac	quire	d, Di	sposed o	f, or Be	neficial	y Owned					
1. Title of S	Security (Ins	tr. 3)		2. Transa	action		Deemed		3. 4. Securities Acquired (A) or					5. Amount of				7. Nature	
Date (Month/Day					ay/Year	r) if ar	ecution Date, any onth/Day/Year)		Transaction Code (Instr. 8)				3, 4 and 5)	Benefici Owned I	Securities Beneficially Owned Following		r Indirect	of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common stock ⁽¹⁾ 05/09/20						016		F		1,050	D	\$10.19	92	,806	D				
Common stock ⁽²⁾ 05/10/20				/2016)16		A		12,000	A	\$0.0000	(3) 104	1,806	D					
		-	Table II	- Deriv	ative	Secu	ırities	Aca	uired.	Dis	posed of,	or Ben	eficially	Owned			<u> </u>		
											converti								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution		4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed		6. Date Exerci Expiration Da (Month/Day/Ye		ate of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
							of (D) (I 3, 4 and	nstr. I 5)							Transaction(s) (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option ⁽⁴⁾	\$10.35	05/10/2016			A		36,000		05/10/2	2017	05/10/2022	Common stock	36,000	\$0.0000	36,000)	D		
Employee Stock Option	\$6.52								05/09/2	2014	05/09/2019	Common stock	18,000		18,000)	D		
Employee Stock Option	\$8.36								05/14/2	2015	05/14/2020	Common stock	36,000		36,000)	D		
Employee Stock Option	\$9.35								05/15/2	2016	05/15/2021	Common stock	36,000		36,000)	D		
Employee Stock	\$5.87								05/22/2	2013	05/22/2018	Common	9,000		9,000		D		

Explanation of Responses:

- 1. Surrender of stock to satisfy withholding obligation on vesting of restricted stock
- 2. 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.
- 3. No consideration was provided for this grant.
- $4. \ Consists of Options \ granted \ 05/10/2016, \ vesting \ in \ 25\% \ increments \ each \ year \ beginning \ 05/10/2017, \ and \ expiring \ on \ 05/10/2022.$

/s/ Michael W. Gleespen 05/11/2016

** Signature of Reporting Person

Date

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

- * 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.