FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address Cotter Jeffrey I			2. Issuer Name and Ticker or Trading Symbol DELUXE CORP [DLX]		ionship of Reporting Person(s) fall applicable) Director Officer (give title	10% Owner Other (specify						
(Last) 3680 VICTORIA S	(First) STREET N	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/01/2019		SVP, General Counsel	below) I & Secy						
(Street) SHOREVIEW	MN	55126	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing (Chec Form filed by One Reporting Form filed by More than One	Person						
(City)	(State)	(Zip)			,							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	Date	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)		4. Securities Ac Disposed Of (D			Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock								4,221(1)	D	

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. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Units	\$0 ⁽²⁾	04/01/2019		A		4,563		(2)	(2)	Common Stock	4,563	\$0	4,563	D	
Common Stock Option	\$68.62							06/11/2019 ⁽³⁾	06/11/2025	Common Stock	10,196		10,196	D	
Common Stock Option	\$44.69	04/01/2019		A		32,051		04/01/2020 ⁽⁴⁾	04/01/2029	Common Stock	32,051	\$0	32,051	D	

Explanation of Responses:

- 1. Total ownership includes 2,186 shares of restricted stock.
- 2. Restricted stock units awarded on 4/1/19 under the Company's Long-Term Incentive Plan, subject to the following vesting schedule: 3,356 units will vest in four equal amounts on each of the first four anniversaries of the date of grant, and 1,207 units will vest in three equal amounts on each of the first three anniversaries of the date of grant. Upon vesting, each unit is converted into a share of common stock. Subject to certain exceptions, vesting is contingent upon continued employment.
- 3. Options vest in three equal installments on the three succeeding anniversary dates of the date of grant, provided the holder remains an employee of the Company. Date entered reflects date on which first installment vests(ed).
- 4. Options vest in four equal installments on the four succeeding anniversary dates of the date of grant, provided the holder remains an employee of the Company. Date entered reflects date on which first installment vests(ed).

Remarks:

Jeffrey L. Cotter

04/03/2019

** 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.