CINTAS CORP Form 4 July 29, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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OMB APPROVAL

3235-0287

January 31,

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Number:

Expires:

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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Addr Holloman Jame | • | ng Person * | 2. Issuer Name and Ticker or Trading Symbol CINTAS CORP [CTAS] | 5. Relationship of Reporting Person(s) to Issuer | | | |
|-----------------------------------|----------|-------------|--|--|--|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | (Check all applicable) | | | |
| P.O. BOX 625 | 737 | | (Month/Day/Year) 07/25/2013 | Director 10% Owner Officer (give title Other (specify below) President and COO | | | |
| | (Street) | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| CINCINNATI, | | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |

| (City) | (State) | (Zip) Tabl | e I - Non-D | erivative) | Secui | rities Acq | uired, Disposed o | f, or Beneficial | ly Owned |
|--------------------------------------|---|---|---|--------------------------------|------------------------------|-------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securion(A) or D (Instr. 3, | ispose 4 and (A) or | ed of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 07/25/2013 | | M | 1,000 | A | \$ 39.29 | 116,418 | D | |
| Common Stock | 07/25/2013 | | F | 832 | D | \$ 47.27 | 115,586 | D | |
| Common Stock | | | | | | | 3,316 | I | 401(k) |

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

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number.

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) | 4. Transactic Code (Instr. 8) | Secu Acqu (A) o Disp (D) | rities nired or osed of r. 3, 4, | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo Underlying Security (Instr. 3 and 4) | | Securities 1 | |
|---|---|---|--|--------------------------------------|--|---|--------------------|-----------------|--|
| | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Options (Right to Buy) (1) | \$ 39.29 | 07/25/2013 | M | | 1,000 | <u>(1)</u> | 07/29/2013 | Common Stock | 1,000 |

Reporting Owners

| Danarting Owner Name / Address |
|--------------------------------|
|--------------------------------|

Director 10% Owner Officer Other

Holloman James Phillip P.O. BOX 625737 CINCINNATI, OH 45262

President and COO

Signatures

/s/ F. Mark Reuter, as Attorney-in-Fact for James Phillip Holloman

07/29/2013

De Sec (In

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The options vested in five equal installments beginning 7/2/2008.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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