### Edgar Filing: JOHNSON JAMES J - Form 4

TOTINGONT LANGE

Form 4												
October 17, 2 FORM	<b>4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL OMB 3235-028 Number: 4000000000000000000000000000000000000	
if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	er <b>STATEN</b> 5. Filed put s Section 17(	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940								Expires: January 31 2005 Estimated average burden hours per response 0.5		
(Print or Type R	esponses)											
JOHNSON JAMES J Symbol			Symbol	er Name <b>and</b> Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(N			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>10/16/2012</li></ul>						Officer (give title Other (specify below) below)			
				mendment, Date Original Aonth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li>_Form filed by More than One Reporting</li> </ul>			
	ГІ, ОН 45262								Person		eporting	
(City)	(State)	(Zip)	Table	I - Non	-De	rivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (Instr. 3	8)	4. Securities ionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or 7 Amount (D) Price		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	10/16/2012			A <u>(1)</u>	·	976	A	\$ 0	6,174	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

### **Reporting Owners**

#### Edgar Filing: JOHNSON JAMES J - Form 4

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. Transacti Code (Instr. 8)	5. Number action f Derivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Dei Sec (In:
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 42.17	10/16/2012		А	3,923		(2)	10/16/2022	Common Stock	3,923	

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationsh							
	Director	10% Owner	Officer	Other					
JOHNSON JAMES J									
P.O. BOX 625737	Х								
CINCINNATI, OH 45262									
Signatures									
/s/ F. Mark Reuter as Attorney-		10/17/2012							
Johnson				10/17/2012					

\*\*Signature of Reporting Person

## **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).

Date

- (1) Restricted shares granted pursuant to Cintas Corporation's 2005 Equity Compensation Plan. These shares cliff vest on the third anniversary of the grant date.
- (2) Option granted pursuant to Cintas Corporation's 2005 Equity Compensation Plan. Twenty-five percent of the options are exercisable on 10/16/2013 and twenty-five percent each year thereafter until a full vest date of 10/16/2016.

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.