## Edgar Filing: Schneider Todd M. - Form 4/A

Schneider To Form 4/A	odd M.										
August 07, 2	2018										
FORM	ГЛ								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ger 5 16. 5 5 5 5 5 5 5 5 5 5 5 5 5	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 30(h) of the Investment Company Act of 1940									
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Schneider Todd M.			2. Issuer Name <b>and</b> Ticker or Trading Symbol CINTAS CORP [CTAS]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	3. Date of	f Earliest Ti	ransaction			(Check	c all applicable	)	
P.O. BOX 625737, 6800 CINTAS BLVD.			(Month/Day/Year) 07/20/2018					Director       10% Owner         Officer (give title       Other (specify below)         below)       below)         Executive Vice President & COO			
Fi				endment, Da nth/Day/Year 018	-	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Parcon			
		(Zin)						Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acq	uired, Disposed of	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d 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	07/20/2018			F	6,422 (1) (2)	D	\$ 203.57	73,847	D		
Common Stock								3,728	Ι	By 401(k) Plan	
Common Stock								31,268	Ι	By GRAT Trust	

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. Transact (Month/Da	y/Year)	3A. Deemed Execution Date, any (Month/Day/Yea	Code	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amo Unde Secu	tele and unt of vrlying rities :. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owners												
Reporting	Owner Name /	/ Address			Relatio	onships						
mehonung			Director	10% Owner	Officer			Oth	er			

Executive Vice President & COO

Schneider Todd M. P.O. BOX 625737 6800 CINTAS BLVD. CINCINNATI, OH 45262

## Signatures

/s/ F. Mark Reuter, as Attorney-in-Fact for Todd M. Schneider	08/07/2018		
**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) Restrictions on restricted shares granted pursuant to Cintas Corporation's 2005 Equity Compensation Plan and previously reported on Form 3 have lapsed. The Reporting Person has transferred 6,422 of these shares to satisfy tax withholding.
- (2) This amendment is being filed to amend the number of shares transferred to satisfy tax withholding, which was incorrectly reported as 6,917 instead of 6,422.

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.