Edgar Filing: MEDTRONIC INC - Form 4

Form 4	IC INC										
November 0	1, 2006										
FORM	14								OMB AF	PPROVAL	
	UNITED	STATES	S SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549						OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 c Form 5	ger 5 STATEM 16. 5 J Filed pure	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							Expires:January 31Estimated averageburden hours perresponse0.3		
may con	obligations may continue.Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							1			
(Print or Type]	Responses)										
DEMANE MICHAEL F Syn			2. Issuer Name and Ticker or Trading Symbol MEDTRONIC INC [MDT]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Aiddle)	3. Date of Earliest Transaction				(Check	k all applicable	;)		
MEDTRON	NIC, INC., 710 NIC PARKWAY,		(Month/D 10/30/20	ay/Year)	ansaction			Director X Officer (give below) Sr VP & Pre			
	(Street)	4. If Amendm Filed(Month/E			-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MINNEAP	OLIS, MN 55432	-5604						Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ties Acc	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	3. Transactio Code (Instr. 8)	n(A) or Dis (D)	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	10/30/2006			Code V A(1)	Amount 12,321	(D) A	Price \$ 0	(1153,666.657) (2)	D		
Common Stock								1,695.276	I	By ESOP	

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

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and 4	ecurities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Options (Right to buy)	\$ 48.7	10/30/2006		А	45,175	10/30/2007 <u>(3)</u>	10/30/2016	Common Stock	45,17

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DEMANE MICHAEL F			Sr VP &				
MEDTRONIC, INC.	Pres, Eur,						
710 MEDTRONIC PARKWAY, M.S. LC310			Can, LA,				
MINNEAPOLIS, MN 55432-5604			EM				
Signatures							

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Attorney-in-fact	11/01/2006
**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).

(2) This balance increased by 274.278 due to exempt transactions including ESPP, dividend reinvestment, and dividend equivalent credits.

(3) These options become exercisable at the rate of 25% of the shares granted per year beginning on the first anniversary of grant.

The restrictions on this restricted stock unit award shall lapse on the third anniversary of the grant date if the Company's cumulative earnings growth during the three year period ending on the last day of fiscal year 2009 equals or exceeds a 9% compound annual growth

(1) rate, as determined by the Compensation Committee. In the circumstances of death, Disability or Retirement, these restrictions shall lapse on a pro-rata basis, provided that the mimimum threshold has been achieved through fiscal 2009.

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.