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MEDTRONIC INC

Form 4											
August 05, 2									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANCE Washington, D.C. 20549						NGE C	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or			F CHAN	IGES IN	BENEFI	NERSHIP OF	Expires:	January 31, 2005			
			SECURITIES						Estimated average burden hours per response		
Form 5 obligation may corn <i>See</i> Insta 1(b).	ntinue. Section 17	7(a) of the	Public U		ding Con	ipany	Act of	e Act of 1934, 1935 or Sectior 0	I		
(Print or Type	Responses)										
			Symbol	2. Issuer Name and Ticker or Trading Symbol MEDTRONIC INC [MDT]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chec					k all applicable)			
710 MEDTRONIC PKWY MS 08/01/2 LC300 (Street) 4. If Am Filed(Mo				(Month/Day/Year) 08/01/2014				Director 10% Owner Officer (give title Other (specify below) EVP & GroupPres Restora Therap			
			nendment, Date Original Ionth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
MINNEAP	POLIS, MN 5543	52						Person		porting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securi	ities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	eurity (Month/Day/Year) Execution Date		n Date, if	Code (Instr. 3, 4 and 5) ear) (Instr. 8) (A) or				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				Code V	Amount	(D)	Price	2,631.873	Ι	ESOP	
Common Stock (1)	08/01/2014			F	10,865	D	\$ 61.48	128,384.454	D		

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
OConnell Christopher J 710 MEDTRONIC PKWY MS LC300			EVP & GroupPres					
MINNEAPOLIS, MN 55432			Restora Therap	,				
A ! .								

Signatures

Rhonda L. Ingalsbe, Attorney-in-fact

08/05/2014

**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) This balance increased by 280.333 shares due to exempt transactions such as dividend reinvestment.

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.