#### MEDTRONIC INC

Form 4

August 27, 2007

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

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Estimated average

**OMB APPROVAL** 

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

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * BONSIGNORE MICHAEL R			2. Issuer Name and Ticker or Trading Symbol MEDTRONIC INC. IMDT1	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	MEDTRONIC INC [MDT]  3. Date of Earliest Transaction	(Check all applicable)			
(Eust)	(Tilst)	(Midule)	(Month/Day/Year)	X Director 10% Owner			
180 E 79TH	ST, PENT	HOUSE E	08/23/2007	Officer (give title Other (specify below)			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line)			
NEW YORK	K, NY 1002	:1		_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

NEW	YORK,	NY 1	1002

(State)

(Zip)

(City)

(City)	(State)	(Zip) Tal	ble I - Non	-Derivative Se	curiti	es Acquire	ed, Disposed of, o	or Beneficiall	y 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. Securities And Disposed of (Instr. 3, 4 and Amount	D)	red (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	08/23/2007		A(1)	1,329.737	A	\$ 52.642	8,713.441 (2)	D	
Common Stock							1,534	I	By IRA Account
Common Stock							12,400	I	By Michael Bonsignore 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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable Date	-	little Nu	Number		
								of			
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships
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Director 10% Owner Officer Other

BONSIGNORE MICHAEL R
180 E 79TH ST
PENTHOUSE E
NEW YORK, NY 10021

## **Signatures**

James N. Spolar, Attorney-in-fact 08/27/2007

\*\*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) Deferred units acquired under the Medtronic, Inc. Outside Director Compensation Plan to be settled in Medtronic common stock upon the director's resignation or retirement in an election of lump sum or 5 annual payments.
- (2) This balance has increased by 63.273 shares due to exempt dividend equivalent transactions.

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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