## Edgar Filing: HOFFMAN MICHAEL J - Form 4

HOFFMAN M	IICHAEL J											
Form 4												
December 14,	2007											
FORM	<b>4</b>		CECUDI	TIEC AN	ID EVC	TT A N		OMMERION		PPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer						~			Expires:	January 31, 2005		
subject to Section 16. Form 4 or					CIAI	L OWN	NERSHIP OF	Estimated average burden hours per response 0.				
Form 5 obligations may contine <i>See</i> Instruct 1(b).	ue. Section 17(a)	of the		ity Holdi	ng Comp	pany	Act of	e Act of 1934, 1935 or Section 0	I			
(Print or Type Rea	sponses)											
1. Name and Address of Reporting Person <u>*</u> HOFFMAN MICHAEL J			2. Issuer Name <b>and</b> Ticker or Trading Symbol TORO CO [TTC]					5. Relationship of Reporting Person(s) to Issuer				
(Last)					(Check all applicable)							
8111 LYNDALE AVENUE SOUTH			(Month/Day/Year) 12/13/2007					X Director 10% Owner X Officer (give title Other (specify below) below) Chmn.,Pres & CEO				
(Street) BLOOMINGTON, MN 55420-1196			4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
								Person				
(City)	(State) (Z	ip)	Table 1	I - Non-De	rivative So	ecurit	ies Acqu	uired, Disposed of,	or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execut any	eemed ion Date, if n/Day/Year)	Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose 4 and (A) or	ed of (D) 5)	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	12/13/2007			F	Amount 6,226 (1)	(D) D	Price \$ 58.96	146 527 978	D			
Performance Share Units								45,152.9888	D			
Common Stock								29,666.5572	I	The Toro Company Investment, Savings & ESOP		

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
					,, und 0)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
HOFFMAN MICHAEL J 8111 LYNDALE AVENUE SOUTH BLOOMINGTON, MN 55420-1196	Х		Chmn.,Pres & CEO				
Signatures							
Stacy L. Bogart,	14/2007						

12/14/2007 Atty-In-Fact Date

\*\*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).
- Represents Shares of Common Stock withheld from the payment of Performance Share Awards for the Fiscal 2005 to Fiscal 2007 (1) Performance Period under The Toro Company Performance Share Plan for payment of tax liability.

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.