

MEDTRONIC INC  
Form 3  
March 09, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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 Responses)

1. Name and Address of Reporting Person \*  
Å Stuge Oern  
(Last) (First) (Middle)

2. Date of Event Requiring Statement  
(Month/Day/Year)  
03/01/2005

3. Issuer Name and Ticker or Trading Symbol  
MEDTRONIC INC [MDT]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original Filed(Month/Day/Year)

MEDTRONIC, INC., Å 710  
MEDTRONIC PARKWAY, M.S.  
LC310

(Check all applicable)

Director  10% Owner  
 Officer  Other  
(give title below) (specify below)  
SVP & Pres MDT Cardiac Surgery

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

MINNEAPOLIS, Å MN Å 55432-5604  
(City) (State) (Zip)

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	9,661.509	D	Å

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

SEC 1473 (7-02)

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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)  Title	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Expiration Date	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
Stock Options (Right to buy)	05/29/1999 <sup>(1)</sup> 05/29/2008	9,112	Common Stock	\$ 27.4375 D Â
Stock Options (Right to buy)	10/28/1999 <sup>(1)</sup> 10/28/2008	4,702	Common Stock	\$ 31.9063 D Â
Stock Options (Right to buy)	10/27/2000 <sup>(1)</sup> 10/27/2009	12,076	Common Stock	\$ 33.125 D Â
Stock Options (Right to buy)	05/01/1999 05/01/2009	2,850	Common Stock	\$ 35.9688 D Â
Stock Options (Right to buy)	06/14/2002 06/14/2009	200	Common Stock	\$ 36.125 D Â
Stock Options (Right to buy)	02/23/2003 02/23/2009	3,916	Common Stock	\$ 38.3125 D Â
Stock Options (Right to buy)	10/25/2002 <sup>(1)</sup> 10/25/2011	16,092	Common Stock	\$ 43.5 D Â
Stock Options (Right to buy)	04/27/2002 <sup>(1)</sup> 04/27/2011	3,390	Common Stock	\$ 44.25 D Â
Stock Options (Right to buy)	10/24/2003 <sup>(1)</sup> 10/24/2012	20,058	Common Stock	\$ 44.87 D Â
Stock Options (Right to buy)	10/23/2004 <sup>(1)</sup> 10/23/2013	19,561	Common Stock	\$ 46.01 D Â
Stock Options (Right to buy)	10/21/2004 10/21/2014	18,000	Common Stock	\$ 50 D Â
Stock Options (Right to buy)	10/26/2001 <sup>(1)</sup> 10/26/2010	13,560	Common Stock	\$ 51.625 D Â
Stock Options (Right to buy)	04/30/2000 04/30/2010	1,579	Common Stock	\$ 51.9375 D Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Stuge Oern MEDTRONIC, INC. 710 MEDTRONIC PARKWAY, M.S. LC310 MINNEAPOLIS, MN 55432-5604	Â	Â	Â SVP & Pres MDT Cardiac Surgery	Â

## Signatures

Keyna P. Skeffington,  
Attorney-in-fact

03/08/2005

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) These options become exercisable at the rate of 25% of the shares granted per year beginning on the first anniversary of grant.

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.