WARD SCOTT R Form 4/A April 18, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

3235-0287 Number: January 31,

OMB APPROVAL

Expires: 2005 Estimated average

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

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

2. Issuer Name and Ticker or Trading

MEDTRONIC INC [MDT]

3. Date of Earliest Transaction

Symbol

(Middle)

1(b).

(Print or Type Responses)

WARD SCOTT R

(Last)

1. Name and Address of Reporting Person *

(First)

MEDTRON:		(Month/Day/Year) 12/13/2004						Director 10% Owner _X_ Officer (give title Other (specify below) Sr VP & Pres, Vascular					
	1	4. If Amendment, Date Original Filed(Month/Day/Year) 01/03/2005						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
MINNEAPO	5604							Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)				ı-De	erivative S	Securi	ties Ac	quired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if				(A) or of (D) 4 and 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	12/13/2004			G	V	25 (1)	D	\$0	6,357	I	By Wife		
Common Stock	12/13/2004			G	V	100 (1)	D	\$0	6,257	I	By Wife		
Common Stock	12/13/2004			G	V	100 (1)	D	\$0	6,157	I	By Wife		
Common Stock	12/13/2004			G	V	350 (1)	D	\$0	5,807	I	By Wife		
Common Stock	12/30/2004			G	V	41 (2)	D	\$ 0	22,227.819	D			

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

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(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

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	isable and	7. Titl	e and	8. Price of	9
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Date		Amount of		Derivative	J
	Security	or Exercise		any	Code	of	` '		Underlying	Security	,	
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securities		(Instr. 5)]
		Derivative		Securit		Securities	es (Inst			3 and 4)		(
		Security				Acquired]
						(A) or						J
						Disposed						-
						of (D)						(
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date Exercisable	Expiration Date	Title	or		
										Number		
					G 1 17	(A) (B)				of		
					Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

WARD SCOTT R MEDTRONIC INC 710 MEDTRONIC PKWY, MS LC310 MINNEAPOLIS, MN 55432-5604

Sr VP & Pres, Vascular

Signatures

Neil P. Ayotte, Attorney-in-Fact 04/18/2007

**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) These shares were incorrectly attributed as gifts from Mr. Ward as opposed to his wife.
- (2) This line item was reported correctly but is included to show the corrected direct holdings.

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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