SCHULER JACK W

Form 4 May 04, 2011

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

2. Issuer Name and Ticker or Trading

MEDTRONIC INC [MDT]

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

12,900

30,000

I

I

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

Check this box

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

Symbol

See Instruction 1(b).

Stock

(Print or Type Responses)

SCHULER JACK W

1. Name and Address of Reporting Person *

				MEDITORIC INC [MD1]					(Check all applicable)				
	(Last) STERICYCI KEITH DR	STERICYCLE INC. 28161 N		3. Date of Earliest Transaction (Month/Day/Year) 05/02/2011					Director 10% Owner Officer (give title below) Other (specify below)				
(Street)					endment, Da nth/Day/Year		al		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	LAKE FOR	EST, IL 60045						Person					
	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
	1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Execution any	med n Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. SecurionAcquired Disposed (Instr. 3,	(A) or d (A) or d 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								33,300	I	Tanya Schuler Trust		
	Common Stock								33,300	I	Theresa Schuler Trust		
	Common Stock								33,300	I	Tino Schuler Trust		
	Common								12 000	T	Spouse		

Spouse

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Common Schuler
Stock Family
Foundation

Common Stock $\frac{(1)}{(2)}$ 05/02/2011 A $\frac{3,305}{(2)}$ A \$ 0 493,266.751 D

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	5. iorNumber	6. Date Exer Expiration D		7. Title Amoun		8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day	(Year)	Under	, ,	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)				Securi		(Instr. 5)	Bene
	Derivative				Securities	ecurities		(Instr.	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						_			or		
						Date Exercisable	Expiration Date	Title N	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SCHULER JACK W STERICYCLE INC. 28161 N KEITH DR LAKE FOREST, IL 60045

Signatures

Rhonda L. Ingalsbe,

Attorney-in-fact 05/03/2011

**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 181.01 due to exempt transactions such as dividend reinvestment.

Reporting Owners 2

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(2) Deferred units credited under the Medtronic, Inc. 2008 Stock Award and Incentive Plan to be paid in Medtronic common stock upon the director's resignation or retirement.

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.