FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL					
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obligations may continue. See Instruction 1(b) Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* Grams Blake M						2. Issuer Name and Ticker or Trading Symbol TORO CO [TTC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(F	irst) /ENUE SOUTH	(Middle)			Date of /07/20		t Tran	saction ((Mont	h/Day/Year)			X Officer below)	cer (give title		Othe belo	er (specify w)	
(Street)	IINGTON I	MN	55420-	1196	- 4. I -	f Amei	ndment,	Date	of Origir	nal Fil	ed (Month/D	ay/Year)			filed by (oup Filing One Rep More thai	orting Pe	erson	
(City)	(S	,	(Zip)	on Doni						1 D:	anagad a	of or De	no fici						
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, ar) if any				es Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amount Securities Beneficially	5. Amount of		ership Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership					
						,	Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	n(s)			(Instr. 4)			
Common Stock			12/07/2017		7			A	\top	4,421(1)	A	\$0	4,421		D				
Common	Stock			12/07/	2017				F		1,626	D	\$65.	5 2,79	5	Г			
Common Stock													65.92	2 ⁽²⁾	I		The Toro Company Investment, Savings & ESOP		
Performance Share Units														34,721.8	34,721.838 ⁽³⁾		D		
		7	able II								posed of converti			lly Owned					
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execu ecurity or Exercise (Month/Day/Year) if any		if any	1 1 1		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(S) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Benefic D) Owners ect (Instr. 4		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoui or Numbe of Shares	er					
Non- Qualified Stock Option	\$65.93	12/08/2017			A		9,900		(4)		12/08/2027	Common Stock	9,90	0 \$0	9,9	900	D		

Explanation of Responses:

- 1. Represents the payout of a Performance Share Award for the Fiscal 2015 to Fiscal 2017 Performance Period under The Toro Company Amended and Restated 2010 Equity and Incentive Plan, as amended and restated (the "Amended and Restated 2010 Plan"), as approved by the issuer's Compensation & Human Resources Committee of its Board of Directors on December 5, 2017, and which was conditioned upon and subject to confirmation by the issuer's Fiscal 2017 financial results that were released on December 7, 2017. Performance Share Awards are paid in shares of common stock under the Amended and Restated 2010 Plan.
- 2. Includes 0.172 net shares of common stock acquired by the reporting person since the date of his last report under the dividend reinvestment feature of The Toro Company Investment, Savings & ESOP less quarterly non-discretionary administrative fees
- 3. Includes 96.349 performance share units acquired by the reporting person since the date of his last report under the dividend reinvestment feature of The Toro Company Deferred Compensation Plan for
- 4. The option vests in three equal annual installments commencing on the first anniversary of the date of grant.

/s/ Nancy A. McGrath, 12/11/2017 Attorney-In-Fact

** Signature of Reporting Person

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.