Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* WOLFE STEPHEN P | | | | | | 2. Issuer Name and Ticker or Trading Symbol TORO CO [TTC] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|---|---|---|--|------------|--|--|---|------|--|-------------------|------------------------|---|--------------------------------------|---|---|--|---|--|---|
| (Last) (First) (Middle) 8111 LYNDALE AVENUE SOUTH | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/02/2004 | | | | | | | | X Officer (give title Other (specify below) Chief Financial Officer & Vice | | | | | |
| (Street) BLOOMINGTON MN 55420-1196 | | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | Person | | iore triari | One resp | .orung |
| | | Tal | ole I - No | on-Der | ivativ | re Se | ecuritie | s Ac | quired | l, Di | sposed o | f, or Be | nefic | iall | y Owned | | | | |
| 1. Title of Security (Instr. 3) | | | | Date | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | Disposed C | es Acquired Of (D) (Instr | equired (A) or) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transaction (Instr. 3 and | | | | Instr. 4) |
| Common Stock | | | | | | | | | | | | | | | 97.39 |) | D | | |
| Common Stock Units | | | | | | | | | | | | | | | 11,590.2 | 2573 | D | | |
| Matching Units | | | | | | | | | | | | | | | 5,789.879 | | D | | |
| Performance Share Units | | | | | | | | | | | | | | | 63,342.91 | | D | | |
| Common Stock | | | | 10/07/2004 | | 4 | | | G | v | 107 | D | \$0 |) | 12,135 | | I I | | By trust for reporting person |
| Common Stock | | | 10/12/2004 | | 4 | | | G | V | 92 | D | \$0 |) | 12,043 | | I | 1 | By trust for reporting person | |
| Common Stock | | | | | | | | | | | | | | | 12,991.7 | 7568 | I | | The Toro Company Investment, Savings & ESOP |
| | | | Table II | | | | | | | | oosed of, convertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year | 3A. Deem Execution if any (Month/Da | Date, | Date, Transaction Code (Ins | | on of | | 6. Date Exercis Expiration Dat (Month/Day/Ye | | te | 7. Title and Am of Securities Underlying Derivative Sect (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. Ownersh Form: Direct (D or Indire (I) (Instr. | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ble | Expiration Date | Title | Amor or Numl of Share | ber | | | | | |
| Stock Option | \$74.04 | 12/02/2004 | | | A | | 10,700 | | 12/02/20 | 05 ⁽¹⁾ | 12/02/2014 | Common Stock | 10,7 | 700 | \$74.04 | 10, | ,700 | D | |

Explanation of Responses:

1. The option vests in three equal annual installments beginning on December 2, 2005.

N. Jeanne Ryan, Atty-In-Fact 12/06/2004

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).