FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

this box if no longer subject to	
1 16. Form 4 or Form 5	
ions may continue. See	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box Section 16. For obligations may 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

1. Name and Address of Reporting Person* BROWN WILLIAM E JR (Last) (First) (Middle) 8111 LYNDALE AVENUE SOUTH					3. I	Issuer Name and Ticker or Trading Symbol TORO CO [TTC] Indeed a support of the s									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Group VP, Res & Cont						
(Street) BLOOMINGTON MN 55420-1196 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person															
1. Title of Security (Instr. 3) 2. Transacting Date (Month/Day)			ion	2A. Deemed Execution D			3. Transaction Code (Instr. 8)					5. Amoun Securities Beneficial Owned Fo		of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price		Reported Transactio (Instr. 3 an	n(s) id 4)			(Instr	r. 4)	
Common Stock				08/26/2016		5			G	v	3,046	D	\$0		93,468.676		D				
Common	Common Stock		08/29/2016		5			M		6,000	A	\$14.	31	99,468	99,468.676		D				
Common	Stock			08/29/20	016				S		6,000	D	\$98.3	39 ⁽¹⁾	93,468	68.676 D					
Common Stock													34.24 ⁽²⁾		I		The Toro Company Investment, Savings & ESOP				
		7	Table								sposed of				Owned						
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercis Price of Derivative Security		se (Month/Day/Year)	Exec if any	eemed ution Date,	4. Transa	nsaction of de (Instr. Sc Ad		mber rative rities ired r osed)	6. Da Expir		rcisable and Date	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Num derivat Securit Benefic Owned Follow Report Transa (Instr. 4	ive Ownies Formitially Dirror or (I) ed ction(s)	10. Owners Form: Direct (or Indir (I) (Inst	ship (D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	ode V (A	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Sha	ber							
Non- Qualified Stock	\$14.31	08/29/2016			М	М		6,000		(3)	12/03/2018	Commo		00	\$0	5,0	068	D			

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares of common stock were sold in multiple transactions at prices ranging from \$98.05 to \$98.59, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 2. Includes 0.113 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.
- 3. The option vested in three equal annual installments commencing on the first anniversary of the date of grant, which was December 3, 2008.

/s/ Nancy A. McGrath, 08/31/2016 Attorney-In-Fact

** Signature of Reporting Person Date

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.