## Edgar Filing: TOLL BROTHERS INC - Form 4

TOLL BROT	HERS INC											
Form 4												
April 16, 201	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									-	OMB APPROVAL		
<b>CONVIA</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box									Expires:	January 31,		
if no longer subject to STATEMENT OF CHANC				IN B	BENEFI	CIAI	L OW	NERSHIP OF	Estimated a	2005 average		
Section 16		2							burden hours per			
Form 4 or						_			response	0.5		
Form 5 obligation	· ·	uant to Section					-					
may conti			•		•	• •		f 1935 or Sectio	n			
See Instru- 1(b).	ction	30(h) of the 3	Investme	ent (	Company	y Act	of 194	40				
(Print or Type R	esponses)											
1. Name and Address of Reporting Person * GARVEY CHRISTINE2. Issuer A Symbol TOLL BI					Ticker or 7	·	0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				HER	RS INC [	TOL	]					
(Last)	(Last) (First) (Middle) 3. Date of I			t Tra	nsaction			()				
		(Month	/Day/Yea	ay/Year)				_X_Director10% Owner				
250 GIBRALTAR ROAD 04/15/20 (Street) 4. If Amen			2015					Difficer (give title Other (specify below) below)				
			nendment	ndment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Month				Year)				Applicable Line) _X_ Form filed by One Reporting Person				
HORSHAM	, PA 19044							_X_ Form filed by 0 Form filed by N Person				
(City)	(State) (Z	Zip) Ta	ble I - No	n-De	erivative S	Securi	ties Aco	quired, Disposed of	f. or Beneficial	llv Owned		
1.Title of	2. Transaction Date		3.		4. Securi			5. Amount of	6. Ownership	-		
Security	(Month/Day/Year)	Execution Date,		TransactionAcquired (A) or				Securities	Form: Direct	Indirect		
(Instr. 3)		any	Code	• · ·			·	Beneficially	D) or	Beneficial		
		(Month/Day/Yea	r) (Instr				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)			
								Reported	(11150.4)	(IIIsu: 4)		
						(A) or		Transaction(s)				
			Code	V	Amount		Price	(Instr. 3 and 4)				
Common Stock	04/15/2015		G	V	253	D	\$0	1,809	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	of				Amou Under Secur	le and unt of rlying ities . 3 and 4)	Derivative I Security S (Instr. 5) I I I I I I I I I I I I I I I I I I I	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
		Code V	4, and	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
GARVEY CHRISTINE 250 GIBRALTAR ROAD HORSHAM, PA 19044	Х							
Signatures								
/s/Kathryn G. Flanagan,attorney-in-fact		04/16/20	15					
<u>**</u> 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).

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.