TRANE INC. Form 4 December 07, 2007

FORM 4

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

OMB 3235-

Check this box
if no longer
subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number: 3235-0287 Expires: January 31,

OMB APPROVAL

subject to Section 16. Form 4 or Form 5

obligations

Estimated average burden hours per response... 0.5

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

,

may continue. *See* Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MORRISON DALE F			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
			TRANE INC. [TT]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				
			(Month/Day/Year)	_X_ Director 10% Owner			
C/O TRANE INC.			12/05/2007	Officer (give titleOther (specify below)			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			
PISCATAW	AY, NJ 088	855		Form filed by More than One Reporting			

(City)	(State)	(Zip) Tabl	e I - Non-I	Derivative :	Securi	ties Acqu	iired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock, \$.01 par value	12/05/2007		A <u>(1)</u>	27.33	A	\$ 36.59	4,618.131	I	DCP (2)	
Common Stock, \$.01 par value	12/06/2007		A(3)	27.027	A	\$ 37	4,645.158	I	DCP (2)	
Common Stock, \$.01 par value							3,910.935	I	By Trust	

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

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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)		4.	5. onNumber	6. Date Exerc Expiration D		7. Titl		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of	(Month/Day/e		Under Securi	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

MORRISON DALE F C/O TRANE INC. X PISCATAWAY, NJ 08855

Signatures

/s/ Dale F. Morrison (By M. Cresitello by Power of Attorney)

12/07/2007

**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).
- Represents the committee meeting fee paid on December 5, 2007, receipt of which Director elected to defer pursuant to the **(1)** Deferred Compensation Plan, and which shares are allocated to Mr. Morrison's Stock Account under this Plan.
- **(2)** Represents shares held under the Company's Deferred Compensation Plan.
- Represents the board meeting fee paid on December 6, 2007, receipt of which Director elected to defer pursuant to the Deferred **(3)** Compensation Plan, and which shares are allocated to Mr. Morrison's Stock Account under this Plan.
- Represents shares of stock awarded pursuant to Director's Compensation Plan and held in a rabbi trust as to which Director **(4)** exercises voting rights but not right to dispose until directorship terminates.

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.

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