FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Name and Address of Reporting Person*     Meyer David Joseph		2. Date of Even Requiring State (Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol Titan Machinery Inc. [ TITN ]							
(Last)	(First)	(Middle)	12/05/2007			Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)		
4876 ROCKING HORSE CIRCLE				Y Office	Director Officer (give title	10% Owi			dividual or Joint icable Line)	/Group Filing (Check	
(Street) FARGO (City)	ND (State)	59106-6049 (Zip)			Chairman and CEO			X Formfiled by One Reporting Person Formfiled by More than One Reporting Person			
(Giy)	(State)	,									
		Та	ble I - Non-	Derivati	ve Se	ecurities Beneficia	ally Owne	ed			
1. Title of Security (Instr. 4)					cially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		Nature of Indirect Beneficial     Ownership (Instr. 5)			
Common Stock						3,902,680	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expiration			Expiration Da	piration Date		3. Title and Amount of Secu Underlying Derivative Secur (Instr. 4)		4. Conver	cise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Date Exercisable	Expiration Date	Title	3	Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

<u>/s/ David J. Meyer</u> <u>12/05/2007</u>

\*\* 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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).