## Edgar Filing: RESMED INC - Form 4

DEGMED INC

Form 4												
January 18, 2	ГЛ	о стате:	SECHE	TIES	• 1		<u>~П</u> А	NCEC	OMMISSION	-	PROVAL	
UNITED STATES SECUN				RITIES AND EXCHANGE CO Shington, D.C. 20549					.01v11v1155101v	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5				GES IN SECU	N H R]	BENEF: ITIES	ICIA		NERSHIP OF Estimate burden respons		•	
obligation may cont See Instru 1(b).	ns Section 1'	7(a) of the		tility Ho	old	ing Con	npany	y Act of	e Act of 1934, E 1935 or Section 40	n		
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> FARRELL PETER C			Symbol			Ticker or	Tradii	ng	5. Relationship of Reporting Person(s) to Issuer			
			RESME		-	_			(Chec	k all applicable	)	
			of Earliest Transaction Day/Year) 2005					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer				
			endment, Date Original nth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
POWAY, C	A 92064									Iore than One Re		
(City)	(State)	(Zip)	Tabl	e I - Non	-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Execution any				4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
ResMed Common Stock	01/18/2005(1)			S <u>(1)</u>		2,000 (1)	D (1)	\$ 49.05	665,786	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
FARRELL PETER C 14040 DANIELSON STREET POWAY, CA 92064	Х		Chief Executive Officer					
Signatures								
Deter C Esmall 01/	10/2005							

01/18/2005
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).
- (1) All transactions performed pursuant to an existing 10b5-1 plan.

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.