Edgar Filing: RESMED INC - Form 4

RESMED INC Form 4 November 15,											
FORM	Л	UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL OMB 3235-0287 Number:	
Check this if no longer subject to Section 16. Form 4 or Form 5 obligations may contin <i>See</i> Instruc 1(b).	Filed pu	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Expires: Estimated a burden hou response	irs per	
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person <u>*</u> PENDARVIS DAVID			2. Issuer Name and Ticker or Trading Symbol RESMED INC [RMD]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) ((Middle)	3. Date of Earliest Transaction (Check all			ck all applicable	e)				
14040 DANIELSON STREET			(Month/Day/Year) 11/10/2006				Director 10% Owner X Officer (give title Other (specify below) below) Sr. VP, General Counsel				
	(Street)	4. If Amendment, Date Filed(Month/Day/Year)			e Original	Applicable Line) _X_ Form filed by C			int/Group Filing(Check		
POWAY, CA	92064							Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuritie	es Acq	uired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deeme Execution any (Month/Day/Year)		n Date, if TransactionAcquired (A) or Code Disposed of (D))	SecuritiesIBeneficially0OwnedIFollowing0ReportedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
ResMed Common Stock				Coue V	Amount	(D) I		3,703.04 <u>(1)</u>	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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
ResMed Stock Options	\$ 46.19	11/10/2006	11/14/2006	А	40,000	11/10/2007(2)	11/09/2013	ResMed Common Stock	40,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PENDARVIS DAVID 14040 DANIELSON STREET POWAY, CA 92064			Sr. VP, General Counsel				
Signaturaa							

Signatures

David Pendarvis	11/14/2006
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**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).
- (1) Includes 260.8010 shares purchased on October 31 2006, pursuant to ResMed's Employee Stock Purchase Program.
- (2) Options vest 1/4 per year for 4 years beginning 1 year from date of grant.

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.