### Edgar Filing: RESMED INC - Form 4

| RESMED I<br>Form 4<br>March 18, 2                                                                      | 2015                                                     |                                                                                                                                                                                                                                                                      |                                                                           |            |          |                           |                                                                                                                    | OMB AF                                                            | PPROVAL     |  |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------|----------|---------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------|--|
| FURI                                                                                                   | UNITED STATE                                             |                                                                                                                                                                                                                                                                      |                                                                           |            |          | ANGE C                    | OMMISSION                                                                                                          | OMB                                                               | 3235-0287   |  |
| Check t                                                                                                |                                                          | was                                                                                                                                                                                                                                                                  | hington                                                                   | , D.C. 2   | 0549     |                           |                                                                                                                    | Number:<br>Expires:                                               | January 31, |  |
| if no lor<br>subject<br>Section<br>Form 4<br>Form 5<br>obligati<br>may cor<br><i>See</i> Inst<br>1(b). | 16.<br>or<br>Filed pursuant to<br>ons<br>ntinue.<br>2001 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>ection 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |                                                                           |            |          |                           |                                                                                                                    |                                                                   |             |  |
| (Print or Type                                                                                         | Responses)                                               |                                                                                                                                                                                                                                                                      |                                                                           |            |          |                           |                                                                                                                    |                                                                   |             |  |
| Farrell Michael J. S                                                                                   |                                                          |                                                                                                                                                                                                                                                                      | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>RESMED INC [RMD] |            |          |                           | 5. Relationship of Reporting Person(s) to Issuer                                                                   |                                                                   |             |  |
|                                                                                                        |                                                          |                                                                                                                                                                                                                                                                      | Earliest T                                                                | -          | 1        |                           | (Check all applicable)                                                                                             |                                                                   |             |  |
|                                                                                                        |                                                          |                                                                                                                                                                                                                                                                      | Month/Day/Year)<br>)3/16/2015                                             |            |          |                           | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Chief Executive Officer             |                                                                   |             |  |
| SAN DIEC                                                                                               | (Street)<br>50, CA 92123                                 |                                                                                                                                                                                                                                                                      | ndment, Da<br>h/Day/Yea                                                   | -          | al       |                           | 6. Individual or Joi<br>Applicable Line)<br>_X_ Form filed by O<br>Form filed by M                                 | ne Reporting Pe                                                   | rson        |  |
| (City)                                                                                                 | (State) (Zip)                                            | Table                                                                                                                                                                                                                                                                | e I - Non-I                                                               | Derivative | e Secu   | rities Aca                | Person<br>uired, Disposed of,                                                                                      | or Beneficial                                                     | lv Owned    |  |
| 1.Title of<br>Security<br>(Instr. 3)                                                                   | (Month/Day/Year) Executi<br>any                          | ransaction Date 2A. Deemed<br>nth/Day/Year) Execution Date, if                                                                                                                                                                                                       |                                                                           |            |          | cquired<br>d of (D)<br>5) | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |             |  |
| ResMed<br>Common<br>Stock                                                                              | 03/16/2015                                               |                                                                                                                                                                                                                                                                      | Code V<br>M                                                               | Amount 300 | (D)<br>A | Price<br>\$<br>21.675     | 122,655.941                                                                                                        | D                                                                 |             |  |
| ResMed<br>Common<br>Stock                                                                              | 03/16/2015                                               |                                                                                                                                                                                                                                                                      | S                                                                         | 300        | D        | \$ 69.1                   | 122,355.941                                                                                                        | D                                                                 |             |  |
| ResMed<br>Common<br>Stock                                                                              | 03/16/2015                                               |                                                                                                                                                                                                                                                                      | М                                                                         | 5,675      | А        | \$ 15.52                  | 128,030.941                                                                                                        | D                                                                 |             |  |
| ResMed<br>Common                                                                                       | 03/16/2015                                               |                                                                                                                                                                                                                                                                      | S                                                                         | 5,675      | D        | \$ 69.1                   | 122,355.941                                                                                                        | D                                                                 |             |  |

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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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number<br>onof Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                    |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------|---------------------------------------------------------------------|------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                 | (A) (D)                                                                                                           | Date Exercisable                                               | Expiration<br>Date | Title                                                               | Amou<br>or<br>Numb<br>of<br>Shares |
| ResMed<br>Common<br>Stock<br>Options                | \$ 21.675                                                             | 03/16/2015                              |                                                             | М                                      | 300                                                                                                               | 10/01/2009 <u>(1)</u>                                          | 10/01/2015         | ResMed<br>Common<br>Stock                                           | 300                                |
| ResMed<br>Common<br>Stock<br>Options                | \$ 15.52                                                              | 03/16/2015                              |                                                             | М                                      | 5,675                                                                                                             | 11/20/2009                                                     | 11/20/2015         | ResMed<br>Commmon<br>Stock                                          | 5,67                               |

Relationships

Other

### **Reporting Owners**

Stock

 Reporting Owner Name / Address
 Initial Structure

 Director
 10% Owner
 Officer

 Farrell Michael J.
 RESMED INC.
 Chief Executive Officer

 9001 SPECTRUM CENTER BLVD
 Chief Executive Officer

 SAN DIEGO, CA 92123
 Signatures

 Michael J. Farrell, Chief Executive
 03/18/2015

Date

\*\*Signature of Reporting Person

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## **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) Represents date options first became exercisable. Options vest 1/4 annually.

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.