Gallahue Kieran Form 4 September 09, 2010

## FORM 4

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

**OMB APPROVAL** OMB

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Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Gallahue Kieran

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(C:tr.)

RESMED INC [RMD]

(Check all applicable)

(First) (Middle) 3. Date of Earliest Transaction

(Zin)

(Month/Day/Year) 09/07/2010

\_X\_\_ Director 10% Owner Other (specify X\_ Officer (give title below)

RESMED INC., 9001 SPECTRUM CENTER BOULEVARD

(Street)

(State)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Chief Executive Officer

Filed(Month/Day/Year)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

SAN DIEGO, CA 92123

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	Secur	ities Acqui	red, Disposed of,	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)	Code (Instr. 8)	omr Dispos (Instr. 3,	ed of (4 and :	5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
ResMed Common Stock	09/07/2010(2)		Code V  M	Amount 20,000	(D)	Price \$ 19.25 (2)	83,589.794	D	
ResMed Common Stock	09/07/2010		S	20,000 (2)	D	\$ 32.383 (2) (3)	63,589.794 (4)	D	

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

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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)	TransactionDerivative Expirati Code Securities (Month/		Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shar	
ResMed Common Stock Options	\$ 19.25	09/07/2010		M	20,000 (2)	02/03/2007(1)	02/03/2016	ResMed Common Stock	20,00	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Radiess	Director	10% Owner	Officer	Other		
Gallahue Kieran RESMED INC. 9001 SPECTRUM CENTER BOULEVARD SAN DIEGO, CA 92123	X		Chief Executive Officer			

## **Signatures**

Kieran Gallahue 09/09/2010

\*\*Signature of Date
Reporting Person

## **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 first date options became exercisable.
- (2) Trade executed in accordance with 10b5-1 trading program.
- This transaction was executed in multiple trades at prices ranging from \$32.08 to \$32.50. The price reported above reflects the weighted (3) average sale price. The reporting person will provide full information regarding the number of shares and prices at which the transaction was effected upon request to the SEC staff, the issuer or the security holder of the issuer.
- (4) Shareholdings after giving effect to the 2-for-1 stock split on August 30, 2010.

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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