Edgar Filing: RESMED INC - Form 4

RESMED II Form 4	NC										
January 08,	2008										
FORM	ЛЛ								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington			ANGE C	OMMISSION	OMB Number:	3235-0287	
Check the	gor								Expires:	January 31,	
if no longer subject to Section 16. Form 4 or					BENEI RITIES	FICL	AL OWN	ERSHIP OF	Estimated a burden hour response		
Form 5 obligatio may con <i>See</i> Instr 1(b).	ons Section 17(a) of the l	Public U	tility Ho	lding Co	mpar	•	e Act of 1934, 1935 or Section 0	l		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> FARRELL PETER C			2. Issuer Name and Ticker or Trading Symbol RESMED INC [RMD]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	3. Date of	f Earliest T	ransaction	1		(Check	all applicable)	
			(Month/Day/Year) 01/07/2008					_X_ Director10% Owner _X_ Officer (give titleOther (specify below) below) Exec. Chairman of the Board			
				Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
POWAY, C	CA 92064							Form filed by Me Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	iired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)		sed of		Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
ResMed Common Stock	01/07/2008(1)			S	5,000 (1)	D	\$ 49.0201	840,617	D		
ResMed Common Stock	01/08/2008			S	5,000 (1)	D	\$ 50.0018 (1)	835,617	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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	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		Exec. Chairman of the Board				
Ciamaturaa							

Signatures

Peter C. Farrell	01/08/2008			
<u>**</u> 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) Pursuant to 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.