FARRELL PETER C

Form 4

December 18, 2017

FORM 4

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

OMB Number:

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 January 31, Expires: 2005

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

burden hours per response... 0.5

Estimated average

may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

SAN DIEGO, CA 92123

2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
RESMED INC [RMD]	(Check all applicable)			
3. Date of Earliest Transaction				
(Month/Day/Year)	X Director 10% Owner			
12/14/2017	Officer (give title Other (specify below)			
4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting			
	Symbol RESMED INC [RMD] 3. Date of Earliest Transaction (Month/Day/Year) 12/14/2017 4. If Amendment, Date Original			

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired tion(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
ResMed Commo			Code V G(1)	Amount 23,689	(A) or (D)	Price \$ 84.43	Transaction(s) (Instr. 3 and 4) 269,296	(Instr. 4)	
Stock ResMed Common			G(2)	23,689	D	\$ 84.43 (4)	245,607	D	
ResMed Common Stock			G(3)	1,180	D	\$ 84.97 (4)	244,427	D	
ResMed Commo			G(2)	3,351	D	\$ 86 (4)	240,896	D	

Stock

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.

SEC 1474

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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. Transac Code (Instr. §	5. ctionNuml of specific of (A) of Disposor (D) (Instr 4, and	per Expiration (Month/Da ative rities irred rosed) . 3,		7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)
				Code	V (A)	Date Exercisable	Expiration e Date	Title	Amount or Number of Shares	

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

FARRELL PETER C RESMED INC. 9001 SPECTRUM CENTER BOULEVARD SAN DIEGO, CA 92123

Signatures

Peter C. Farrell 12/18/2017 **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).

X

- Represents a gift of shares to the Farrell Family Foundation. Dr. Farrell has no beneficial interest, control or dispositive power over the gifted shares.
- Represents a gift of shares to the Greater Houston Community Foundation. Dr. Farrell has no beneficial interest, control or dispositive **(2)** power over the gifted shares.
- (3) Represents a gift of shares to Project Veritas. Dr. Farrell has no beneficial interest, control or dispositive power over the gifted shares.

Reporting Owners 2

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(4) The price reported above represents the average of the high and low trading price on the day of the transaction.

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.