Douglas Robert Andrew Form 4 March 19, 2019

#### FORM 4

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

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction 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

1(b).

(Print or Type Responses)

1. Name and Ad Douglas Robo		_	2. Issuer Name <b>and</b> Ticker or Trading Symbol RESMED INC [RMD]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			
RESMED INC., 9001 SPECTRUM CENTER BLVD. (Street)			(Month/Day/Year) 03/15/2019	Director 10% Owner _X_ Officer (give title Other (specify below) below)  President and COO ResMed Inc.  6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
			4. If Amendment, Date Original Filed(Month/Day/Year)			
SAN DIEGO	, CA 92123	3		Form filed by More than One Reporting Person		

(City)	(State) (	Zip) Table	e I - Non-D	erivative	Secur	ities Acqu	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	on Date 2A. Deemed Year) Execution Date, if any (Month/Day/Year)		4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
ResMed Common Stock	03/15/2019		M <u>(1)</u>	3,307	A	\$ 43.63	48,604	D	
ResMed Common Stock	03/15/2019		S(1)	3,307	D	\$ 100.9	45,297	D	
ResMed Common Stock	03/15/2019		S(1)	991	D	\$ 100.9	153,335	I	Douglas Family Trust

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

#### Edgar Filing: Douglas Robert Andrew - Form 4

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 (9-02)

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. 5. Number Transactiomf Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ative Expiration Date (Month/Day/Year) of		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Share
ResMed Common Stock Options	\$ 43.63	03/15/2019		M <u>(1)</u>	3,307	03/01/2014(2)	03/01/2020	ResMed Commmon Stock	3,30

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Douglas Robert Andrew RESMED INC. 9001 SPECTRUM CENTER BLVD. SAN DIEGO, CA 92123

President and COO ResMed Inc.

## **Signatures**

Robert Douglas, President and Chief Operating Officer, ResMed Inc.

03/19/2019

\*\*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) The transaction was conducted under a Rule 10b5-1 plan.
- (2) Represents date options first became exercisable. Options vest 1/3 per year.

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.

Reporting Owners 2