PENDARVIS DAVID

Form 4

November 13, 2018

FORM 4

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

OMB APPROVAL OMB 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number: January 31, Expires: 2005

Form 4 or Form 5 obligations **SECURITIES**

Estimated average burden hours per 0.5 response...

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 Address of Reporting Person * PENDARVIS DAVID			2. Issuer Name and 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	(==== an appneaut)			
			(Month/Day/Year)	Director 10% Owner			
RESMED INC., 9001 SPECTRUM CENTER BLVD.			11/09/2018	_X_ Officer (give title Other (specify below) Chief Administrative Officer			
(Street)			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			
SAN DIEGO, CA 92123				Form filed by More than One Reporting Person			

SAN DIEGO, CA 9212	23	3
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(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			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	11/09/2018		Code V	Amount 854 (1)	` ´	Price \$ 106.94	106,318	D	
ResMed Common Stock	11/09/2018		F	1,083 (2)	D	\$ 106.94	105,235	D	
ResMed Common Stock	11/09/2018		F	1,199 (3)	D	\$ 106.94	104,036	D	
ResMed Common	11/12/2018		M	1,717	A	\$ 58.24	105,753	D	

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Stock

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

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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	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction	5. Number on Derivative Securities			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
ResMed Common Stock Options	\$ 58.24	11/12/2018		M	1,717	11/11/2018 <u>(4)</u>	11/19/2022	ResMed Common Stock	1,717

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

PENDARVIS DAVID RESMED INC. 9001 SPECTRUM CENTER BLVD. SAN DIEGO, CA 92123

Chief Administrative Officer

Signatures

David Pendarvis, Chief Administrative
Officer

11/13/2018

**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) Disposition to issuer for tax withholding on vesting of performance-based Restricted Stock Units granted on 11/16/2017.
- (2) Disposition to issuer for tax withholding on vesting of performance-based Restricted Stock Units granted on 11/19/2015.

Reporting Owners 2

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- (3) Disposition to issuer for tax withholding on vesting of performance-based Restricted Stock Units granted on 11/16/2016.
- (4) Represents date incentive stock options first became exercisable.

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.