Edgar Filing: Gallahue Kieran - Form 4

Gallahue Kie Form 4	eran									
December 21	1,2009									
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PPROVAL 3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed ns Section	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940							Expires:January 31, 2005Estimated average burden hours per response0.5	
(Print or Type F	Responses)									
1. Name and Address of Reporting Person * Gallahue Kieran(Last)(First)(Middle)RESMED INC., 9001 SPECTRUM CENTER BOULEVARD			 Issuer Name and Ticker or Trading Symbol RESMED INC [RMD] Date of Earliest Transaction (Month/Day/Year) 12/17/2009 				5. Relationship of Reporting Person(s) to Issuer			
							(Check all applicable)			
							X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SAN DIEGO	O, CA 92123							More than One R		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurities Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transactior (Month/Day/Y	any	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4)	(A) or of (D)	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					ount	(2) 11100	3,223.897	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)	5. Number of Definition Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
ResMed Stock Options	\$ 51.08	12/17/2009		А	100,000	11/11/2010 <u>(1)</u>	12/17/2016	ResMed Common Stock	100,0

Reporting Owners

Reporting Owner Name / Address		Relationships				
			10% Owner	Officer	Other	
Gallahue Kieran RESMED INC. 9001 SPECTRUM CENTEI SAN DIEGO, CA 92123	R BOULEVARD	Х		Chief Executive Officer		
Signatures						
Kieran Gallahue	12/18/2009					

**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) Represents first date 1/4 of the options become exercisable. Thereafter, options will continue to vest 1/4 annually until fully vested.

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.