Farrell Michael J. Form 4 November 16, 2010

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

Expires:

January 31, 2005

Estimated average burden hours per

response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

Check this box

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

See Instruction

1(b).

(Last)

(C:tr.)

(Print or Type Responses)

1. Name and Address of Reporting Person * Farrell Michael J.

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

RESMED INC [RMD]

(Check all applicable)

(Middle)

(7:m)

3. Date of Earliest Transaction (Month/Day/Year)

Director

10% Owner Other (specify

9001 SPECTRUM CENTER BLVD

(First)

11/12/2010

X_ Officer (give title below)

Sr. VP Sleep SBU

(Street)

(State)

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 Form filed by More than One Reporting

Person

SAN DIEGO, CA 92123

| (City) | (State) | (Zip) Tab | le I - Non-l | Derivative | Secur | ities Acqui | red, Disposed of, | or Beneficial | y Owned |
|--------------------------------------|---|---|-----------------|--------------------------|----------------|-----------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | omr Dispos (Instr. 3, | ed of (4 and 5 | 5) | 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 | 11/12/2010 | | Code V M | Amount 12,953 | (D) | Price \$ 23.095 | 29,843.613 | D | |
| ResMed Common Stock | 11/12/2010 | | S | 12,953 | D | \$ 33.7 | 16,890.613 | 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. Transaction Code (Instr. 8) | 5. Number of or Derivative 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 of Underlying Securities (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|---|--|--|--------------------|---|---------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amour or Numbe of Shar |
| ResMed Common Stock Options | \$ 23.095 | 11/12/2010 | | M | 12,953 | 11/10/2007(1) | 11/10/2013 | ResMed Common Stock | 12,95 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Farrell Michael J. 9001 SPECTRUM CENTER BLVD SAN DIEGO, CA 92123 | | | Sr. VP Sleep SBU | | | |

Signatures

Michael J. Farrell, Sr. Vice President of Sleep Strategic Business
Unit

**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 options 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.

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