Edgar Filing: RESMED INC - Form 4

RESMED INC Form 4 rebruary 23, 2007 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL Check this box if no longer subject to Section 16. Form 5 obligations not go to the public Utility Holding Company Act of 1935 or Section 1(b). TATEMENT to Section 16(a) of the Securities Exchange Act of 1934, set on 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1935 or Section 30(h) of the Investment Company Act of 1935 or Section State of the Securities Exchange Act of 1934, set on 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1935 or Section State of the Section 1940, set of the Section 1940, set on 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940, set on 1940, State of the Section 1940, set on 1940, set on 1940,									3235-0287 January 31, 2005 verage s per
(Print or Type 1. Name and Sandercock	Address of Reporting Persor	[*] 2. Issuer N Symbol RESMED			Trad	0	5. Relationship of I ssuer (Check	Reporting Perso	
	(First) (Middle) INC., 14040 ON STREET	3. Date of E (Month/Day 02/22/200	/Year)	ransaction		- - 1	Director _X Officer (give t pelow)	10%	Owner r (specify
POWAY, G	(Street) CA 92064	4. If Amend Filed(Month/		-	al	-	5. Individual or Joi Applicable Line) .X_ Form filed by Or Form filed by Mo Person	ne Reporting Per	son
(City)	(State) (Zip)	Table I	I - Non-E	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	any	Deemed 3. ution Date, if Tr	3. 4. Securities Acquired (A) Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
ResMed Common Stock	02/22/2007		Code V	Amount 4,000	(D) A	Price \$ 20.54	(Instr. 3 and 4) 4,435.439	D	
ResMed Common Stock	02/22/2007		S	4,000	D	\$ 49.2836	435.439	D	
ResMed Common Stock	02/22/2007	1	М	4,000	A	\$ 25.275	4,435.439	D	
ResMed Common	02/22/2007		S	4,000	D	\$ 49.2836	435.439	D	

Edgar Filing: RESMED INC - Form 4

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.

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. Transactio Code (Instr. 8)	5. Number onof 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	Amount or Number of Shares
ResMed Stock Options	\$ 20.54	02/22/2007		М	4,000	01/15/2007(1)	01/14/2014	ResMed Common Stock	4,000
ResMed Stock Options	\$ 25.275	02/22/2007		М	4,000	07/02/2004 <u>(1)</u>	07/01/2011	ResMed Common Stock	4,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
I O O	Director	10% Owner	Officer	Other			
Sandercock Brett RESMED INC. 14040 DANIELSON STREET POWAY, CA 92064			Chief Financial Officer				
Signatures							
Brett							

Sandercock <u>**</u>Signature of 02/22/2007

_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) Options vest 1/3 annually.

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.