Edgar Filing: RESMED INC - Form 4

RESMED I Form 4 March 05, 2 FORN Check th if no lor subject 1 Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b).	2014 A 4 UNITED his box his box his box to 16. or Staten Filed pur Section 17(AENT O	Wa F CHAN Section 1 Public U	Ishington NGES IN SECUI 16(a) of th Jtility Hol	, D.C. 20 BENEF RITIES ne Securi ding Con	549 FICL ities I mpar	AL OWN Exchange	DMMISSION ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hour response		
(Print or Type	Responses)										
PENDARVIS DAVID Symbo			Symbol	Tobact France and Frence of Frading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Middle)	3. Date of Earliest Transaction								
			nth/Day/Year))3/2014				Director 10% Owner Officer (give title Other (specify below) below) below) Chief Administrative Officer				
			nendment, Date Original onth/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				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	itle of urity (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
ResMed Common Stock	03/03/2014			M <u>(1)</u>	5,000	А	\$ 15.52	73,955.566	D		
ResMed Common Stock	03/03/2014			S <u>(1)</u>	5,000	D	\$ 43.4673 (<u>3)</u>	68,955.566	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. Transactio Code (Instr. 8)	5. Number prof 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	\$ 15.52	03/03/2014		M <u>(1)</u>	5,000	11/20/2009(2)	11/20/2015	ResMed Common Stock	5,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
PENDARVIS DAVID RESMED INC. 9001 SPECTRUM CENTER BLVD. SAN DIEGO, CA 92123			Chief Administrative Officer				
Signatures							
David B. Pendarvis, Chief Administra Officer	tive	03/0	5/2014				

**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 10b5-1 Plan as defined under the Securities Exchange Act of 1934, as amended.
- (2) Represents date options first became exercisable. Options vest 1/4 annually on the anniversary of the grant.
- This transaction was executed in multiple trades at prices ranging from \$42.86 to \$43.88. The price reported above reflects the weighted
- (3) average sale price. The reporting person will provide full information regarding the number of shares and prices at which the transaction was effected upon request to the SEC staff, the issuer or the security holder of the issuer.

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.