Sodhi Rajwant Form 4/A December 18, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

obligations

Form 5

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 30(h) of the Investment Company Act of 1940

may continue. See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading Sodhi Rajwant Symbol RESMED INC [RMD]

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

9001 SPECTRUM BLVD 11/10/2017

> (Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

11/10/2017

OMB

Number:

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3235-0287

January 31,

2005

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5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner _X__ Officer (give title Other (specify below)

President, SaaS Business

6. Individual or Joint/Group Filing(Check

Applicable Line) _X_ Form filed by One Reporting Person

Form filed by More than One Reporting

SAN DIEGO, CA 92123

5AN DILOO, CA 92125							Person			
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								ly 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			Beneficially (D) or		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
ResMed Common Stock	11/10/2017		Code V	Amount 955 (1) (7)	` /	Price \$ 83.06	29,205 (2) (3)	D		
ResMed Common Stock	11/10/2017		F	1,704 (4) (7)	D	\$ 83.06	27,501	D		
ResMed Common Stock	11/10/2017		F	1,893 (5) (7)	D	\$ 83.06	25,608	D		
ResMed Common	11/10/2017		F	518 <u>(6)</u> <u>(7)</u>	D	\$ 83.06	25,090	D		

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

Stock

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

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. Transac Code (Instr. 8	5. tionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S	ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)
				Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Sodhi Rajwant 9001 SPECTRUM BLVD SAN DIEGO, CA 92123

President, SaaS Business

Signatures

Rajwant Sodhi

12/18/2017

**Signature of Date
Reporting Person

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 11/19/2014.
- (2) Includes 152 shares of ResMed stock purchased on October 31, 2017, through the ResMed Employee Stock Purchase Plan.
- (3) Corrects misstatement of shares reported. Certified outstanding shares totaled 6,528 for grant issued 11/19/2015 prior 16-b officer status.

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

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- (5) Disposition to issuer for tax withholding on vesting of performance-based Restricted Stock Units granted on 11/16/2016.
- (6) Disposition to issuer for tax withholding on vesting of performance-based Restricted Stock Units granted on 12/16/2013.
- (7) Amendment adjusts for netted shares using the correct tax rate.

Remarks:

Amends for additional netted shares for appropriate tax rate.

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.