## Edgar Filing: MCGINNIS GERALD E - Form 4

MCGINNIS	GERALD E										
Form 4											
November 1	5, 2004										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
		SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549					OMB Number:	3235-0287			
Check th if no long	10r								Expires:	January 31, 2005	
subject to	STATE	MENT O	F CHAN	IGES IN BENEFICIAL OWNE				<b>ERSHIP OF</b>	Estimated a		
Section 1				SECUR	SECURITIES				burden hours per		
Form 4 o Form 5			a .•						response	0.5	
obligatio	<b>n</b> o <b>*</b>						•	Act of 1934,			
may cont	Section 17			•	•	-	•	1935 or Section	1		
See Instru	uction	30(h)	of the Ir	nvestment	Compai	ny Ao	ct of 1940	0			
1(b).											
(Print or Type I	Responses)										
(	F)										
1. Name and Address of Reporting Person *2. IssueMCGINNIS GERALD ESymbol				er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
5 yillool			RONICS INC [RESP]								
								(Check all applicable)			
(Last)	(First)	(Middle)		Date of Earliest Transaction				X Director	10%	Owner	
				fonth/Day/Year) 1/15/2004				Officer (give titleOther (specify			
			11/13/2	/13/2004				below) below)			
	(Street)		4. If Ame	mendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(M			Filed(Mo	Month/Day/Year)				Applicable Line)			
								_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
EXPORT, F	PA 15632							Person	ore than one rej	Jorning	
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	) Execution any		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of 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)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	01/02/2004			A <u>(1)</u>	806	A	\$ 26.337	447,233	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)

## Edgar Filing: MCGINNIS GERALD E - Form 4

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) 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
Stock Option	\$ 40.675	08/27/2003		M <u>(2)</u>	10,000	08/27/2004	08/27/2013	Common Stock	10,000
Stock Option	\$ 53.545	08/25/2004		M <u>(3)</u>	40,000	08/25/2005	08/25/2014	Common Stock	40,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MCGINNIS GERALD E 3585 HILLS CHURCH ROAD EXPORT, PA 15632	Х						
Signatures							
Dorita A. Pishko; Attorney-in-fact	11	/15/2004					
<u>**</u> 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) These shares represent Mr. McGinnis' participation in the Respironics Employee Stock Purchase Plan
- (2) August 27, 2003 Incentive Stock Option Grant
- (3) August 25, 2004 Incentive Stock Option Grant

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.