Sandercock Brett Form 4 November 16, 2018

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

January 31, Expires: 2005

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Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Last)

(Print or Type Responses)

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

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

RESMED INC., 9001 SPECTRUM 11/14/2018 CENTER BLVD.

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

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

Chief Financial Officer

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) Tabl | e I - Non-I | Derivative Secu | rities Acqu | ired, Disposed of | , or Beneficiall | y Owned |
|--------------------------------------|---|---|--|---|--------------|--|---|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactic Code (Instr. 8) | 4. Securities A or(A) or Dispose (Instr. 3, 4 and (A) or Amount (D) | ed of (D) | 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 | 11/15/2018 | | S(1) | 2,000 D | \$ 101.44 | 72,156 (2) | 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)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of | 3. Transaction Date (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount Underlying Securities (Instr. 3 and 4) | |
|---|------------------------------------|--------------------------------------|-------------------|---|---|--|--------------------|--|---------------------------------|
| (Histi. 3) | Derivative Security | | (Month Day) Tear) | or Disposed of (D) (Instr. 3, 4, and 5) | | | | | |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amour or Numbe of Shar |
| ResMed Common Stock Options | \$ 101.64 | 11/14/2018 | | A | 22,883 | 11/11/2019(3) | 11/14/2025 | ResMed Common Stock | 22,88 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Sandercock Brett RESMED INC. 9001 SPECTRUM CENTER BLVD. SAN DIEGO, CA 92123

Chief Financial Officer

Signatures

Brett Sandercock, Chief Financial
Officer
11/16/2018

**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 Rule 10b5-1 Plan.
- (2) Includes 134.30 shares of ResMed stock purchased on October 31, 2018, through the ResMed Employee Stock Purchase Plan.
- (3) Represents date options first become exercisable. Options vest 1/3 annually each November 11, 2019, 2020 and 2021.

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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