WAREHAM JOHN P Form 3 January 25, 2005 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person [*] / ₄ 2. Date of 1 WAREHAM JOHN P				tement	3. Issuer Name and Ticker or Trading Symbol RESMED INC [RMD]					
(Last)	(First)	(A.C. 1.11.)	(Month/Day/) 01/25/2005		4. Relationship of Reporting Person(s) to Issuer				endment, Date Original nth/Day/Year)	
4300 N. HAR	BOR BLVD).								
(Street) FULLERTON, CA 92834-3100				(Check all applicable)			6. Individ	6. Individual or Joint/Group		
					X Directo Officer (give title belo	·	10% Ov Other pecify below	wner Filing(Ch _X_Form) Person Form	Filing(Check Applicable Line) _X_ Form filed by One Reporting	
(City)	(State)	(Zip)	r	Table I - N	on-Deriva	tive S	Securities	s Beneficial	ly Owned	
1.Title of Securit (Instr. 4)	ý		В	. Amount of S Beneficially O Instr. 4)		3. Owner Form Direc or Ind (I) (Instr	ership O : (I et (D) direct	Nature of Indi wnership nstr. 5)	rect Beneficial	
Reminder: Report owned directly or	-	line for each c	class of securi	ties beneficial	^{ly} SI	EC 147	73 (7-02)			
	informati required	who respon ion containe to respond valid OMB	ed in this for unless the f	rm are not form display	/s a					
Tal	ole II - Deriva	tive Securitie	s Beneficially	y Owned (e.g.	, puts, calls,	warra	nts, optior	ns, convertible	securities)	
1. Title of Deriva (Instr. 4)	Expiration Date (Month/Day/Year)		Date	3. Title and Amount Securities Underlyin Derivative Security (Instr. 4)		Conversio or Exercis Price of Derivative		e Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Exercisable	*	T. 4	Amoun	t or	Security	Direct (D) or Indirect		

Title

Number of

Shares

(I)

(Instr. 5)

OMB APPROVAL

OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response... 0.5

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			ResMed				
ResMed Options	(<u>1)</u>	01/19/2015	Common Stock	9,000	\$ 49.87	D	Â

Reporting Owners

Reporting Person

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
WAREHAM JOHN P 4300 N. HARBOR BLVD. FULLERTON, CA 92834-3100		ÂX	Â	Â	Â		
Signatures							
John P. Wareham	01/25/20	05					
<u>**</u> Signature of	Date						

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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 each year for 3 years beginning 1/20/200.

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.