FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person *     Hollingshead James			2. Issuer Name and Ticker or Trading Symbol RESMED INC [ RMD ]		tionship of Reporting Persor all applicable) Director	n(s) to Issuer	
(Last) (First) (Middle) RESMED INC.		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/11/2020	X	Officer (give title below)  President, Sleep	Other (specify below)	
9001 SPECTRUM (Street) SAN DIEGO	CA	92123	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	idual or Joint/Group Filing (0 Form filed by One Repor Form filed by More than	ting Person	
(City)	(State)	(Zip)					

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
			Code	v	Amount	Amount (A) or Price (Instr. 3 and 4)				(Instr. 4)
ResMed Common Stock	11/11/2020		<b>F</b> <sup>(1)</sup>		2,135	D	\$212.11	85,524 <sup>(2)</sup>	D	
ResMed Common Stock	11/11/2020		F <sup>(3)</sup>		1,804	D	\$212.11	83,720	D	
ResMed Common Stock	11/11/2020		F <sup>(4)</sup>		1,286	D	\$212.11	82,434	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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 (Ir 8)	tion	5. Num Derivat Securit Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and A Securities Un Derivative Se (Instr. 3 and	nderlying ecurity	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

#### **Explanation of Responses:**

- 1. Disposition to issuer for tax withholding on vesting of performance-based Restricted Stock Units granted on 11/16/2017.
- 2. Includes 56.52 shares of ResMed stock purchased on October 31, 2020, through the ResMed Employee Stock Purchase Plan.
- $3.\ Disposition\ to\ issuer\ for\ tax\ withholding\ on\ vesting\ of\ performance-based\ Restricted\ Stock\ Units\ granted\ on\ 11/14/2018.$
- $4.\ Disposition\ to\ issuer\ for\ tax\ withholding\ on\ vesting\ of\ performance-based\ Restricted\ Stock\ Units\ granted\ on\ 11/21/2019.$

James R. Hollingshead, President

Sleep Business

11/13/2020

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.