FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

APP	

OMB Number:	3235-0287
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#### 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

	Check this box to indicate that a
	transaction was made pursuant to a
	contract, instruction or written plan for the
X	purchase or sale of equity securities of th
_	issuer that is intended to satisfy the
	affirmative defense conditions of Rule
	10b5-1(c). See Instruction 10.

in reality and realities of responsing resident		n*	2. Issuer Name and Ticker or Trading Symbol RESMED INC [ RMD ]	Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) RESMED INC.	, , , , , , , , , , , , , , , , , , , ,		3. Date of Earliest Transaction (Month/Day/Year) 11/15/2023	X	Officer (give title below)  Chief Executi	Other (specify below)		
9001 SPECTRU	M CENTER BLV	D	4. If Amendment, Date of Original Filed (Month/Day/Year)	1		(Check Applicable Line)		
(Street)				X	Form filed by One Rep Form filed by More tha	n One Reporting Person		
SAN DIEGO	CA	92123						
(City)	(State)	(Zip)	positive Securities Assuring Dispersed of an Baneficia					

#### 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. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)		Transaction(s) (Instr. 3 and 4)		(Instr. 4)
ResMed Common Stock								0	I	Lisette and Michael Farrell Foundation
ResMed Common Stock								4,090	I	Lisette and Michael Farrell Family Trust
ResMed Common Stock	11/15/2023		M <sup>(1)</sup>		5,678	A	\$57.76	446,664	D	
ResMed Common Stock	11/15/2023		S <sup>(1)</sup>		5,678	D	\$152.0396(2)	440,986	D	

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

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 (In 8)		Deriva Securi Acquir or Dis of (D)	Derivative Expiration Date Securities (Month/Day/Year)		Securities Underlying			9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
ResMed Common Stock Options	\$57.76	11/15/2023		M			5,678	11/11/2017 <sup>(3)</sup>	11/16/2023	ResMed Common Stock	5,678	\$0	3,462	D	

# **Explanation of Responses:**

- $1.\ The\ transaction\ was\ conducted\ under\ a\ Rule\ 10b5-1\ plan\ adopted\ November\ 8,\ 2021.$
- 2. This transaction was executed in multiple trades at prices ranging from \$147.92 to 153.51. The price reported above reflects the weighted average sale price.
- 3. Represents date options first became exercisable. Options vest 1/3 per year.

Michael J. Farrell, Chief **Executive Officer** 

11/16/2023

\*\* Signature of Reporting Person

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

- $^{\star}$  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.