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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

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

		Table I - Non-	Derivative Securities Acquired, Disposed of, or Bene	ficially Owned			
(City)	(State)	(Zip)					
(Street) SAN DIEGO	СА	92123		X Form filed by One Reporting Person Form filed by More than One Reporting Person			
9001 SPECTRUM CENTER BLVD.			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024	Officer (give title Other (specify below) below)			
1. Name and Address of Reporting Person [*] FARRELL PETER C			2. Issuer Name and Ticker or Trading Symbol <u>RESMED INC</u> [RMD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
affirmative defens 10b5-1(c). See In	e conditions of Rule struction 10.						

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	 Code (Instr.		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)	Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
ResMed Common Stock	05/15/2024	G ⁽¹⁾		68,200	D	\$ <mark>0</mark>	89,204	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 (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form:	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. Represents a gift of shares to Bank of America, N.A. Successor Trustee of Peter C. Farrell Charitable Remainder Trust. Dr. Farrell has no beneficial interest, control or dispositive power over the gifted shares.

Peter C. Farrell, Chairman	05/16/2024
<u>emeritus</u>	03/10/2024
** Signature of Reporting Person	Date

** Signature of Reporting Person

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.