FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

ACHANGE COMMISSION	OWD / WITHOU

OMB Number:	3235-0287				
Expires:	December 31, 2014				
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hours per

## 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

·		Fil	ed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940		hours per response:	0.5
1. Name and Address of Reporting Person* PACE GARY W			2. Issuer Name <b>and</b> Ticker or Trading Symbol  RESMED INC [ RMD ]	5. Relationship of Re (Check all applicable)	• ,	o Issuer
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/07/2003	Officer (given	e title	Other (specify below)
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)		Group Filing (Checoy One Reporting I	Person
(City)	(State)	(Zip)		T GIIII IIIGG I	y word than one	reporting reason

## 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)		Disposed Of (D) (Instr. 3, 4 and 5)		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)

### 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. Transact Code (In 8)		Derivative		6. Date Exerci Expiration Da (Month/Day/Yo	te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	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 <sup>(1)</sup>	39.19	07/07/2003	07/10/2003	A <sup>(1)</sup>		16,000		07/07/2004 <sup>(1)</sup>	07/07/2013	ResMed Common Stock	16,000	\$0	65,333	D	

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

1. Annual option grant pursuant to 1997 Equity Participation plan; vesting occurs over a 3-year period.

Gary W. Pace

07/11/2003

\*\* 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.