## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

OMB APPROVAL

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

1. Name and Addres	ss of Reporting Person <sup>*</sup>		2. Issuer Name and Ticker or Trading Symbol RESMED INC [ RMD ]		tionship of Reporting Perso all applicable) Director	on(s) to Issuer	
		(Middle)	<ul> <li>3. Date of Earliest Transaction (Month/Day/Year)</li> <li>02/09/2004</li> </ul>		Officer (give title below)	Other (specify below)	
14040 DANIELSON STREET				Chief Executive Officer			
(Street) POWAY	СА	92064	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv X	vidual or Joint/Group Filing Form filed by One Repo Form filed by More than	orting 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)	Date Execution Date,		tion nstr.	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	<ul> <li>Transaction(s) (Instr. 3 and 4)</li> </ul>		(Instr. 4)
ResMed Common Stock	02/09/2004(1)		<b>S</b> <sup>(1)</sup>		2,000(1)	<b>D</b> <sup>(1)</sup>	\$47.55	909,703	D	
ResMed Common Stock	02/09/2004(1)		<b>G</b> <sup>(1)</sup>		2,000(1)	<b>D</b> <sup>(1)</sup>	\$47.3	907,703	D	

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

Т	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)	ľ		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	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)		

Explanation of Responses:

1. All transactions performed pursuant to an existing 10b5-1 plan.

Remarks:

## Peter C. Farrell

\*\* Signature of Reporting Person

02/10/2004

Date

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

 $^{\ast}$  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.