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 Address FARRELL PE | of Reporting Person* | | 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 | | | | | |
|---|----------------------|----------|---|--|--|---------------------------------------|--|--|--|
| (Last) (First) (Middle) 14040 DANIELSON STREET | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 04/18/2005 | | Director Officer (give title below) Chief Executive O | 10% Owner Other (specify below) | | | |
| | UN STREET | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | idual or Joint/Group Filing (Che | eck Applicable Line) | | | |
| (Street) POWAY | CA | 92064 | | X | Form filed by One Reporting Form filed by More than One | | | | |
| (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) 2. Transaction 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) | Beneficial Ownership |
|---------------------------------|---|--|---|---|--|-------------------------|---------|--|---|-------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| ResMed Common Stock | 04/18/2005(1) | | S ⁽¹⁾ | | 2,000(1) | D ⁽¹⁾ | \$59.15 | 639,786 | 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 | | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 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 | 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

04/18/2005

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.