FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| APPROVAI |
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| OMB Number: | 3235-0104 | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| Estimated average burden | | | | | | |
| hours per response: | 0.5 | | | | | |

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

| Name and Address of Reporting Person* Farrell Michael J. | | | 2. Date of Event Requiring Statement (Month/Day/Year) 03/01/2010 | 3. Issuer Name and Ticker or Trading Symbol RESMED INC [RMD] | | | | |
|--|---------|----------|--|--|---------------------------------|--|---|---|
| (Last) | (First) | (Middle) | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | |
| 9001 SPECTRUM CENTER BLVD | | | X | Director Officer (give title below) | 10% Owner Other (specify below) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | |
| (Street) | | | | | | sident | X | Form filed by One Reporting Person Form filed by More than One Reporting |
| SAN DIEGO | CA | 92123 | | | | | | Person |
| (City) | (State) | (Zip) | | | | | | |

Table I - Non-Derivative Securities Beneficially Owned

| 1. Title of Security (Instr. 4) | ` ` ' | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | l ' |
|---------------------------------|-------|--|-----|
| ResMed Common Stock | 1 | D | |

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

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 4. Conversion or Exercise | (D) or | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|--------------------|--|-------------------------------------|------------------------------------|----------------------------|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Price of Derivative Security | Indirect (I) (Instr. 5) | |
| ResMed NQ Stock Options | 02/03/2007 ⁽¹⁾ | 02/03/2016 | ResMed Common Stock | 15,000 | 38.5 | D | |
| ResMed NQ Stock Options | 11/10/2007 ⁽¹⁾ | 11/10/2013 | ResMed Common Stock | 17,000 | 46.19 | D | |
| ResMed NQ Stock Options | 08/01/2008 ⁽¹⁾ | 08/01/2014 | ResMed Common Stock | 25,000 | 43.42 | D | |
| ResMed NQ Stock Options | 11/07/2008 ⁽¹⁾ | 11/07/2014 | ResMed Common Stock | 4,000 | 42.05 | D | |
| ResMed NQ Stock Options | 10/01/2009 ⁽¹⁾ | 10/01/2015 | ResMed Common Stock | 10,000 | 43.35 | D | |
| ResMed NQ Stock Options | 11/20/2009 ⁽¹⁾ | 11/20/2015 | ResMed Common Stock | 55,000 | 31.04 | D | |

Explanation of Responses:

 $1.\ Options\ vest\ 1/4\ annually\ on\ the\ anniversary\ of\ the\ grant.\ Represents\ date\ options\ first\ became\ exercisable.$

Remarks:

Michael J. Farrell, Sr. Vice President of Sleep Strategic

03/01/2010

Business Unit

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).