FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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

| 1. Name and Address of Reporting Person * PACE GARY W | | | 2. Issuer Name and Ticker or Trading Symbol RESMED INC [RMD] | (Check | tionship of Reporting Person(s) to Issuer all applicable) | | |
|---|---------|-------|--|----------|---|---------------------------------------|--|
| (Last) (First) (Middle) RESMED INC. 9001 SPECTRUM CENTER BOULEVARD (Street) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/08/2018 | X | Director Officer (give title below) | 10% Owner Other (specify below) | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv | , , , | | |
| | | | | | Form filed by More than One | e Reporting Person | |
| SAN DIEGO | CA | 92123 | | | | | |
| (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) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction 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 | 05/08/2018 | | M | | 28,403 | A | \$27.58 | 128,981 | D | |
| ResMed Common Stock | 05/08/2018 | | S | | 28,403 | D | \$97.37(1) | 100,578 | 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. Transact Code (In 8) | | Derivative | | Expiration Date | | 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 Stock Options | \$27.58 | 05/08/2018 | | M | | | 28,403 | 11/11/2014 ⁽²⁾ | 11/16/2018 | ResMed Common Stock | 28,403 | \$0 | 0 | D | |

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$96.99 to \$97.87. The price reported above reflects the weighted average sale price.
- 2. Represents date options first became exercisable.

Gary W. Pace

05/10/2018

** 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.