## Edgar Filing: GOOD STEVEN C - Form 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). (Print or Type Responses)				
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 OF SECURITIES       MMB Number: Janu Janu Janu Janu Janu Janu Janu Janu				
Check this box       if no longer       subject to       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF       Expires:       Janu         State       State <td< td=""><td>/AL</td></td<>	/AL			
if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). (Print or Type Responses) <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1(b).	5-0287			
	ary 31, 2005 9 0.5			
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading       5. Relationship of Reporting Person(s) to Issuer         GOOD STEVEN C       Symbol       Issuer         OSI SYSTEMS INC [OSIS]       (Check all applicable)	>			
(Last) (First) (Middle) 3. Date of Earliest Transaction				
12525 CHADRON AVE(Month/Day/Year)_X_ Director_10% Owner11/26/200411/26/2004Officer (give titleOther (specificer (give title	Officer (give title Other (specify			
Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person	_X_ Form filed by One Reporting Person			
HAWTHORNE, CA 90250				
(City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own</b>	ed			
1.Title of Security       2. Transaction Date       2A. Deemed       3.       4. Securities       5. Amount of Securities       6. Ownership       7. Nature Form: Direct       Indirect         (Instr. 3)       (Month/Day/Year)       Execution Date, if any       Code       Disposed of (D)       Beneficially       (D) or Indirect       Beneficially       (D) or Indirect       Beneficially       (D) or Indirect       Beneficially       (Instr. 4)       (Instr. 4)	t cial ship			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.				
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 control number.				

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A)		

	Derivative Security			or Disposed of (D) (Instr. 3, 4, and 5)						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Option to Purchase Common Stock	\$ 20.91	11/26/2004	А		15,000		08/08/1988 <u>(1)</u>	11/26/2009	Common Stock	15,00

## **Reporting Owners**

Reporting Owner Name / Addre	ess	Relationships s							
	Director	10% Owner	Officer	Other					
GOOD STEVEN C 12525 CHADRON AVE HAWTHORNE, CA 90250	Х								
Signatures									
/s/ Steven Good	11/30/2004								

<u>\*\*</u>Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) \*Vest over a three year period from the date of grant

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.