| SEC I | Form 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations 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

| OMB APPR | OVAL |
|-----------------------|-----------|
| OMB Number: | 3235-0287 |
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| hours per response. | 0.5 |

| 1. Name and Address of Reporting Person* CHOPRA DEEPAK | | | 2. Issuer Name and Ticker or Trading Symbol OSI SYSTEMS INC [OSIS] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|--------------|-----------------|--|------------------|---|--------------------------|--|--|--|
| | <u>JEIAR</u> | | | X | Director | 10% Owner | | | |
| (Last) (First) (Middle) 12525 CHADRON AVE | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | X | Officer (give title below) | Other (specify below) | | | |
| | | | 05/15/2009 | | President and CEO | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indi Line) | vidual or Joint/Group Fili | ng (Check Applicable | | | |
| HAWTHORNE | CA | 90250 | | X | Form filed by One Re | porting Person | | | |
| (City) | (State) | (Zip) | — | | Form filed by More the Person | an One Reporting | | | |
| | | Table I - Non-D | erivative Securities Acquired, Disposed of, or Ben | eficially | Owned | | | | |

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. | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|-----------------------------|---|--------|---------------|----------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (|
| Common Stock | 05/15/2009 | | S | | 28,788 | D | \$18.016 | 588,652 | D | |
| Common Stock | 05/18/2009 | | S | | 26,582 | D | \$18.03 | 562,070 | D | |
| Common Stock | 05/19/2009 | | S | | 44,465 | D | \$18.05 | 517,605 | 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. Transa Code (8) | | of Expira Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date | | 6. Date Exerc Expiration Da (Month/Day/N | ate | 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 Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|---|--|--|--------------------|---|--|---|--|--|---------------------------------------|
| | | | | Code | v | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

/s/ Deepak Chopra

** Signature of Reporting Person Date

05/19/2009

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.