

Form 5

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(f) of the
Investment Company Act of 1940

☐ Check box if no longer subject to
Section 16. Form 4 or Form 5 obligations
may continue. See Instruction 1(b).
☐ Form 3 Holdings Reported
☐ Form 4 Transactions Reported

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol		6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
MEHRA AJAY			OSI SYSTEMS, INC. (OSIS)		<input checked="" type="checkbox"/> Director _ 10% Owner _ Officer (give title below) _ Other (specify below)
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (Voluntary)	4. Statement for Month/Year	CHIEF FINANCIAL OFFICER
C/O OSI SYSTEMS, INC. 12525 CHADRON AVENUE				06/02	
(Street)				5. If Amendment, Date of Original (Month/Year)	7. Individual or Joint/Group Reporting (Check Applicable Line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person _ Form Filed by More than One Reporting Person
HAWTHORNE, CA 90250					
(City)	(State)	(Zip)			

Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

2. Transaction Date (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 at the end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)
		Amount	(A) or (D)	Price		

[illegible]

Explanation of Responses:

*VEST OVER THE THREE YEAR PERIOD FROM THE DATE OF GRANT

/Sd/ 8/10/02

 **Signature of Reporting Person (Date)

** 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 provided 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.