| SEC 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 Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b). |
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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 APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | urden | | | | | | | | |

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| | hours per response: | 0.5 |
| | Estimated average burden | |

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| 1. Nume and Address of Reporting Letson | | erson [*] | 2. Issuer Name and Ticker or Trading Symbol OSI SYSTEMS INC [OSIS] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|---------|----------------------|---|---|--|-----------------------|--|--|
| CHUPKA DE | EPAK | | | X | Director | 10% Owner | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 08/11/2010 | X | Officer (give title below) President and (| Other (specify below) | | |
| 12525 CHADRO | ON AVE | | | | i resident and C | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 08/11/2010 | 6. Indiv Line) | idual or Joint/Group Filing | (Check Applicable | | |
| HAWTHORNE | CA | 90250 | | X | Form filed by One Repor | ting Person | | |
| (City) | (State) | (Zip) | | | Form filed by More than Person | One Reporting | | |
| | | Table I - Non-Deriva | tive Securities Acquired, Disposed of, or Benefi | cially (| Owned | | | |

uired, 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) | | 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) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
|---------------------------------|--|---|------|---|-----------------------|---|---|---|---|---------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (11311 4) |
| Common Stock | 08/11/2010 | | A | | 72,500 ⁽¹⁾ | A | \$ <mark>0</mark> | 546,307 | D | |
| Common Stock | | | | | | | | 100,000 ⁽²⁾ | Ι | By Children's Trust |

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 Deriv Secu Acqu (A) or Dispo of (D) (Instr | 5. Number of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate Amount of | | nt of Derivative derivative ties Security Securities lying (Instr. 5) Beneficially Owned Following | | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|--|--|---------------------|--------------------|-------|--|--|-----------|--|--|
| | | | | Code | v | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Shares are restricted stock issued to the Reporting Person pursuant to the OSI Amended and Restated 2006 Equity Participation Plan, as amended.

2. Shares owned by children's trust, Mr. Chopra is the co trustee of such trusts.

/s/ Deepak Chopra

** Signature of Reporting Person

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.

08/13/2010 Date