TRAVERSO KENNETH M

Form 4 June 03, 2011

FORM 4

OMB APPROVAL OMB

5. Relationship of Reporting Person(s) to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Number: January 31, Expires: 2005 Estimated average

3235-0287

0.5

burden hours per response...

Form 5 obligations may continue. See Instruction

1. Name and Address of Reporting Person *

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

2. Issuer Name and Ticker or Trading

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

TRAVERSO KENNETH M		Symbol NATUS	Symbol NATUS MEDICAL INC [BABY]				Issuer		
(Last)	(First) (M		Earliest Tra	·	.D/ \D	-,	(Che	ck all applicable	e)
C/O NATUS INCORPOR INDUSTRIA		(Month/Day/Year) 06/01/2011				Director 10% Owner X Officer (give title Other (specify below)			
	(Street)		4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year) SAN CARLOS, CA 94070					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (Z	Zip) Table	e I - Non-D	erivative S	Securit	ties Acc	quired, Disposed (of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3.		ies Ac sposed	quired l of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common Stock, \$0.001 par value per share	06/01/2011	06/01/2011	A	13,000 (1)	A	\$0	103,314	D	
Common Stock, \$0.001 par value per share							8,572	I	By Family Trust
							10,500	I	By IRA

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Common

Stock,

\$0.001 par

value per

share

Common

Stock,

\$0.001 par

value per share

4,100

By IRA

I for Spouse

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.

SEC 1474 (9-02)

> > A

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 Amo
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Expiration Date	Underlying Secu
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				or Disposed of		
	Security				(D)		
					(Instr. 3, 4,		
					and 5)		

Expiration or Date Exercisable Title Date N Code V (A) (D) of

Nonqualified Common \$ 16.38 07/01/2011(2) 06/01/2017 06/01/2011 06/01/2011 A 26,000 Stock Option Stock

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

TRAVERSO KENNETH M C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070

VP Marketing and Sales

Signatures

/s/ STEVEN J. MURPHY, by Power of 06/03/2011 Attorney

**Signature of Reporting Person Date

Reporting Owners 2

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Explanation of Responses:

- * 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).
- (1) The shares vest 50% on June 1, 2013 and 25% on each of June 1, 2014 and June 1, 2015.
- (2) The option vests in 48 equal monthly installments beginning on 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.