## Edgar Filing: MOORE WILLIAM M - Form 4

MOORE WILLIAM M Form 4									
June 09, 2011 FORM 4						OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287		
Subject to Section 16. Form 4 or	IENT OF CHA	ANGES IN B		LOWI	NERSHIP OF	Expires: Estimated a burden hour response	urs per		
abligations		· · ·	ng Company	Act of	1935 or Section	1			
(Print or Type Responses)									
1. Name and Address of Reporting MOORE WILLIAM M	Symbo	uer Name <b>and</b> T bl US MEDICA		-	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (N		e of Earliest Tran	-	, 1 ]	(Check	c all applicable	)		
					_X_ Director Officer (give t below)	e title 10% Owner Other (specify below)			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>				
(City) (State)	(Zip) T	able I - Non-Dei	rivative Securi	ties Acq	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed	3. 4 if Transaction( Code (	. Securities Acc A) or Disposed Instr. 3, 4 and 5 (A) or	quired of (D)	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 Indirect		
Common Stock, \$0.001 par value per share			Amount (D)	Thee	58,910	D			
Common Stock, \$0.001 par 06/07/2011 value per share	06/07/2011	S 1	0,100 D (1)	\$ 16.36	69,792	I	By Family Trust		
					4,150	Ι	By Spouse		

Common Stock, \$0.001 par vale per share

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title ar Amount o Underlyin Securities (Instr. 3 a	of ng s	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	umber		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
MOORE WILLIAM M C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070	Х					
Signatures						
/s/ STEVEN J. MURPHY, by Power of Attorney	06/09/2011					
**Signature of Reporting Person		Date				
<b>Explanation of Responses</b>	s:					
* If the form is filed by more than one reporting person, <i>see</i> 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)

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This transaction was executed in multiple trades at prices ranging from \$16.35 to \$16.45. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer, or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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.