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NATUS ME	DICAL INC									
Form 4 September 1	2, 2013									
FORM			GEQUE				NCEC			PPROVAL
	UNITEDS	STATES		shington,			NGE C	COMMISSION	OMB Number:	3235-0287
Check th if no long	Ter.			0					Expires:	January 31, 2005
STATEMENT OF CHANGES IN BENEFICIAL OW Section 16. SECURITIES								NERSHIP OF	Estimated a	iverage
Form 4 o	r								burden hou response	rs per 0.5
Form 5 obligations may continue. See Instruction 1(b). 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(h) of the Investment Company Act of 1940										
(Print or Type I	Responses)									
	Address of Reporting I O KENNETH M		Symbol	Name and			0	5. Relationship of Issuer		
(Last)	(First) (M			Earliest Tr		L	L	(Checl	k all applicable	2)
	S MEDICAL RATED, 1501 AL ROAD		(Month/D 09/10/20	-				Director X Officer (give below) VP Mat		Owner er (specify es
	(Street)			ndment, Da hth/Day/Year)	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	One Reporting Pe	rson
SAN CARL	OS, CA 94070.							Person	lore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose 4 and (A) or	d 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)	
Common				code v	7 mount	(2)	11100			
Stock, \$0.001 par value per share	09/10/2013	09/10/20)13	S	1,425	D	\$ 13.85	106,829	D	
Common Stock, \$0.001 par value per share	09/12/2013	09/12/20)13	S	2,800	D	\$ 13.91 (1)	104,029	D	
								8,572	Ι	

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Common Stock, \$0.001 par value per share			By Family Trust
Common Stock, \$0.001 par value per share	10,500	I	By IRA
Common Stock, \$0.001 par value per share	4,100	Ι	By IRA 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 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	onversion (Month/Day/Year) Exercise rice of erivative	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / Address	Relationships						
hepotong o whet i and / Harress	Director	10% Owner	Officer	Other			
TRAVERSO KENNETH M							
C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD			VP Marketing and Sales				

Reporting Owners

SAN CARLOS, CA 94070

Signatures

/s/ JONATHAN A. KENNEDY, by Power of

Attorney

<u>**</u>Signature of Reporting Person

Date

09/12/2013

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).

This transaction was executed in multiple trades at prices ranging from \$13.90 to \$13.95. The price reported above reflects the weighted
(1) 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.