NATUS MEDICAL INC

Form 4

January 03, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

5. Relationship of Reporting Person(s) to

(Check all applicable)

10% Owner

Issuer

Director

3235-0287

January 31, Expires:

OMB APPROVAL

2005

0.5

burden hours per

Estimated average response...

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

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

2. Issuer Name and Ticker or Trading

NATUS MEDICAL INC [BABY]

3. Date of Earliest Transaction

(Month/Day/Year)

Symbol

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

(Middle)

TRAVERSO KENNETH M

See Instruction

C/O NATUS MEDICAL INCORPORATED, 1501 INDUSTRIAL ROAD		(Month/Day/Year) 01/01/2014				Director10% OwnerXOfficer (give titleOther (specify below) VP/GM Newborn Care				
			mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SAN CARLOS, CA 94070							Form filed by More than One Reporting Person			
(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative S	Securi	ities Acqu	iired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3) Common Stock, \$0.001 par	2. Transaction Date (Month/Day/Year) 01/01/2014	2A. Deemed Execution Date, if any (Month/Day/Year) 01/01/2014	3. Transactic Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4) Amount 10,000 (1)	sposed	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 Beneficial Ownership (Instr. 4)	
value per share				_		0.001				
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

I

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 information contained in this form are not required to respond unless the form displays a currently valid OMB control

SEC 1474 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Am Underlying Sec (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	A O N
Non-qualified Stock Option	\$ 22.5	01/01/2014	01/01/2014	A	20,000	02/01/2014(2)	01/01/2020	Common Stock	2

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

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

VP/GM Newborn Care

Signatures

/s/ JONATHAN A. KENNEDY, by Power of Attorney

01/03/2014

**Signature of Reporting Person

Date

Reporting Owners 2

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 January 1, 2016 and 25% on each of January 1, 2017 and January 1, 2018.
- (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.