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GUNST RO	BERT A									
June 26, 201	8									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287		
Check th	7.0#		F CHANGES IN BENEFICIAL OWNERSHIP C SECURITIES					Expires:	January 31,	
if no long subject to Section 1 Form 4 o	.6. SIAIE	MENT OF CHAN						Estimated a burden hou response	rs per	
Form 5 obligations may continue.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 19401(b).30(h) of the Investment Company Act of 1940										
(Print or Type I	Responses)									
1. Name and A GUNST RC	Symbol	2. Issuer Name and Ticker or Trading Symbol NATUS MEDICAL INC [BABY]				5. Relationship of Reporting Person(s) to Issuer				
(Last)		3. Date of Earliest Transaction				(Check all applicable)				
C/O NATU INCORPOR	(First) (S MEDICAL RATED, 6701 KG ARKWAY, SUI	(Month/I 06/22/2 DLL	Day/Year)	unsuetion			X Director Officer (give below)	title 10%	o Owner er (specify	
	(Street)	Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
PLEASAN	FON, CA 94566						Person		porting	
(City)	(State)	(Zip) Tab	le I - Non-D	erivative	Securi	ities Aco	quired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year		Code	Transaction(A) or Disposed of Code (D)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	、 ,		
Stock, \$0.001 par value per share	06/22/2018	06/22/2018	A	4,132 (1)	A	\$ 36.3	59,982	D		

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

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 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
GUNST ROBERT A C/O NATUS MEDICAL INCORPORATED 6701 KOLL CENTER PARKWAY, SUITE 120 PLEASANTON, CA 94566	Х					
Signatures						
/s/ JONATHAN A. KENNEDY, by POWER OF ATTORNEY		06/2	26/2018			
**Signature of Reporting Person			Date			

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 in full on first anniversary of the date of the award.

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.