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TRAVERSO Form 4 June 18, 200'	KENNETH M										
FORM	14								OMB A	PPROVAL	
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549							OMB Number:	3235-0287	
Check thi if no long	-								Expires:	January 31, 2005	
subject to Section 10 Form 4 or Form 5 obligatior may conti	6. Filed purs	STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Section 17(a) of the Public Utility Holding Company Act of 30(h) of the Investment Company Act of 1940							Estimated aver burden hours p response e Act of 1934, 1935 or Section		
<i>See</i> Instru 1(b).		30(h) of	the Inv	vestment	Company	v Act	of 194	10			
(Print or Type R	Responses)										
1. Name and A TRAVERSC	S	2. Issuer Name and Ticker or Trading Symbol NATUS MEDICAL INC [BABY]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N				-	DAD	IJ	(Check all applicable)			
C/O NATUS INCORPOR INDUSTRIA	()	3. Date of Earliest Transaction (Month/Day/Year) 06/13/2007					Director 10% Owner N Officer (give title Other (specify below) below) below) VP Marketing and Sales				
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
SAN CARL	OS, CA 94070							Form filed by M Person	Iore than One Re	eporting	
(City)	(State) ((State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								lly Owned	
1.Title of Security (Instr. 3)		nsaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securiti on(A) or Dis (D) (Instr. 3, 4 Amount	sposed and 5 (A) or	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)		
Common Stock, \$0.001 par value per share	06/13/2007			A	10,000 (2)	A	\$ 0	115,951	D		
Common Stock, \$0.001 par value per share								8,572	I	By family trust	
								4,100	I		

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Common Stock, \$0.001 par value per share									•	IRA spouse		
Common Stock, \$0.001 par value per share							10,50	0 I	By	IRA		
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. 3. Transaction Date 3A. Deemed Conversion (Month/Day/Year) Execution Dat or Exercise any Price of (Month/Day/Y Derivative Security			4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration Date		7. Title and Amour Underlying Securit (Instr. 3 and 4)			
					Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh	
Nonqualified Stock Opiton (right to buy)	\$ 15.92	06/13/2007			А	20,000 (1))	07/13/2007	06/13/2013	Common Stock	20,0	
Reportin	ıg Owr	iers										
Reporting Owner Name / Address					I	Relations	hips					
iteport.		lille / Addi ess	Director	10%	Owner	Officer			Other			
TRAVERSO KENNETH M C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070					VP Marketing and Sales							
Signatur	es											
/s/ Kenneth M Traverso	[.	06/18/2007										

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**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 option vests in 48 equal monthly installments beginning on the date of grant.
- (2) The shares vest 50% on August 15, 2009, 25% on August 15, 2010, and 25% on August 15, 2011.

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.