Edgar Filing: MINCE WILLIAM L - Form 4

| Form 4 | LLIAM L | | | | | | | | | | |
|-------------------------------------------------------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------|------------------|----------------------|--|--|
| August 19, 2 | | | | | | | | | PROVAL | | |
| FORM | 4 UNITED | | S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | 3235-0287 | | |
| Check th if no long subject to Section 1 | o stateM | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | | | |
| Form 4 c Form 5 obligatio may con <i>See</i> Instr 1(b). | Filed pur Filed pur Section 17(a | 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] | Responses) | | | | | | | | | | |
| 1. Name and A MINCE WI | Symbol | 2. Issuer Name and Ticker or Trading Symbol NATUS MEDICAL INC [BABY] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| | S MEDICAL RATED, 1501 | , | f Earliest Tr Day/Year) 010 | ansaction | | | Director X Officer (give below) | | Owner er (specify | | |
| | (Street) | | endment, Da nth/Day/Year | - | 1 | | 6. Individual or Jo Applicable Line) _X_ Form filed by C | one Reporting Pe | rson | | |
| SAN CARI | LOS, CA 94070 | | | | | | Form filed by M Person | ore than One Re | porting | | |
| (City) | (State) | (Zip) Tab | le 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) | 2A. Deemed Execution Date, if any (Month/Day/Year) | F Transaction(A) or Disposed of (D) Securit Code (Instr. 3, 4 and 5) Benefi) (Instr. 8) Owned Follow (A) Report Transa | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | | | |
| Common Stock, | | | Code V | Amount | or (D) | Price \$ | (Instr. 3 and 4) | | | | |
| \$0.001 par value per share | 08/17/2010 | 08/17/2010 | S <u>(1)</u> | 1,814 | D | \$ 12.91 (2) | 75,541 | D | | | |

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 number.

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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 Derivative2.Derivative SecurityConversion or Exercise(Instr. 3)Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. 6. Date Exercises orNumber Expiration Dat of (Month/Day/Y Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 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 | Amount or Title Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | | Relationships | | |
|---------------------------------------------------------------------------------------------------|----------|------------|---------------------------|-------|--|
| | Director | 10% Owner | Officer | Other | |
| MINCE WILLIAM L C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070 | | | Vice President Operations | | |
| Signatures | | | | | |
| /s/ STEVEN J. MURPHY, by Power of Attorney | | 08/19/2010 | | | |
| **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) Shares sold pursuant to a sales program to cover taxes owed upon the vesting of restricted stock.

This transaction was executed in multiple trades at prices ranging from \$12.91 to \$13.00. The price reported above reflects the weighted
 (2) 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.