#### NATUS MEDICAL INC

Form 4 April 28, 2016

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MOORE WILLIAM M  (Last) (First) (Middle)  C/O NATUS MEDICAL INCORPORATED, 1501		Symbol NATU Middle) 3. Date 6 (Month/	2. Issuer Name and Ticker or Trading Symbol NATUS MEDICAL INC [BABY] 3. Date of Earliest Transaction (Month/Day/Year) 04/26/2016				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  _X Director 10% Owner Officer (give title Other (specify below)			
INDUSTRI. SAN CARL	(Street)  OS, CA 94070		4. If Amendment, Date Original 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 Person			
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Dispose						uired, Disposed o	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Transaction(a Code (1	Instr. 3,	spose	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 Stock, \$0.001 par value per share	04/26/2016	04/26/2016	M 5	5,000	A	\$ 16.78	97,402	I	By Family Trust	
Common Stock, \$0.001 par value per share							21,910	D		
							4,150	I	By Spouse	

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Common Stock, \$0.001 par vale per share

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

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(9-02)

Stock

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of		2.	3. Transaction Date	3A. Deemed	4. 5. Number		6. Date Exercisable and		7. Title and Amount	
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction Derivative		Expiration Date		Underlying Securitie	
	Security	or Exercise		any	Code	Securities	(Month/Day/Year)		(Instr. 3 and 4)	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired					
		Derivative				(A) or				
		Security				Disposed of				
						(D)				
						(Instr. 3, 4,				
						and 5)				
										Amou
							Date	Expiration		or
							Exercisable	Date	Title	Numbe
										of
					Code V	(A) (D)				Shares
	Nonqualified								Common	
	Stock Ontion	\$ 16.78	04/26/2016	04/26/2016	M	5,000	06/03/2011	06/03/2016	Stock	5,00

## **Reporting Owners**

Relationships Reporting Owner Name / Address 10% Owner Officer Other Director

MOORE WILLIAM M C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070



## **Signatures**

Stock Option

/s/ JONATHAN A. KENNEDY, by POWER OF **ATTORNEY** 

04/28/2016 Date

\*\*Signature of Reporting Person

Reporting Owners 2

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# **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).

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.