NATUS MEDICAL INC

Form 4

March 10, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

0.5

January 31, Expires: 2005

OMB APPROVAL

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5. Relationship of Reporting Person(s) to

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

may continue.

See Instruction

Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

HAWKINS JAMES B (Last) (First) (Middle) NATUS MEDICAL INCORPORATED, 1501 INDUSTRIAL ROAD			Symbol NATUS MEDICAL INC [BABY]					Issuer (Check all applicable)			
			(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/10/2006				_	X Director 10% Owner Selection of the property of the control of		
	SAN CARI	(Street) LOS, CA 94070			endment, D onth/Day/Yea	_	al	A - -	o. Individual or Join Applicable Line) X_ Form filed by Or Form filed by More Terson	ne Reporting Per	rson
	(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	ly Owned
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8)		ed 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	Stock, \$0.001 par value per share	03/08/2006			M	23,000	A	\$ 4.07	39,813 <u>(1)</u>	D	
	Common Stock, \$0.001 par value per share	03/08/2006			S	23,000	D	\$ 21.0061	16,813 <u>(1)</u>	D	
		03/09/2006			M	12,000	A	\$ 4.07	28,813 <u>(1)</u>	D	

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Common Stock,

\$0.001 par

value per

share

Common

Stock,

\$0.001 par 03/09/2006 S 12,000 D \$ 21 16,813 (1)

value per share

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.

SEC 1474

(9-02)

D

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Aı Nı Sh
Nonqualified stock option (right to buy)	\$ 4.07	03/08/2006		M	23,000	10/12/2004(2)	04/08/2014	Common Stock	3
Nonqualified stock option (right to buy)	\$ 4.07	03/09/2006		M	12,000	10/12/2004(2)	04/08/2014	Common Stock	3.

Reporting Owners

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

HAWKINS JAMES B NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070

X President and CEO

Reporting Owners 2

Signatures

/s/ James B. 03/10/2006 Hawkins

**Signature of Date
Reporting Person

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) Includes 1,212 shares purchased under the Natus Medical Incorporated Employee Stock Purchase Plan on December 31, 2005.
- (2) Vests as to 25% of the shares subject to the option on October 12, 2004 and thereafter as to 1/48th of the shares subject to the option each month.

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.

Signatures 3