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LUDLUM K Form 4 June 17, 200	9							
FORM	14 UNITED 6	TATES SECU	RITIES AND EXCHANG	COMMISSION	r	PPROVAL		
	UNITED		ashington, D.C. 20549		OMB Number:	3235-0287		
Check the if no long	or.				Expires:	January 31, 2005		
subject to Section 1 Form 4 o Form 5	6. r		WNERSHIP OF	Estimated burden hou response	average urs per			
Form 5 obligations may continue. See Instruction 1(b). 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 F	Responses)							
1. Name and A LUDLUM H	ddress of Reporting F KEN	Symbol	Symbol Issuer			p of Reporting Person(s) to		
(Last)	(First) (N		of Earliest Transaction	(Chec	k all applicabl	e)		
C/O NATU	S MEDICAL RATED, 1501	(Month/	(Month/Day/Year) X_ Director 10% Owner 06/16/2009 Officer (give title below) 0ther (spectrum)					
			ed(Month/Day/Year) Applicable Line) _X_ Form filed by On			int/Group Filing(Check one Reporting Person fore than One Reporting		
SAN CARL	05, CA 94070			Person				
(City)	(State)	(Zip) Tab	ole I - Non-Derivative Securities	Acquired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Date, if any (Month/Day/Year	Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or	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	06/16/2009	06/16/2009	Code V Amount (D) Pri A $\frac{8,500}{(1)}$ A \$ (ce	D			
Common Stock, \$0.001 par value per share				4,000	Ι	By Family Trust		

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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.

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

Deri Secu	itle of ivative urity tr. 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. Transactio Code (Instr. 8)	5. Number 6. Date Exercisable and onof Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amou Underlying Secur (Instr. 3 and 4)	
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nur of Sha
	nqualified ck Option	\$ 10.73	06/16/2009	06/16/2009	А	5,000	07/16/2009(2)	06/16/2015	Common Stock	5,

Reporting Owners

Reporting Owner Name / Address		Relationships				
		Director	10% Owner	Officer	Other	
LUDLUM KEN C/O NATUS MEDICAL INCORPORATED 1501 INDUSTRIAL ROAD SAN CARLOS, CA 94070		Х				
Signatures						
/s/ KEN	06/16/2009					

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** 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 the first anniversary of the date of the award.
- (2) The option vests in 12 equal monthly installments beginning on the date of grant.

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.

**Signature of

Reporting Person