

(Print or Type Responses)

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

| OMB APPROVAL | | | | | |
|---|-----------|--|--|--|--|
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| nours per response | | | | | |

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person * DELTA PARTNERS LLC | | 2. Date of Event Requiring Statement (Month/Day/Year) 04/06/2006 | | | | 3. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [NATR] | | | | | |
|--|-------------|--|---|--|-----------------------------|--|--|--|--|---|--|
| ONE INTERNATION PLACE, SUITE 240 | | (Middle) | 04/06/2006 | | | | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| BOSTON, MA 021 | Street) | | | | | | Officer (give tit below) | | 6. Indivi | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X_ Form filed by More than One Reporting Person | |
| (City) (S | State) | (Zip) | | Table I - Non-Derivative Securities Beneficially Owned | | | | | | | |
| 1. Title of Security (Instr. 4) | | В | 2. Amount of Securities Beneficially Owned (Instr. 4) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | | |
| Nature's Sunshine Products, Inc. | | | 1 | 1,560,200 | | I (1) | See Footnote (1) | | | | |
| Reminder: Report on a se | | | | | • | | • | | | SEC 1473 (7-02) | |
| | | no respond form displa | | | | | | this form are no | t required to re | espona | |
| | Table II | - Derivative | Securities | s Beneficia | ılly Owr | ned (e.g. | , puts, calls, war | rants, options, co | vertible securiti | ies) | |
| 1. Title of Derivative Sec (Instr. 4) | curity | an (M | Date Exer ad Expirati fonth/Day/Ye ate xercisable | on Date ar) Expiration | Securi Securi (Instr. | ities Und ity . 4) | mount of derlying Derivativ t or Number of | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direc (D) or Indirect (I) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |

(Instr. 5)

Reporting Owners

| | Relationships | | | | |
|---|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| DELTA PARTNERS LLC ONE INTERNATIONAL PLACE SUITE 2401 BOSTON, MA 02110 | | X | | | |
| JOBSON CHARLES E ONE INTERNATIONAL PLACE SUITE 2401 BOSTON, MA 02110 | | X | | | |

Signatures

| Charles Jobson | 04/06/2006 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |
| Charles Jobson | 04/06/2006 |
| **Signature of Reporting Person | Date |

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(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).

Reporting person, Delta Partners, LLC, is the investment manager for three private investment funds and one separately managed account and is deemed to have investment discretion over 1,555,200 shares of the issuer. The four entities are the actual owners of the shares. Charles Jobson is the sole managing member of Delta Partners and can also be deemed to have investment discretion. Mr. Jobson is also a managing member of Tetra Capital Management, LLC, an affiliate of Delta Partners, LLC, and is deemed to have investment discretion over an additional 5,000 shares of the issuer. Tetra Capital Management is the investment manager for two private investment funds. The two entities are the actual owners of the 5,000 shares. Both reporting persons disclaim beneficial ownership in the shares reported herein except to the extent of their pecuniary interest.

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.