FORM 5

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

OMB APPR	OVAL		
OMB Number:	3235-0	36	32
Estimated average	burden		
oure per reenone	_	1	Λ

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

ANNUAL STATEMENT OF CHANGES IN 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- HUGHES EUGENE L		2. Issuer Name and NATURES SUI [NATR]		~ .					
(Last) (First) NATURES SUNSHINE PRODUC		3. Statement for Issi (Month/Day/Year) 12/31/2009	uer's Fiscal Yea	r Ended					
EAST 1700 SOUTH									
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line)			
PROVO, UT 84606							Form Filed by One Reporting Person X_ Form Filed by More than One Reportin	g Person	
(City) (State)	(Zip)	Tab	le I - Non-Deri	vative Sec	curities	Acqui	red, Disposed of, or Beneficially	Owned	
(Instr. 3) Dat	ite Ionth/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi (A) or Di (Instr. 3,	isposed (4 and 5) (A) or	of (D)	Beneficially Owned at end of Issuer's Fiscal Year	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Common Stock 11	/30/2009		G	2,000	D	\$ 0	1,079,664	I	By Trusts
Common Stock							16,335	D	
Common Stock							92,073	I	By 401(k)
Common Stock							61,330	Ι	By Spouse

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 2270 (9-02)

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

1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	er	and Expiration	on Date	Amou	ınt of	Derivative	of	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Derivative	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqui	ired			4)			Owned at	Direct (D)	
					(A) or	r						End of	or Indirect	
					Dispo	sed						Issuer's	(I)	
					of (D))						Fiscal Year	(Instr. 4)	
					(Instr.	. 3,						(Instr. 4)		
					4, and	15)								
										Amount				
										or				
								Expiration		Number				
							Exercisable	Date		of				
					(A)	(D)				Shares				

Reporting Owners

		Relation	ships	
	Director	10% Owner	Officer	Other
Reporting Owner Name / Address				

HUGHES EUGENE L NATURES SUNSHINE PRODUCTS 75 EAST 1700 SOUTH PROVO, UT 84606	X			
HUGHES KRISTINE F NATURES SUNSHINE PRODUCTS 75 EAST 1700 SOUTH PROVO, UT 84606			Spouse	

Signatures

/s/ Eugene L. Hughes	02/12/2010
**Signature of Reporting Person	Date
/s/ Kristine F. Hughes	02/12/2010
, .,	02/12/2010

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) Represents shares allocated to Mr. Hughes' 401(k) plan account, which is indirectly beneficially owned by Eugene L. Hughes and his spouse, Kristine F. Hughes.
- (2) Represents shares which are directly beneficially owned by Kristine F. Hughes and indirectly beneficially owned by Mrs. Hughes' spouse, Eugene L. Hughes.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.