FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
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nours per response	e 0.5						

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

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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * TRIPP MATTHEW L				2. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [natr]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 2500 WEST EXECUTIVE PARKWAY, SUITE 100				3. Date of Earliest Transaction (Month/Day/Year) 01/15/2015										EVP & (Chief Scienti	tic Officer		
(Street) LEHI, UT 84043				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)			Та	able I	- Non	-Deri	ivative	Securitie	es A	cquir	ed, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, i any (Month/Day/Year			Coc (Ins		ction	4. Securities Acqu (A) or Disposed of (D) (Instr. 3, 4 and 5)		d of 5)	f Beneficia		nt of Securities ally Owned Following I Transaction(s) and 4)		6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								ode	V	Amour 6,000)		rice				(Instr. 4)	
Common	Common Stock 01/15/2015					A			(1)	A	\$	0 1	12,412			D		
Common Stock 01/15/2015					A	2,000 A \$ 0		0	14,412			D						
Reminder:	Report on a s	separate line for	r each class of secur Table II - I	Derivativ	e Sec	uriti	ies Ac	equire	Perseconta conta the fo	ons whained i	no responding this for this for the splays and of, or Be	orm a cu enefi	are irren icially	not requ tly valid		ormation spond unle trol numbe	ss	1474 (9-02)
1 Title of	2	3. Transaction	,	<i>e.g.</i> , puts	, calls	s, wa	arran 5.	ts, opt						le and	8. Price of	9. Number	of 10.	11. Natur
Security		Date (Month/Day/Y	Execution Day Year) any	Date, if Trans Code ay/Year) (Instr.					and Expiration Date (Month/Day/Year)			Amou Unde Secur	unt of rlying	Derivative Security (Instr. 5)		Owners Form of Derivat Security Direct (or Indir	hip of Indirective Ownersh (Instr. 4)	
				Cod	ode	V	(A)	(D)	Date Exer		Expirati Date	on ,	Title	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
TRIPP MATTHEW L 2500 WEST EXECUTIVE PARKWAY, SUITE 100 LEHI, UT 84043			EVP & Chief Scientific Officer					

Signatures

Stephen M. Bunker as attorney-in-fact for Matthew L. Tripp	01/16/2015
Signature of Reporting Person	Date

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) Shares issued pursuant to a special incentive grant in the form of restricted stock units, each restricted stock unit represents the right to receive one share of NATR common stock. These shares will vest in three equal annual installments beginning on January 15, 2016.
- (2) Shares issued pursuant to a long-term incentive grant in the form of restricted stock units, each restricted stock unit represents the right to receive one share of NATR common stock. These shares will vest in three equal annual installments beginning on January 15, 2016.

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.