FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 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

| 1. Name and Address of Reporting Person * PROBERT GREGORY (Last) (First) (Middle) | | | | 2. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [NATR] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title below) CEO & Chairman of the Board | | | | | |
|--|---|--------------------------------------|----------------------------------|--|------------|--------------|---|---|-----------------------------------|--|---|------------------------|---|---|------------------------------------|
| C/O NATURES SUNSHINE PRODUCTS, 2500 W. EXECUTIVE PARKWAY, #100 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2016 | | | | | | | | | | | |
| (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 PersonForm filed by More than One Reporting Person | | | | | |
| (City | | (State) | (Zip) | Table I - Non-Derivative Securities Acqui | | | | | | ired, Disposed of, or Beneficially Owned | | | | | |
| (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | if C | (Instr. 8) | | 4. Securities Acquires (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) | Beneficia Reported | lly Owned Following Transaction(s) | | | Beneficial | |
| | | | | (Month/Day/Ye | | Code | V | Amou | (A) or (D) | Price | (Instr. 3 a | nd 4) | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common Stock | | 01/01/2016 | | | A | | 30,00 (1) | 0 A | \$ 0 | 187,106 | 7,106 | | D | | |
| Reminder: | Report on a s | separate line fo | | Derivative Secur | ities A | Acquire | Pers conta the fe | ons whained in orm dis | no respo n this fo splays a | rm ar curre teficia | e not requently valid | OMB con | formation spond unle trol numbe | ss | 1474 (9-02) |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | Execution Da any | 4. Transaction Code Year) (Instr. 8) | | Number and E | | ate Exercisable Expiration Date nth/Day/Year) | | 7. T Am Und Sec | Title and ount of derlying urities str. 3 and | Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owners Form of Derivat Security Direct (or Indir | Beneficia Ownersh (Instr. 4) |
| | | | | Code V | (A) | (D) | Date Exer | | Expiration Date | n Titl | Amount or Number of Shares | | | | |

Reporting Owners

| Ī | | Relationships | | | | | | |
|---|---|---------------|--------------|-----------------------------|-------|--|--|--|
| | Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| | PROBERT GREGORY C/O NATURES SUNSHINE PRODUCTS 2500 W. EXECUTIVE PARKWAY, #100 LEHI, UT 84043 | X | | CEO & Chairman of the Board | | | | |

Signatures

| Stephen M. Bunker as attorney-in-fact for Gregory Probert | 01/05/2016 |
|---|------------|
| **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 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 1, 2017.

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.