

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per respons	se 0.5			

#### 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

(Print or Type Responses)								
1. Name and Address of Reporting Person* Shanghai Fosun Pharmaceutical (Group) Co., Ltd.	2. Date of Event I Statement (Month 07/25/2014		3. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [NATR]					
NO. 2 EAST FUXING ROAD (Middle)		4. Relationship of Reporting Person(s) to Issuer  5. If Amendment, Date Origina Filed(Month/Day/Year)			, 8			
(Street) SHANGHAI, F4 200010			(Check all applicable)  Director Officer (give title below)  Check all applicable)					
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)		*	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	2,857,255			D				
Reminder: Report on a separate line for each class o	f securities benefici	ially owned direc	ctly or indirectly.			SEC 1473 (7-02)		
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4) and Expiration Date (Month/Day/Year) Securitie Security			Amount of inderlying Derivativ	Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	ate Expirati xercisable Date	on Title Amou Shares	ant or Number of s	Security	(D) or Indirect (I) (Instr. 5)			

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Shanghai Fosun Pharmaceutical (Group) Co., Ltd. NO. 2 EAST FUXING ROAD SHANGHAI, F4 200010		X			

### **Signatures**

Shanghai Fosun Pharmaceutical (Group) Co., Ltd. By: /s/ Qiyu Chen, Chairman		08/04/2014
**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).

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.