# FORM 4

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

OMB APPROVAL
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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* DELTA PARTNERS LLC				NA	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 Z 10% Owner Officer (give title below) Other (specify below)							
ONE INTERNATIONAL PLACE, SUITE 2401					3. Date of Earliest Transaction (Month/Day/Year) 06/08/2011															
BOSTON, MA 02110				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							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) (State) (Zip)					Table I - Non-Derivative Securities Acqui						cquir	ired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea			Day/Year)	Execution any	Deemed aution Date, if Transaction Code (Instr. 8)  Code V		1	4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5)  (A) Or Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Owne Form: Direct or Ind (I) (Instr.	rship of Box (In the content of the	Nature Indirect eneficial wnership nstr. 4)			
Natures Sunshine Products Inc 06/08/2011				S 145,125 D \$ 15.030		305	1,640,348		Ι (1)	F (1	ootnote									
Reminder:	Report on a s	separate line			- Deriv	ative Se	curi	ities Ac	equir	Pe co the	ersons whontained in the form disposed	no res n this splays	form a cu	are r rrent cially	not requ ly valid		ormation spond unle trol numbe		SEC 14	74 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security		Execution D n/Day/Year) any		l Pate, if	4. Transaction Code Year) (Instr. 8)		5. Number a		6. an (N	ons, convertible securi  Date Exercisable nd Expiration Date Month/Day/Year)		e A U S	7. Titl Amou Under Securi (Instr. 4)	int of clying ities 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y Fo Se Di or n(s) (I)	wnership rm of erivative curity: rect (D) Indirect	Beneficia Ownersh (Instr. 4)
						Code	V	(A)	(D)	Ex	ate xercisable	Expira Date	ntion 7	Γitle	Amount or Number of Shares					

### **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	06/10/2011
***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).
- Reporting person, Delta Partners, LLC, is the investment manager for three private investment funds and is deemed to have beneficial ownership. The three entities are the actual owners of the issuer. Charles Jobson is the sole managing member of Delta Partners, LLC and can be deemed to have investment discretion. Both reporting persons disclaim beneficial ownership of the shares reported herein except to the extent of their pecuniary interest. This transaction was executed in the normal course of business. Share price is the average price for the day.

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.