FORM 4	4
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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).

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

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### 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 Per PROBERT GREGORY	2. Issuer Name an NATURES SU [natr]			0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X_Officer (give title below) CEO & Chairman of the Board					
(Last) (First) C/O NATURES SUNSHINE PRODUCTS, 2500 W. EXECU PARKWAY, #100	(Middle) JTIVE	3. Date of Earliest Transaction (Month/Day/Year) 03/02/2015									
(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)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
(Instr. 3) Date (Month/Day/Year)		Execution Date, if	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership of Indire Form: Beneficia Direct (D) Ownersh	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	03/02/2015		F		1,213 (1)	D	\$ 12.87	134,106	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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### 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	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	Number		and Expirati	on Date	e Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	of		(Month/Day	/Year)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Γ	Derivative			Securities		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Securities (		(Instr. 3 and				2	(Instr. 4)		
	Security				Α	Acquired			4)			0	Direct (D)		
					(A) or								1	or Indirect	
					Disposed							Transaction(s)	< / <		
					of (D)								(Instr. 4)	(Instr. 4)	
					(Instr. 3,		· · ·								
					4, and 5)		5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								LACICISADIC	Date		of				
				Code V	/ (	(A)	(D)				Shares				

## **Reporting Owners**

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

# Signatures

 Stephen M. Bunker as attorney-in-fact for Gregory L. Probert
 03/04/2015

 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) Represents shares of NATR common stock withheld to pay taxes upon vesting of restricted stock units originally granted to the Reporting Person on February 11, 2014. The number of shares withheld was determined on March 2, 2015, based on the closing price of NATR common stock on that date.

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.