

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

OMB APPROVAL					
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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)									
Name and Address of Reporting Person * Bowen Robert K	2. Date of Event Requiring Statement (Month/Day/Year 03/29/2006				3. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [NATR.PK]				
5 TRIAD CENTER, SUITE 750			4. Relationship of Reporting Person(s) Issuer			1 0	· /	s) to 5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) SALT LAKE CITY, UT 84180					(Check all applicable) _X_Director 10% Owner Officer (give title below) Other (specify below)		Applicable X_Form	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 Beneficially Owned							
1.Title of Security (Instr. 4)		Ве		nt of Sec ally Owr			4. Nature of Indi (Instr. 5)	rect Beneficial Ownership	
Reminder: Report on a separate line for each class Persons who respounless the form dis Table II - Derivati	nd to the o	collection rrently val	of info	ormatio IB cont	n contained in rol number.		·		
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amo		<u> </u>	4. Conversion	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title	Amoun Shares	t or Number of	Security	(D) or Indirect (I) (Instr. 5)		

Reporting Owners

Relationships				
Director	10% Owner	Officer	Other	
X				
Ι		Director 10% Owner	Director 10% Owner Officer	

Signatures

/s/ Robert K. Bowen	04/06/2006
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * 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.