# FORM 5

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

OMB APPR	OVAL
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hours per response	e 1.0

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

## ANNUAL 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

HUGHES EUGENE L			2. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [NATR]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director _ X_ 10% Owner _ Officer (give title below) Other (specify below)				
(Last)  NATURES SUNSHI EAST 1700 SOUTH		(Middle) DUCTS, 75	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008								
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 02/17/2009				6. Individual or Joint/Group Reporting (check applicable line)				
PROVO, UT 84606							Form Filed by One Reporting Person  X Form Filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, D					ed, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common Stock		08/04/2008		G <sup>(1)</sup>	8,000	D	\$ 0	1,094,664	I	By trusts (2) (3)	

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

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.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Security (Instr. 3)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	5. Numb of Deriva Securi Acqui (A) or Dispo of (D) (Instr. 4, and	ative aties red sed	6. Date Exer and Expirati (Month/Day	on Date /Year)	Amou Unde Secur	int of rlying	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned at	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial	
					(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
HUGHES EUGENE L NATURES SUNSHINE PRODUCTS 75 EAST 1700 SOUTH PROVO, UT 84606	X	X					
HUGHES KRISTINE F NATURES SUNSHINE PRODUCTS 75 EAST 1700 SOUTH PROVO, UT 84606	X	X					

#### **Signatures**

/s/ EUGENE L. HUGHES	02/24/2009
**Signature of Reporting Person	Date
/s/ KRISTINE HUGHES	02/24/2009
**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 a gift by a revocable family trust for the benefit of the reporting persons and their children, of which the reporting persons are trustees.
- (2) Represents shares held by revocable family trusts for the benefit of the reporting persons and their children, of which the reporting persons are trustees.
- (3) This amendment is filed to reflect that it is filed by more than one reporting person and to add the signature of the reporting person previously omitted from this form.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.