FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

	pe Response															
1. Name and Address of Reporting Person *- Brower Nathan G				2. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE PRODUCTS INC [NATR]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X. Officer (give title below) Other (specify below) EVP, General Counsel						
(Last) (First) (Middle) 2500 WEST EXECUTIVE PARKWAY #100				3. Date of Earliest Transaction (Month/Day/Year) 01/03/2018							EVI	, General C	Junser			
(Street)				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						
LEHI, U'		(State)	(Zip)		_											
` •		(State)							1			 		Beneficially	1	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		(A) or Disposed of ((Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following Transaction(s)		6. Ownership Form:	Beneficial		
						ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)		\ /	Ownership (Instr. 4)		
Common	Shares		01/03/2018				F	v	93 (1)	D S	\$ 11.65	1,607			D	
Common Shares 01		01/04/2018				F		93 (2)	D S	\$ 11.55	1,514		D			
Reminder:	Report on a s	separate line fo	r each class of secur	rities ber	neficially o	wned					nd to	the called	ction of inf	iormotion	SEC	1474 (9-02)
								cont	tained i	n this for	rm are	e not requ	uired to res	spond unle trol numbe	ss	14/4 (9-02)
			Table II -							of, or Ben		lly Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Da	C	ransaction ode	of Deriv Secu Acqu (A) of Disp of (E) (Inst	6. Date Exercisable and Expiration Date (Month/Day/Year) rivative curities quired or posed		Am Und Sec	itle and ount of lerlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (1 or Indire	Beneficia Ownersh (Instr. 4)		
				Cod	Code V	(A)	(D)	Date Exe	e rcisable	Expiration Date	n Title	Amount or e Number of Shares				

Reporting Owners

	Reporting Owner Name / Address		Relationships					
			10% Owner	Officer	Other			
	Brower Nathan G 2500 WEST EXECUTIVE PARKWAY #100			EVP, General Counsel				
	LEHI, UT 84043			EVF, General Counsel				

Signatures

Nathan Brower	01/05/2018
**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 January 3, 2017. The number of shares withheld was determined on January 3, 2018, based on the closing price of NATR common stock on that date.
- (2) Represents shares of NATR common stock withheld to pay taxes upon vesting of restricted stock units originally granted to the Reporting Person on January 4, 2016. The number of shares withheld was determined on January 4, 2018, 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.