Edgar Filing: NATURES SUNSHINE PRODUCTS INC - Form 4

NATURES SUNSHINE PRODUCTS INC Form 4 September 22, 2014

September 22	, 2014												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL					
Washington, D.C. 20549									OMB Number:	3235-0287			
Check this if no longe	ar.										January 31, 2005		
subject to Section 16 Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									Expires: 200 Estimated average burden hours per response 0			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940													
(Print or Type R	esponses)												
1. Name and Address of Reporting Person <u>*</u> Bunker Stephen M			2. Issuer Name and Ticker or Trading Symbol NATURES SUNSHINE					g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			PRODUCTS INC [NATR]										
(Last) (First) (Middle) C/O NATURE'S SUNSHINE PRODUCTS, INC, 2500 W. EXECUTIVE PARKWAYS, SUITE			3. Date of Earliest Transaction (Month/Day/Year) 09/19/2014						Director 10% Owner Officer (give title Other (specify below) below) below) EVP, CFO, Treasurer				
100		, 5011L											
(Street) 4. If An				f Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
LEHI, UT 84	1043									More than One Re			
(City)	(State)	(Zip)	Table	I - Non-	De	rivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	emed on Date, if Day/Year)	Code (Instr. 8)		(A) o of (D 4 and (A) or) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common					V	Amount	(D)	Price					
Stock	09/19/2014			А		578 <u>(1)</u>	A	\$0	6,412 <u>(2)</u>	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 contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: NATURES SUNSHINE PRODUCTS INC - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Bunker Stephen M C/O NATURE'S SUNSHINE PRODUCTS, INC 2500 W. EXECUTIVE PARKWAYS, SUITE 100 LEHI, UT 84043			EVP, CFO, Treasurer				
Signatures							
/s/Richard D. Strulson as attorney-in-fact for Stephe Bunker	n M.	09	/19/2014				

<u>**</u>Signature of Reporting Person

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) These shares are in the form of restricted stock units issued pursuant to a special dividend declared by the Issuer on 09/19/2014. Each restricted stock unit represents the right to receive one share of NATR common stock.

Date

(2) The restricted stock units vest in four equal annual installments beginning on February 11, 2015.

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.