# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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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(h)

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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 Person* Schwerdt Scott E					2. Issuer Name and Ticker or Trading Symbol NU SKIN ENTERPRISES INC [ NUS ]									eck all applic Directo	or (give title		10% Ow Other (s below)	ner	
(Last) (First) (Middle) C/O NU SKIN ENTERPRISES, INC. 75 WEST CENTER STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/07/2011									President, Americas & Europe					
(Street) PROVO (City)	ty) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)  ative Securities Acquired, Disposed of, or Benefic								Lin	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				ction	ar) i	2A. Deeme Execution f any	A. Deemed xecution Date,		3. 4. Secu Transaction Dispos Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3,		5. Amou Securitie Beneficia Owned F	nt of s ally following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		Reported Transact (Instr. 3 a	ion(s)			(Instr. 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. Conversio or Exercis Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/		Transaction Code (Instr.				6. Date Exercisa Expiration Date (Month/Day/Yea		of Securit		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	ode	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$16.5	02/07/2011			A		60,000		02/07/2011	1	2/20/2014	Class A Common Stock	60,000	\$0	120,000	(1)	D		
Employee Stock Option (right to	\$28.09	02/07/2011			A		3,750		(2)	0:	3/02/2017	Class A Common Stock	3,750	\$0	3,750 <sup>(3</sup>	3)	D		

# **Explanation of Responses:**

- 1. On December 20, 2007, the reporting person was granted an option to purchase 120,000 shares of Class A Common Stock. The option vests in two equal tranches based on Nu Skin Enterprises, Inc.'s satisfaction of certain performance criteria. On February 17, 2010, the performance criteria for the first tranche were met, resulting in vesting of the option as to 60,000 shares. On February 7, 2011, the performance criteria for the second tranche were met, resulting in vesting of the option as to 60,000 shares.
- 2. Options become exercisable as to 50% on March 2, 2011, and 50% on March 2, 2012.
- 3. On March 2, 2010, the reporting person was granted an option to purchase 3,750 shares of Class A Common Stock. The option becomes eligible for vesting based on Nu Skin Enterprises, Inc.'s satisfaction of certain performance criteria. On February 7, 2011, the performance criteria were met, resulting in 3,750 shares becoming eligible for vesting.

# Remarks:

Clayton A. Jones as Attorneyin-Fact for Scott E. Schwerdt

02/09/2011

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.