## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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 ar		NU SKIN ENTERPRISES INC [ NUS ]								neck all app	ationship of Reportin k all applicable) Director Officer (give title		son(s) to Iss 10% Ov Other (s	vner				
(Last) (First) (Middle) C/O NU SKIN ENTERPRISES, INC. 75 WEST CENTER STREET						3. Date of Earliest Transaction (Month/Day/Year) 08/10/2017									below)  General Counsel			
75 WES	4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or e)	·							
PROVO UT 84601															rm filed by One Reporting Person rm filed by More than One Reporting rson			
(City)	(S	tate)	(Zip)															
			le I - No			_			quirec	l, Di	sposed o							
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Exe y/Year) if ar		A. Deemed kecution Date, any lonth/Day/Year)		ection Instr.	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Benefic Owned	ies cially Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Class A C	2017	2017					7,500	A	\$31.9	2 5	52,230		D					
Class A C	2017	:017					5,900(1)	D	\$60.7	(2) 4	5,330		D					
Class A C	2017	.017			S		1,600(1)	D	\$61.54	ļ <sup>(3)</sup> 4	1,730		D					
		Т	able II								oosed of converti			/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	Deemed ecution Date, ny nth/Day/Year)		action (Instr.	on of		6. Date Exercisabl Expiration Date (Month/Day/Year)		e Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to	\$31.92	08/10/2017			M			7,500	(4)		02/28/2018	Class A Common Stock	7,500	\$0	0		D	

## **Explanation of Responses:**

- 1. Sale pursuant to a 10b5-1 plan adopted by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$60.33 to \$61.24, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within this range.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$61.34 to \$61.67, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within this range.
- 4. Currently exercisable in full.

## Remarks:

/s/ Gregory Belliston as Attorney-in-Fact for D.

08/14/2017

Matthew Dorny

\*\* 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.