## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

### TEMENT 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*  LUND STEVEN  (Last) (First) (Middle)  C/O NU SKIN ENTERPRISES, INC.  75 WEST CENTER STREET  (Street)  PROVO UT 84601						2. Issuer Name and Ticker or Trading Symbol NU SKIN ENTERPRISES INC [ NUS ]  3. Date of Earliest Transaction (Month/Day/Year) 05/12/2014  4. If Amendment, Date of Original Filed (Month/Day/Year) 05/12/2014									Relationship of Reporting Person(s) to Issuer heck all applicable)  X Director 10% Owner  X Officer (give title Other (specify below) below)  Exec. Chairman of the Board  Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person				oner  specify  i
(City)	(51		Zip) le I - Non-l	Derivat	tive Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					ction 2A. Deemed Execution Date,			e, Tra Co ar) 8)	ansact	tion	4. Secur	rities Acquired Of (D) (In	red (A) or str. 3, 4 an	5. An Secu Bene Owne Repo	5. Amount of 6. Securities For Beneficially (D		n: Direct	7. Nature of Indirect Beneficial Ownership (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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	Co	Transaction Code (Instr.		n of		6. Date Exercisa Expiration Date (Month/Day/Year			Amount of		f g Security	8. Price of Derivative Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Co	ode \	v	(A)	(D)	Date Exercis	isable	Ex Da	piration te	Title	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$77.65	05/12/2014		I	A			0	05/12/	/2014	07.	/15/2020	Class A Common Stock	0	\$0	0(1)	,	D	

### **Explanation of Responses:**

1. On July 15, 2013, the reporting person was granted a performance-vesting stock option to purchase 50,000 shares of Class A Common Stock, which vests in four equal tranches based on Nu Skin Enterprises, 1. On July 15, 2015, the reporting person was granted a performance-vesting stock option to purchase 50,000 states of Class A Collision Stock, which vests in four equal trainings based on Nu Skirl Enterprise Inc.'s satisfaction of certain performance criteria. On May 12, 2014, the reporting person reported the vesting of 12,500 performance-vesting stock options based on the determination of the Issuer's Compensation Committee that the relevant performance criteria had been satisfied. However, due to the August 12, 2014 restatement of the Issuer's consolidated financial statements for the quarter ended March 31, 2014, the Issuer's Compensation Committee determined that the relevant performance criteria had not been satisfied and that the 12,500 performance-vesting stock options remain unvested and are not currently reportable. Accordingly, this amendment is being filed to eliminate the previously reported vesting.

# Remarks:

Clayton A. Jones as Attorney-

08/13/2014

\*\* 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.