FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burd	en								
	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											_				
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol NU SKIN ENTERPRISES INC [NUS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Schwerdt Scott E					1	0 31	XIIV E	INII	EICF ICIO.	دنا	111C [1	103]	`	Directo			10% Ov	vner		
														Officer below)	(give title		Other (s	specify		
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year)										below)			
C/O NU SKIN ENTERPRISES, INC.						08/11/2008								President, Americas & Europe						
75 WEST CENTER STREET																				
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					08	08/13/2008								Line)						
• •		84601			X Form filed by One Repor									rting Perso	י [
													Form filed by More than One Reporting Person							
(City) (State) (Zip)												r ersor								
		Tal	ole I - Non	-Deriva	ativ	e Se	curitie	s Ac	quired, I	Disp	osed o	f, or Bei	neficiall	y Owned						
1. Title of Security (Instr. 3) 2. Transa				action				3.		4. Securi	ties Acquire	ed (A) or	5. Amoui				7. Nature of			
			Date (Month/Day/Year)			Execution Date, if any (Month/Day/Year)		Code (Instr. 5)			posed Of (D) (Instr. 3, 4		Securitie Beneficia			r Indirect	ndirect Beneficial			
			•	,,								Owned F Reported	ollowing (l) (Ir			Ownership (Instr. 4)				
								Code	v	Amount	Amount (A) or (D)		Transact	saction(s) r. 3 and 4)			(111341.4)			
Class A Common Stock ⁽¹⁾ 08/11/					L/200	/2008		A		1,500	1,500 A		12,	12,402		D				
			Table II - D	Derivat	tive	Sec	urities	Aca	uired. Di	isno	sed of	or Bene	ficially	Owned						
									, option				-							
1. Title of	2.	3. Transaction	3A. Deemed						6. Date Exercisa			7. Title an		8. Price of	9. Number of		10.	11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date if any (Month/Day/Yea		ransa ode (I				Expiration (Month/Day			of Securit Underlyin		Derivative Security	derivative Securities		Ownership Form:	Beneficial		
(Instr. 3)	Price of Derivative			Year) 8)	ear) 8)		Securities Acquired (A) or					Derivative Sec (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)		
	Security								(msar o ana -				,		Following Reported		(I) (Instr. 4)	, ,		
					Disposed of (D) (Instr.								Transaction(s)							
							3, 4 and 5)								(Instr. 4)					
													Amount or							
									Date	١.	Expiration		Number							
				C	ode	v	(A)	(D)	Exercisable		Date	Title	Shares							
Employee																				
Stock Option	\$17.03	08/11/2008			$_{\rm A}$		12,250		08/11/2009	(2)	08/11/2015	Class A Common	12,250	\$0	12,25	o	D			
(right to					-		,		55/11/2005			Stock		••]		_			
buy)			I	- 1	- 1		1	ıl				I	I	1	I	- 1		1		

Explanation of Responses:

- 1. This amendment is being filed to correct the date of earliest transaction to be reported.
- $2. \ Becomes \ exercisable \ in \ four \ equal \ annual \ installments \ beginning \ on \ the \ date \ indicated.$

Remarks:

<u>Clayton Jones as Attorney-in-</u> <u>Fact for Scott E. Schwerdt</u>

05/12/2009

** Signature of Reporting Person D

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.