## FORM 4

# Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See*

Instruction 1(b).

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## OME

OMB APPROVAL
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#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)																	
1. Name and Address of Reporting Person *- FULLER GILBERT A				2. Issuer Name and Ticker or Trading Symbol USANA HEALTH SCIENCES INC [USNA]							:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner X Officer (give title below) Other (specify below)  CFO and Executive V.P.							
(Kast) (First) (Middle) 3838 WEST PARKWAY BLVD				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2008															
(Street) SALT LAKE CITY, UT 84120				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person  Form filed by More than One Reporting Person								
SALI LA		(State)	(Zip)				Tabla I	Non	. Doub	vativa (				Nama a a d	of ou Don	oficially Ov	mad		
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if any		3. Tra Code (Instr.	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)						6. Ownershi Form:	of I Ber	7. Nature of Indirect Beneficial			
			(Month/Day/Year)		Coo	de	V	(A) or		. 3 and 4	14)		Direct (D) or Indirect (I) (Instr. 4)		rnership str. 4)				
Common	Stock		12/13/2006			G	ł	4	1,100	D	\$ 0	11,20	00			D			
Common Stock 01/02/200		01/02/2008			M	ſ	4	10,000	Δ	\$ 0.83	51,200			D					
Common	Stock												630 <mark>(</mark>	1)			I	40	1k
Common Stock													1,600	)			I	Spo IR	ouse A
Kemmuel.	Report on a	separate line for eac	Table II - l	Derivativ	ve Se	ecuri	ties Acq	P C fo	Persor contain form d	ns who ned in isplay	this forms a curre	m are rently v	not re	equired OMB co	of inform to respor introl num	nd unless t		C 1474	4 (9-02)
		I		( <i>e.g.</i> , put:		lls, w	arrants,	opti	ons, co	nverti	ble secur	ities)				la 27 .			
1. Title of Derivative Conversion Security (Instr. 3)  1. Transaction Date Execution Date, any (Month/Day/Year)  2. Month/Day/Year)  3. Transaction Date, any (Month/Day/Year)		f Transaction of Code Deriva (Instr. 8) Securi Acqui (A) or Dispo (D)		uired or oosed of ar. 3, 4,	Expi	iration	Exercisable and on Date (Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of 9. Numbe Derivative Security (Instr. 5)  Beneficia Owned Following Reported Transactic (Instr. 4)		Owne Form Deriva Securi Direct or Ind	rship of tive ty: (D) irect	11. Natur of Indirec Beneficia Ownersh (Instr. 4)				
				Code	v	(A)	(D)	Date Exer	e rcisable		oiration e	Title		Amount or Number of Shares					
Stock Options (right to buy)	\$ 0.83	01/02/2008		М			40,000	09/0	01/200	02 03/	01/2012	Comi Sto		40,000	\$ 0.83	0	D		

#### **Reporting Owners**

Describes Ossess Wasse / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FULLER GILBERT A								
3838 WEST PARKWAY BLVD			CFO and Executive V.P.					
SALT LAKE CITY, UT 84120								

#### **Signatures**

Gilbert A. Fuller	01/04/2008
**Signature of Reporting Person	Date

### **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) Between December 30, 2006 and December 29, 2007, the reporting person acquired 142 shares of USANA common stock in transactions pursuant to the issuer's 401(k) plan.

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.