FC	ORM	4

Check this box if	no
longer subject to	
Section 16. Form	4 or
Form 5 obligation	IS 1
may continue. See	2
Instruction 1(b)	

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Attons *See* See See Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Finit of Type Responses)								F		
1. Name and Address of Reporting Perso MCCLAIN JERRY G	2. Issuer Name and USANA HEALT			•••		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) 3838 WEST PARKWAY BLVD	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below) 05/18/2015					w)			
(Street) SALT LAKE CITY, UT 84120		4. If Amendment, D	ate Original	Filec	(Month/Da	y/Year)		6. Individual or Joint/Group Filing(Che _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		ne)
(City) (State)	(Zip)	Т	able I - No	n-De	rivative S	Securiti	es Acqui	ired, Disposed of, or Beneficially Own	ned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)		4. Secur (A) or D (Instr. 3,	A and 5 (A) or	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	05/18/2015		Code M		Amount 768 (1)	. ,	Price \$ 28.16	768	(Instr. 4) D	
Common Stock	05/18/2015		S		768	D	\$ 127	0	D	

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

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. N	umber	6. Date Exerc	isable and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)		Code		Deri	vative	(Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial
· /	Price of		(Month/Day/Year)	(Instr. 8)			rities			Securities			-		Ownership
	Derivative							(Instr. 3 and 4)				Security:	(Instr. 4)		
	Security					(A) (0	Direct (D)	
							osed						1	or Indirect	
						of (I	· ·						Transaction(s) (Instr. 4)	· /	
					(Instr. 3, 4, and 5)							(Instr. 4)	(Instr. 4)		
						-, а	iu <i>5)</i>				• •				
											Amount				
								Date	Expiration		or Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				
Stock-															
Settled										G					
Stock	\$ 28.16	05/18/2015		М			988	07/01/2013	09/30/2015	Common	988	\$ 0	0	D	
Appreciation	• • • •	00,10/2010		1/1			200	0,,01,2015	0010012010	Stock	200	ΨŪ	3	2	
Rights															
Rights															

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MCCLAIN JERRY G 3838 WEST PARKWAY BLVD SALT LAKE CITY, UT 84120	Х						

Signatures

 James Bramble, as attorney in fact.
 05/18/2015

 -**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) The shares acquired resulted from the reporting person's settlement of the stock-settled stock appreciation rights disclosed in Table II.

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.