# FORM 4

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

OMB APPROVAL						
DMB Number:	3235-0287					
Estimated average burden nours per response 0.5						
ours per response						

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

#### 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	s)														
1. Name and Address of Reporting Person * Macuga Daniel A.					2. Issuer Name <b>and</b> Ticker or Trading Symbol USANA HEALTH SCIENCES INC [USNA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) 3838 WEST PARKWAY BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 07/27/2018						X Officer (give title below) Other (specify below)  Chief Communications Officer					
(Street)				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form file	6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
SALT LAKE CITY, UT 84120												To this filled by More than One Reporting Person				
(City	7)	(State)	(Zip)		T	able I - No	on-De	erivative	Securi	ties Ac	quired, Dispo	osed of, or	Beneficially	Owned		
1.Title of S (Instr. 3)	Instr. 3) Date		Transaction te onth/Day/Y	Execution Dat		Code (Instr. 8)	action	tion 4. Securities Acquor Disposed of (E) (Instr. 3, 4 and 5)		(D)	Benefici Reporte	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	V	Amount	(D)	Pric	ce			(Instr. 4)		
Common	Stock	07	/27/2018			S		503	D	\$ 132.40	038			D		
indirectly.							co the	ntained e form d	in this isplay	form s a cu	to the colle are not req rrently valid	uired to re I OMB cor	spond un	less	C 1474 (9- 02)	
			Table		tive Securi its, calls, v						cially Owned es)					
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Yo	ar) any	ion Date, if	4. Transactio Code (Instr. 8)	of a		6. Date Exercisable and Expiration Date (Month/Day/Year)		te A	Title and Amount of Underlying Securities Instr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	(Instr. 4)	
					Code V	/ (A) (I	E	ate xercisable	Expir Date	ration T	Amount or Number of Shares					
Repor	ting O	wners														
					Relationships											
Reporting Owner Name / Address		Director	10% Owner	Officer				О	ther							
Macuga Daniel A. 3838 WEST PARKWAY BLVD.				Chief	Commun	icatio	ons Offic	cer								

## **Signatures**

SALT LAKE CITY, UT 84120

Joshua Foukas, as attorney in fact.	07/30/2018
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).

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.