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

OMB APPROVAL					
DMB Number:	3235-0287				
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ours per respon	se 0.5				

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

1 5				~ .	NC [USNA] (Ch			(Che	neck all applicable)			
(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/11/2019			-	Officer (give title below) Other (specify below)							
	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							
(Zip)		Tab	ole I - Non	-Deri	ivative S	ecurities	Acqui	red, Disp	osed of, or	Beneficially	Owned	
1.Title of Security 2. Transaction Date (Month/Day/Year)		any		Code (Instr. 8)				Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial
	(Month/Day/	y ear)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)			\ /	Ownership (Instr. 4)
02/11/2019			S		282	11)		0			D	
For each class of sect	urities benefic	ially o	wned dire	ctly o	or							
				cont	tained ii	n this fo	orm are	not req	uired to re	espond unl	ess	EC 1474 (9- 02)
			•		•			ly Owned	l			
n 3A. Deemed Execution Day (Year) any	3A. Deemed 4. 5. Number any (Month/Day/Year) (Instr. 8) 5. Number any (Instr. 8) 6. Number any (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	and Expiration Date (Month/Day/Year) An Un Sec		7. Ti Amo Undo Secu (Inst	ount of erlying urities		Derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)	
				Dat	e ercisable	Expiratio	on Title	Amount or Number of				
	(Middle) D (Zip) 2. Transaction Date (Month/Day/Year) 02/11/2019 for each class of sectors Table II - I (on	(Middle) (Middle) (Zip) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) Table II - Derivative Se (e.g., puts, cal on 3A. Deemed Execution Date, if Code (Year) 3. Date of Execution 2. Deemed Execution Date, if Code 3. Deemed Execution Date, if Transa Code	USANA HEAL 3. Date of Earliest 02/11/2019 4. If Amendment, 2A. Deemed Execution Date, if any (Month/Day/Year) 102/11/2019 Table II - Derivative Securities beneficially of the company	USANA HEALTH SCII 3. Date of Earliest Transaction 02/11/2019 4. If Amendment, Date Orig 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Instr. 8) Code (Instr. 8) Code O2/11/2019 S Table II - Derivative Securities Acquired (e.g., puts, calls, warrants, op on Securities (Instr. 8) Table II - Derivative Securities Acquired (Month/Day/Year) On SA. 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Deemed (e.g., puts, calls, warrants, options, convertion any (Month/Day/Year) A. Deemed (Instr. 8) S. Number Code (Month/Day/Year) S. Number Of Derivative Securities Acquired (A) or Disposed Of (D) (Instr. 3,	USANA HEALTH SCIENCES INC [USNA of Earliest Transaction (Month/Day/Year) 02/11/2019 4. If Amendment, Date Original Filed(Month/Day/Year) 4. If Amendment, Date Original Filed(Month/Day/Year) 2A. Deemed Execution Date, if (Month/Day/Year) (Month/Day/Year) 3. Transaction Code (A) or Disposed (Instr. 8) (Instr. 3, 4 and 5) (Instr. 8) (Instr. 8) (Instr. 8) (Instr. 8) (Instr. 8) (Instr. 3, 4 and 5) (Instr. 8) (Instr.	USANA HEALTH SCIENCES INC [USNA] 3. Date of Earliest Transaction (Month/Day/Year) 02/11/2019 4. If Amendment, Date Original Filed(Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Transaction Code (Instr. 8) Code V Amount (A) or (D) Price 1. Code (Instr. 3, 4 and 5) 2. 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Daniel Communication (Additional	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
FULLER GILBERT A 3838 WEST PARKWAY BLVD SALT LAKE CITY, UT 84120	X						

Signatures

Joshua Foukas, as attorney in fact	02/12/2019
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.