FORM 4

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

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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

	e Responses)													
1. Name and Address of Reporting Person* WOOD TIMOTHY E				2. Issuer Name and Ticker or Trading Symbol USANA HEALTH SCIENCES INC [USNA]					Δ1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
3838 WES	ST PARKV	VAY BLVD		3. Date of Earliest Transaction (Month/Day/Year) 10/21/2020			-	Officer (g	ive title below)	Ot	her (specify be	low)		
(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				
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owner					ned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y		2A. Deemed Execution Date, any (Month/Day/Yea	if Code (Instr.	4. Securities Ad (A) or Disposed (Instr. 3, 4 and		ed of (D) Owned Fol (5) Transaction		\ /		Ownership Form:	Beneficial	
				(Month/Day/ Yea	Cod	e V	Amoun	(A) o		(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)
Common S	Stock		10/21/2020		M		426	A	<u>(1)</u> 4	26			D	
										Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	ion Date Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Code of (Instr. 8)) Execution Date, if any (Code of (Instr. 8)) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Instrument (Month/Day/Year) Of Securities Acquired (A) or Disposed of (D)		7. Title and Amount of Underlying I Securities		Derivative Security (Instr. 5) Bo								
(Ilisu. 3)	Derivative Security	(Month/Day/Yea	r) any	Code (Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D)	(Month		Date	of Underly Securities	ying	Derivative Security		Owners Form of Derivati Security Direct (or Indire	Ownershi (Instr. 4) D)
(ilisu. 3)	Derivative	(Month/Day/Yea	r) any	Code (Instr. 8)	Derivative Securities Acquired (A) or Disposed	(Month		Date	of Underly Securities	ying nd 4)	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivate Security Direct (or Indirects)	hip of Indirect Beneficia Ownershi (Instr. 4)
(IIISU. 3)	Derivative	(Month/Day/Yea	r) any	Code (Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	(Month	n/Day/Ye	Date ear)	of Underly Securities	ying	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivate Security Direct (or Indirects)	hip of Indirect Beneficia Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
WOOD TIMOTHY E 3838 WEST PARKWAY BLVD SALT LAKE CITY, UT 84120	X					

Signatures

Joshua Foukas, as attorney in fact.	10/23/2020
**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) Each restricted stock unit represents a contingent right to receive one share of USNA common stock.
- $\textbf{(2)} \ \ Restricted \ Stock \ Units \ vest \ 25\% \ on \ July \ 22, \ 2020, \ October \ 21, \ 2020, \ February \ 10, \ 2021, \ and \ April \ 28, \ 2021.$

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.