FORM 4

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

OMB APPROVAL
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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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * IIEKKING G DOUG					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						
(Kast) (First) (Middle) 3838 WEST PARKWAY BLVD					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2020							C_Office	er (give title bel	CFO	Other (specify	below	v)	
(Street)				4. If	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						
SALT LAKE CITY, UT 84120 (City) (State) (Zip)				Table I. Non-Derivative Securities Acous						anire	nired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	Execu any	Deemed attention Date, if	3. Transaction Code (Instr. 8)		ion 4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5)			(A) 5 E	A) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. 7 Ownership o Form: E		Beneficial	
				(Mont	th/Day/Year	Cod	e	V	Amount	(A) or (D)	Price	(Instr. 3 and 4) Price		and 4)		Direct (D) or Indirec (I) (Instr. 4)		vnership astr. 4)
Common	Stock		11/04/2020			S			454	D	\$ 76.29	933	,913			D		
			Table I		vative Secur		quire	cor the d, l	ntained i form di Disposed	n this splay of, or	form as a cur	are no rrently cially (ot requ y valid		ormation spond unle trol numbe	ess	C 147	74 (9-02)
. =		I	. 1		puts, calls, v		s, opt							I				
Security	2. Conversion or Exercise Price of Derivative Security		Execution any	execution Date, if		Number a		and	i. Date Exercisable nd Expiration Date Month/Day/Year)		te A U Se	,	at of ying ies B and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	of tive ty: (D) rect	Beneficial Ownershi (Instr. 4)
					Code V	(A)	(D)	Da Ex	ite ercisable	Expir Date	ration	Title o	Number					

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
IIEKKING G DOUG 3838 WEST PARKWAY BLVD SALT LAKE CITY, UT 84120			CFO			

Signatures

Joshua Foukas, as attorney in fact.	11/06/2020
**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).

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.