FORM 4

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

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

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

1. Name and Address of Reporting Person* FULLER GILBERT A				2. Issuer Name and Ticker or Trading Symbol USANA HEALTH SCIENCES INC [USNA]						1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner				
3838 WES	(Last) (First) (Middle) 838 WEST PARKWAY BLVD			3. Date of Earliest Transaction (Month/Day/Year) 02/09/2022						-	Officer (give title below) Other (specify below)				
(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)			(Zip)	Table I - Non-Derivative Securities Acqu						es Acquir	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		te, if		(A) o		Securities Acquired or Disposed of (D) str. 3, 4 and 5)		5. Amount of Securities Bene Owned Following Reported Transaction(s)		ted	orm:	Beneficial	
				(Month/Day/Y	Y ear)	Code	V A	mount	(A) or (D)		(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common S	Stock		02/09/2022			M	3	12	A	<u>(1)</u> 3	312			D	
							contair	ed in t	his for	rm are n		l to respor	nd unless tl		474 (9-02)
				Derivative Sec			contain form d	ed in t splays osed of,	his for a curr or Ben	rm are no rently va	ot required alid OMB co	l to respor	nd unless tl		474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Ye:	3A. Deemed Execution Date,	e.g., puts, call 4. if Transactio Code	5. Nu of De Sec (A) Dis of (In	mber rivative curities quired or posed (D) str. 3,	contain form d	ned in t splays osed of, nvertib ercisablation Da	or Bendle securite	rm are no rently va neficially (rities)	ot required alid OMB co Owned and Amount lying	I to respondent on trol number of the second number	nd unless tl	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Natur of Indired Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	e.g., puts, call 4. if Transactio Code	5. Nu of De Sec Ac (A) Dis of (In 4, a	mber rivative curities quired or sposed (D) (str. 3, and 5)	contain form d ired, Disp options, co 6. Date E and Expir	eed in t splays osed of, nvertib cercisab ation Da ay/Year	or Bende secule tte	rm are no rently value ficially (rities) 7. Title ar of Underl Securities	ot required alid OMB co Owned and Amount lying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	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	02/11/2022
**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.
- (2) Restricted Stock Units vest 25% on July 28, 2021, October 27, 2021, February 9, 2022, and April 27,2022.

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.