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

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| houre nor roenonea | 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

| (Print or Type Responses) 1. Name and Address of Reporting Person *- WILSON MARK H | | | | 2. Issuer Name and Ticker or Trading Symbol USANA HEALTH SCIENCES INC [USNA] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---------------|--|---|--|-------------------|---|--|------------------------------------|-----------------|---------------------------------|--|--|---|--|-------------------------------------|------|--|
| (Last) (First) (Middle) 3838 WEST PARKWAY BLVD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/21/2004 | | | | | | | | Director X Officer (give | | | Owner er (specify belo ations | ow) | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) | | | | | | |
| SALT LAKE CITY, UT 84120 | | | | | | | | | | | | _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (Cit | y) | (State) | (Zip) | | | | Table I | - Non-De | rivative | Securitie | es Acqu | ired, Disposed | of, or Ben | eficially Own | ed | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | f Code (Instr. | 8) | (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) | | wing Reported | | Ownership Form: Direct (D) or Indirect I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | Cod | le V | Amoun | ount (A) or (D) | Price | | | | Instr. 4) | | | |
| Common | Stock | | 10/21/2004 | | | | M | | 5,000 | A | \$ 2.45 | 5,000 | |] |) | | |
| Common | Stock | | 10/21/2004 | | | S | | 5,000 | D | \$ 30.96 | 0 | |] |) | | | |
| Common | ommon Stock 1 | | 10/21/2004 | | | М | | 40,000 | A | \$ 0.83 | 40,000 | | 1 |) | | | |
| Common Stock 10/21/2 | | | 10/21/2004 | | | | S | | 35,000 | D | \$ 30.96 | 5,000 | |] |) | | |
| Common | Common Stock | | | | | | | | | | | 856 | |] | | 401K | |
| 1. Title of Derivative Security (Instr. 3) | Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. 5. Nu f Transaction of Code Deriv r) (Instr. 8) Secum Acqu (A) o Dispo (D) (Instr. 8) | | mber de Date Exc expiration (Month/Date) or osed of cosed | | on Date Am Day/Year) Und Sec | | 7. Tit Amou Unde Secur | le and unt of rlying rities . 3 and 4) | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownersh Form of Derivativ Security: Direct (D or Indirect | Benefic Owners (Instr. 4 | | |
| | | | | Code | V | and (A) | | Date Exercisa | | piration | Title | Amount or Number of Shares | | | | | |
| | | | | Couc | | | | | | | _ | | | | | | |
| Options (Right to | \$ 0.83 | 10/21/2004 | | М | | | 40,000 | 09/01/2 | 2003 03 | /01/201 | 2 Com | mon ock 40,000 | \$ 30.96 | 120,000 | D | | |
| Stock Options (Right to buy) Stock Options (Right to buy) | \$ 0.83 | 10/21/2004 | | | | | | | | /11/201 | Sto | 140 000 | \$ 30.96 \$ 30.96 | 120,000 | D | | |

Other

V.P. of Customer Relations

Signatures

WILSON MARK H

3838 WEST PARKWAY BLVD

SALT LAKE CITY, UT 84120

| Mark H. Wilson | 10/25/2004 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Director 10% Owner

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.