## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     DORNY D MATTHEW						2. Issuer Name <b>and</b> Ticker or Trading Symbol  NU SKIN ENTERPRISES INC [ NUS ]								heck all ap Dire	olicable)	or (give title		vner specify	
	`	ERPRISES, INC	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/02/2018									below) below)  General Counsel				
(Street)	U'		84601		_ 4. It	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Forr	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting				
(City)	(Si	tate)	(Zip)		-									Pers				9	
		Tab	le I - No	on-Deriv	vative	e Sec	urit	ies Ac	quired	l, Di	sposed o	of, or Be	neficia	lly Own	ed				
1. Title of Security (Instr. 3)			2. Transa Date (Month/D		Exe (Year) if ar		A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			ount of ities icially d Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		ted action(s) 3 and 4)			(Instr. 4)	
Class A Common Stock				04/02/	04/02/2018				М		3,250	A	\$39.3	35 4	19,128		D		
Class A Common Stock				04/02/	02/2018				S		2,549(1	) <b>D</b>	\$72.0	5(2)	16,579		D		
Class A Common Stock 04				04/02/	2018				S		701(1)	D	\$72.8	.(3) 45,878		D			
		Т	able II								posed of converti			y Owne	I				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deet Execution if any (Month/I		4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		te	7. Title an Amount o Securities Underlyin Derivative (Instr. 3 au	f g Security	8. Price of Derivativ Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares	1					
Employee Stock Option (Right to	\$39.35	04/02/2018			M			3,250	(4)		08/15/2018	Class A Common Stock	3,250	\$0	0		D		

### **Explanation of Responses:**

- 1. Sale pursuant to a 10b5-1 plan adopted by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from 71.58 to 72.56, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within this range.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from 72.62 to 73.05, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within this range.
- 4. Currently exercisable in full.

### Remarks:

/s/ Gregory Belliston as Attorney-in-Fact for D.

04/03/2018

Matthew Dorny

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.