

NATURES SUNSHINE PRODUCTS INC
 Form 4
 April 19, 2006

FORM 4

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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 DELTA PARTNERS LLC

2. Issuer Name and Ticker or Trading Symbol
 NATURES SUNSHINE PRODUCTS INC [NATR]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 ONE INTERNATIONAL PLACE, SUITE 2401
 (Street)
 BOSTON, MA 02110
 (City) (State) (Zip)

3. Date of Earliest Transaction (Month/Day/Year)
 04/18/2006

___ Director ___X___ 10% Owner
 ___ Officer (give title below) ___ Other (specify below)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 ___ Form filed by One Reporting Person
 X Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Nature's Sunshine Products, Inc.	04/18/2006		P	A	\$ 46,000 9,4511	1,816,200	I ⁽¹⁾

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Owned Beneficially (Instr. 5)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
DELTA PARTNERS LLC ONE INTERNATIONAL PLACE SUITE 2401 BOSTON, MA 02110		X		
JOBSON CHARLES E ONE INTERNATIONAL PLACE SUITE 2401 BOSTON, MA 02110		X		

Signatures

Charles Jobson 04/19/2006
 **Signature of Reporting Person Date

Charles Jobson 04/19/2006
 **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).

Reporting person, Delta Partners, LLC, is the investment manager for three private investment funds and one separately managed account and is deemed to have investment discretion over 1,811,200 shares of the issuer. The four entities are the actual owners of the shares. Charles Jobson, is the sole managing member of Delta Partners, LLC and can also be deemed to have investment discretion. Mr. Jobson (1) is also a managing member of Tetra Capital Management, LLC, an affiliate of Delta Partners, LLC, and is deemed to have investment discretion over an additional 5,000 shares of the issuer. Tetra Capital Management, LLC is the investment manager for two private investment funds. The two entities are the actual owners of the 5,000 shares. Both reporting persons disclaim beneficial ownership in the shares reported herein except to the extent of their pecuniary interest.

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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.