

NU SKIN ENTERPRISES INC
 Form 3
 June 06, 2007

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 * Â Quijano Melisa (Last) (First) (Middle) C/O NU SKIN ENTERPRISES, INC., Â 75 WEST CENTER STREET (Street) PROVO, Â UTÂ 84601 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 05/22/2007	3. Issuer Name and Ticker or Trading Symbol NU SKIN ENTERPRISES INC [NUS]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Regional President	5. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
--	--	---	--	--	---

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class A Common Stock	2,901 ⁽¹⁾	D	Â

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

SEC 1473 (7-02)

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 control number.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: NU SKIN ENTERPRISES INC - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (right to buy)	03/10/2004 ⁽²⁾	03/10/2013	Class A Common Stock	1,000	\$ 9.04	D	Â
Employee Stock Option (right to buy)	09/02/2004 ⁽³⁾	09/02/2013	Class A Common Stock	1,000	\$ 11.5	D	Â
Employee Stock Option (right to buy)	02/28/2006 ⁽³⁾	02/28/2015	Class A Common Stock	5,000	\$ 22.33	D	Â
Employee Stock Option (right to buy)	08/31/2006 ⁽³⁾	08/31/2015	Class A Common Stock	5,000	\$ 21.34	D	Â
Employee Stock Option (right to buy)	05/26/2007 ⁽³⁾	05/26/2013	Class A Common Stock	2,000	\$ 17.58	D	Â
Employee Stock Option (right to buy)	09/01/2007 ⁽³⁾	09/01/2013	Class A Common Stock	2,000	\$ 17.25	D	Â
Employee Stock Option (right to buy)	02/26/2008	02/26/2014	Class A Common Stock	2,000	\$ 17.75	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Quijano Melisa C/O NU SKIN ENTERPRISES, INC. 75 WEST CENTER STREET PROVO, UT 84601	Â	Â	Â Regional President	Â

Signatures

D. Matthew Dorny as Attorney-in-Fact for Melisa Quijano 06/06/2007

**Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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) Represents number of shares beneficially owned as of May 22, 2007.

(2) Currently exercisable in full.

Edgar Filing: NU SKIN ENTERPRISES INC - Form 3

(3) Becomes exercisable in four equal annual installments beginning on the date indicated.

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.