## Edgar Filing: NATURAL HEALTH TRENDS CORP - Form 4

NATURAL H Form 4 April 04, 2008		ENDS COR	Р								
									OMB A	PPROVAL	
Wa Check this box if no longer subject to Section 16. Form 4 or				ECURITIES AND EXCHANGE C Washington, D.C. 20549				COMMISSION	OMB Number:	3235-0287	
				IANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligations may contir <i>See</i> Instruc 1(b).	Section 1	7(a) of the	Public Ut		ling Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40	n		
(Print or Type Re	esponses)										
I			2. Issuer Name <b>and</b> Ticker or Trading Symbol NATURAL HEALTH TRENDS CORP [BHIP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mor				3. Date of Earliest Transaction (Month/Day/Year) 03/15/2008				_X_Director10% Owner Officer (give titleOther (specify below)			
				Amendment, Date Original (Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
DALLAS, T	X 75234							Person	fore than One Ke	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye:	ar) Executio any	med	3.		ies Ac sposed	quired of	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	
Common Stock	03/15/2008			А	15,000	A	\$0	53,750	D		

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

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 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Zuckut Stefan C/O NATURAL HEALTH TRENDS CORP. 2050 DIPLOMAT DRIVE DALLAS, TX 75234	Х						
Signatures							
/s/ Gary C. Wallace by Power of Attorney	04/04/2008						
<u>**</u> 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).

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.