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

#### NATURAL HEALTH TRENDS CORP

Form 4 April 10, 2015

### FORM 4

Check this box

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL

Washington, D.C. 20549 Number:

3235-0287 January 31,

2005

if no longer subject to Section 16.

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Expires:

Form 4 or
Form 5
obligations
may continue.

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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person \*
MASON RANDALL A

2. Issuer Name and Ticker or Trading

Symbol

Issuer

NATURAL HEALTH TRENDS CORP [NHTC]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last) (First) (Middle) 3. Date of Earliest Transaction

(Zip)

(Month/Day/Year)

\_X\_ Director \_\_\_\_\_ 10% Owner \_\_\_\_\_ Officer (give title \_\_\_\_\_ Other (specify below) below)

C/O NATURAL HEALTH TRENDS 04/08/2015

CORP., 4514 COLE AVE., SUITE 1400

(Street)

(State)

1400

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_Form filed by One Reporting Person \_\_\_\_ Form filed by More than One Reporting

Person

**DALLAS, TX 75205** 

(City)

le of 2. Transaction Date 2A. Deemed

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

1.Title of 2. Transaction Date 2A. Date 2. Compared to 2. Transaction Date 2A. Date 2. Date 2.

2A. Deemed Execution Date, if any (Month/Day/Year) 3. 4. Securities
TransactionAcquired (A) or
Code Disposed of (D)
(Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

6.
Ownership
Form:
Direct (D)
or Indirect

7. Nature of Indirect Beneficial Ownership (Instr. 4)

(A) Transaction(s)
Or (Instr. 3 and 4)

Reported (I)
Transaction(s) (Instr. 4)

I

By Marden

Common Stock 04/08/2015

J(1) 3,500 D (1) 23,899

Rehabilitation Associates,

Inc.

Common Stock

239,018

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

SEC 1474 (9-02)

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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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				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

MASON RANDALL A C/O NATURAL HEALTH TRENDS CORP. 4514 COLE AVE., SUITE 1400 DALLAS, TX 75205

X

### **Signatures**

/s/ Timothy S. Davidson by Power of Attorney

04/10/2015

\*\*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).
- (1) Marden Rehabilitation Associates, Inc., an entity controlled by Mr. Mason, provided compensation to certain of its employees in the form of shares of common stock of Natural Health Trends Corp.

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.

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