# FORM 4

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

OMB APPROVAL					
OMB Number: 3235-0287					
Estimated average burden					
nours per response					

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 OF SECURITIES

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

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * Davidson Timothy Scott			2. Issuer Name <b>and</b> Ticker or Trading Symbol NATURAL HEALTH TRENDS CORP [NHTC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) C/O NATURAL HEALTH TRENDS CORP., 4514 COLE AVE., SUITE 1400				3. Date of Earliest Transaction (Month/Day/Year) 08/26/2013						X Officer (give title below) Other (specify below)  Sr. V.P. & CFO						
(Street) DALLAS, TX 75205			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City	)	(State)	(Zip)		Ta	ble I - N	Non-l	Deriv	ative S	ecurities	Acqui	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, i any (Month/Day/Year		Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	ially Owned Following d Transaction(s)		Ownership of Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
						de	V Amoun		(A) or (D)	Price	(		or Indirect (I) (Instr. 4)	(Instr. 4)		
Common	Stock		08/26/2013			F	)		8,500	A	\$ 1.5	202,650			D	
Common	Stock		08/27/2013			F	)		1,500	A	\$ 1.5	204,150			D	
Reminder: indirectly.	Report on a	separate line for	r each class of secu	rities benef	icially	owned	direc	tly or								
							c	onta	ined i	n this fo	rm ar	e not req	uired to re	formation spond unl itrol numb	ess	EC 1474 (9- 02)
			Table II - D	erivative S c.g., puts, c				,		-			ĺ			
1. Title of Derivative Conversion Security or Exercise (Month/Day/Year) any		ite, if Transaction of		tive ties red sed	r 6. Date Exercisable and Expiration Date (Month/Day/Year)		on Date	Am Uno Sec	Title and ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4) O)			
				Coo	le V	(A)	(D)	Date Exerc	cisable	Expiratio Date	n Titl	Amount or e Number of Shares				

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Davidson Timothy Scott							
C/O NATURAL HEALTH TRENDS CORP.			Sr. V.P. & CFO				
4514 COLE AVE., SUITE 1400			Sr. v.P. & CrO				
DALLAS, TX 75205							

#### **Signatures**

/s/ Gary C. Wallace by Power of Attorney	08/27/2013
**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 nu	mber.