SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

| 1. Name and Address <u>MASON RAN</u> | s of Reporting Person [*] NDALL A | NAT | 2. Issuer Name and Ticker or Trading Symbol <u>NATURAL HEALTH TRENDS CORP</u> [NHTC] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | Relationship of Report neck all applicable) X Director | 0 () | suer % Owner | | |
|---|---|--|---|--|--------------|--|--------------|---------|--|---|---|------------------------|--|
| (Last) | (First) | (Middle) | | 5/2022 | iction (ivid | ontn/D | ay/Year) | | | Officer (give titl below) | | ther (specify elow) | |
| UNITS 1205-07, 12/F, MIRA PLACE TOWER A 132 NATHAN ROAD, TSIMSHATSUI (Street) | | | | 4. If Amendment, Date of 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 | | | |
| KOWLOON, HONG KONG | K3 | 000000000 | 0 | | | | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | | | | |
| | | Table I - N | on-Derivative | e Securities Ad | quired | l, Dis | sposed of, o | or Bene | eficially | Owned | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Date, Transaction Code (Instr. | | A. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and Amount (A) or Price | | | 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) | | |

| | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | |
|--------------|------------|------|---|--------|---------------|-------|------------------|---|--|
| Common Stock | 06/15/2022 | М | | 1,667 | A | (1) | 230,501 | D | |
| Common Stock | 06/15/2022 | D | | 1,667 | D | \$5.5 | 228,834 | D | |
| Common Stock | 09/15/2022 | М | | 1,667 | A | (1) | 230,501 | D | |
| Common Stock | 09/15/2022 | D | | 1,667 | D | \$4.5 | 228,834 | D | |
| Common Stock | | | | | | | 23,899 | I | By Marden Rehabilitation Associates, Inc. |

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 | | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. 5. Number of Transaction Code (Instr. Securities 8) Acquired (A) | | 6. Date Exerc Expiration Da (Month/Day/) | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
|---|---|------------|---|--|--|--|-------|--|--------------------|---|-------------------------------------|--|--|---|--|
| | Derivative Security | | | | or Disposed of (D) (Instr. 3, 4 and 5) | | | | | | | | | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Phantom Stock | (1) | 06/15/2022 | | М | | | 1,667 | 06/15/2022 | 06/15/2022 | Common Stock | 1,667 | (1) | 3,331 | D | |
| Phantom Stock | (1) | 09/15/2022 | | М | | | 1,667 | 09/15/2022 | 09/15/2022 | Common Stock | 1,667 | (1) | 1,664 | D | |

Explanation of Responses:

1. Each phantom share entities the holder to receive a cash payment equal to the fair market value of one share of NHTC common stock on the applicable vesting date, subject to satisfaction of the applicable vesting conditions and a maximum payment value of \$12.00 per phantom share.

/s/ Timothy S. Davidson, by Power 09/16/2022

of Attorney

** Signature of Reporting Person

son Date

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

 * 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.

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 Number.