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Davidson Tin Form 4	nothy Scott											
March 17, 20	09											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE CO									OMB APPROVAL			
	UNITE	Washington, D.C. 20549									3235-0287	
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed p s nue. Section 1	STATEMENT OF CHANGES IN 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								burden hou response	Estimated average burden hours per response 0.5	
(1 mil or 1)pe i	espenses)											
Davidson Timothy Scott Symb NAT				Issuer Name and Ticker or Trading ^{abol} TURAL HEALTH TRENDS RP [BHIP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) RAL HEALTH) DIPLOMAT		3. Date of (Month/D 03/16/20	ay/Year)	Frai	nsaction			Director X Officer (give below) Sr.		o Owner er (specify	
				nendment, Date Original onth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
DALLAS, T	X 75234									Aore than One Re		
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Yea	ar) Executio any	med	3. Transac Code	tior	4. Securiti (A) or Dis (D)	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	03/16/2009			А		15,000	А	\$0	124,700	D		

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

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivativ Securities Acquired (A) or Disposed			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans	
					of (D) (Instr. 3, 4, and 5)						(Instr
				Code V		Date Exercisable	Expiration Date	or Title N of	lumber		
Repo	rting O	wners									

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Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Davidson Timothy Scott C/O NATURAL HEALTH TRENDS CORP. 2050 DIPLOMAT DRIVE DALLAS, TX 75234			Sr. V.P. and CFO					
Signatures								
/s/ Gary C. Wallace by Power of Attorney	03/17/2	009						
**Signature of Reporting Person	Date							
Evaluation of Decremons								

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.