

IN THE UNITED STATES DISTRICT COURT
DISTRICT OF UTAH, CENTRAL DIVISION

IN RE NU SKIN ENTERPRISES, INC.,
SECURITIES LITIGATION

Master File No. 2:14-cv-00033-JNP-BCW

Hon. Jill Parrish

This Document Related To:
ALL ACTIONS

PROOF OF CLAIM AND RELEASE

GENERAL INSTRUCTIONS

1. Capitalized terms not defined in this Proof of Claim and Release form (“Claim Form”) have the same meanings as explained in the Notice of Pendency of Class Action, Proposed Settlement, and Motion for Attorneys’ Fees and Expenses (“Notice”) that accompanies this Claim Form and in the Stipulation and Agreement of Settlement, dated as of May 2, 2016 (the “Stipulation”).
2. To be eligible to recover from the Net Settlement Fund in the action entitled *In re Nu Skin Enterprises, Inc., Securities Litigation*, Master File No. 2:14-cv-00033-JNP-BCW (D. Utah) (the “Action”), you must complete and, on page 7, sign this Claim Form, and submit your Claim Form to the Claims Administrator as instructed below. If you fail to submit a properly completed and addressed Claim Form by the date specified below, your claim may be rejected and you may be precluded from any recovery from the Net Settlement Fund created in connection with the Settlement of the Action.
3. Submission of this Claim Form, however, does not ensure that you will share in the Net Settlement Fund.
4. **YOU MUST MAIL OR SUBMIT YOUR COMPLETED AND SIGNED CLAIM FORM SO THAT IT IS POSTMARKED OR RECEIVED ON OR BEFORE OCTOBER 6, 2016, ADDRESSED AS FOLLOWS:**

In re Nu Skin Enterprises, Inc., Securities Litigation
c/o A.B. Data, Ltd.
PO Box 173022
Milwaukee, WI 53217

To be considered timely, your Claim Form must *be postmarked or received by the deadline* above. Unless your Claim Form is submitted with a postmark, it will be deemed to have been submitted when actually received by the Claims Administrator.

5. You must submit supporting documentation for the transactions reported on this Claim Form, such as broker confirmation slips, broker account statements, an authorized statement from your broker reporting information about your transactions, or other similar documents.
6. Separate Claim Forms should be submitted for each separate legal entity (*e.g.*, a claim from joint owners should not include separate transactions of just one of the joint owners, and an individual should not combine his or her IRA transactions with transactions made solely in the individual’s name). Conversely, a single Claim Form should be submitted on behalf of one legal entity including all transactions made by that entity on one Claim Form, no matter how many separate accounts that entity has (*e.g.*, a corporation with multiple brokerage accounts should include all transactions made in all accounts on one Claim Form).
7. All joint beneficial owners must each sign this Claim Form and their names must appear as “Claimants” in Part I of this Claim Form. If you purchased Nu Skin securities during the Class Period and held the shares in your name, you are the beneficial owner as well as the record owner and you must sign this Claim Form to participate in the Settlement. If, however, you purchased Nu Skin securities during the relevant time period and the securities were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial owner of these shares, but the third party is the record owner. The beneficial owner, not the record owner, must sign this Claim Form to be eligible to participate in the Settlement.
8. Agents, executors, administrators, guardians, and trustees must complete and sign the Claim Form on behalf of persons represented by them, and they must:
 - a. expressly state the capacity in which they are acting;

b. identify the name, account number, Social Security Number (or taxpayer identification number), address and telephone number of the beneficial owner of (or other person or entity on whose behalf they are acting with respect to) the Nu Skin securities; and

c. furnish herewith evidence of their authority to bind to the Claim Form the person or entity on whose behalf they are acting. (Authority to complete and sign a Claim Form cannot be established by stockbrokers demonstrating only that they have discretionary authority to trade securities in another person's accounts.)

9. If you are NOT a Settlement Class Member (as defined in the Notice), or are excluded by the definition of the Settlement Class, DO NOT submit a Claim Form.

10. If you are a Settlement Class Member and have not requested exclusion, you will be bound by the terms of the Settlement and any judgment entered in this Action, WHETHER OR NOT YOU SUBMIT A CLAIM FORM OR RECEIVE A PAYMENT.

11. NOTICE REGARDING ELECTRONIC FILES: Certain claimants with large numbers of transactions may request, or may be requested, to submit information regarding their transactions in electronic files. To obtain the mandatory electronic filing requirements and file layout, you may visit the settlement website at www.NuSkinSecuritiesSettlement.com or you may email the Claims Administrator's electronic filing department at efiling@abdata.com. Any file not submitted in accordance with the required electronic filing format will be subject to rejection. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues an email after processing your file with your claim numbers and respective account information. Do not assume that your file has been received or processed until you receive this email. If you do not receive such an email within 10 days of your submission, you should contact the electronic filing department at efiling@abdata.com to inquire about your file and confirm it was received and acceptable.

12. You should be aware that it will take a significant amount of time to fully process all of the submitted Claim Forms and to administer the Settlement. This work will be completed as promptly as time permits, given the need to review and tabulate each Claim Form. Please notify the Claims Administrator of any changes of address.

**MUST BE POSTMARKED OR
RECEIVED ON OR BEFORE
OCTOBER 6, 2016**

UNITED STATES DISTRICT COURT
DISTRICT OF UTAH, CENTRAL DIVISION
In re Nu Skin Enterprises, Inc., Securities Litigation
No. 2:14-cv-00033-JNP-BCW

For Official Use Only



PROOF OF CLAIM AND RELEASE

PLEASE TYPE OR PRINT

PART I-CLAIMANT IDENTIFICATION

Beneficial Owner's Name (First, Middle, Last)

Joint Beneficial Owner's Name (First, Middle, Last)

Company/Trust/Other Entity (If Claimant Is Not an Individual)

Contact Person (If Claimant Is Not an Individual)

Trustee/Nominee/Other

Account Number (If Claimant Is Not an Individual)

Trust Date/Other (If Applicable)

Address Line 1

Address Line 2 (If Applicable)

City

State

Zip Code

Foreign Province

Foreign Postal Code

Foreign Country

Social Security Number

Taxpayer Identification Number

OR

Check Appropriate box:

- Individual or Sole Proprietor
- Corporation
- IRA

- Partnership
- Pension Plan
- Trust

- Estate
- Other (please specify)

Telephone Number (Daytime)

Telephone Number (Evening)

Email Address (Email address is not required, but if you provide it you authorize the Claims Administrator to use it in providing you with information relevant to this claim.)

PART II—TRANSACTIONS IN PUBLICLY TRADED NU SKIN COMMON STOCK

1. BEGINNING HOLDINGS – State the total number of shares of Nu Skin Common Stock held as of the opening of trading on May 4, 2011 . If none, write “0” or “Zero.” (Must be documented.) 	Proof of Holdings Enclosed <input type="radio"/> Y <input type="radio"/> N
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2. PURCHASES/ACQUISITIONS – Separately list each and every purchase/acquisition of Nu Skin Common Stock from after the opening of trading on May 4, 2011 through and including the close of trading on April 17, 2014 . ¹ (Must be documented.)	IF NONE, CHECK HERE <input type="checkbox"/>
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Date of Purchase/Acquisition (List Chronologically) (Month/Day/Year)	Number of Shares Purchased/Acquired	Purchase/Acquisition Price Per Share	Total Purchase/Acquisition Price (excluding taxes, commissions and fees)	Proof of Purchase/Acquisition Enclosed
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N

3. SALES – Separately list each and every sale/disposition of Nu Skin Common Stock from after the opening of trading on May 4, 2011 through and including the close of trading on April 17, 2014 . (Must be documented.)	IF NONE, CHECK HERE <input type="checkbox"/>
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Date of Sale (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Sale Price Per Share	Total Sale Price (excluding taxes, commissions and fees)	Proof of Sale Enclosed
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N
/ /		\$	\$	<input type="radio"/> Y <input type="radio"/> N

4. ENDING HOLDINGS – State the total number of shares of Nu Skin Common Stock held as of the close of trading on April 17, 2014 . If none, write “0” or “Zero.” (Must be documented.) 	Proof of Holdings Enclosed <input type="radio"/> Y <input type="radio"/> N
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IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST PHOTOCOPY THIS PAGE AND CHECK THIS BOX

¹ Information requested with respect to your purchases/acquisitions of Nu Skin Common Stock from the opening of trading on January 21, 2014 through and including the close of trading on April 17, 2014 is needed in order to balance your claim. Purchases/acquisitions during this period, however, are not eligible to participate in the Settlement as these purchases/acquisitions are outside the Class Period and will not be used for purposes of calculating your Recognized Claim pursuant to the Plan of Allocation.

PART III—TRANSACTIONS IN PUBLICLY TRADED NU SKIN CALL OPTIONS

1. BEGINNING HOLDINGS - At the opening of trading on **May 4, 2011**, I owned the following call option contracts on Nu Skin Common Stock. (Must be documented.)

Number of Contracts	Expiration Month and Year / Strike Price of Options <i>(i.e. March 2012/\$40)</i>	Purchase Price Per Contract	Amount Paid*	Exercised "E" or Expired "X" <i>(leave blank if neither)</i>	Exercise Date <i>(Month/Day/Year)</i>
	/	\$	\$		/ /
	/	\$	\$		/ /

2. PURCHASES/ACQUISITIONS – I made the following purchases/acquisitions of call option contracts on Nu Skin Common Stock between **May 4, 2011** and **January 17, 2014**, inclusive. (Must be documented.)

Date of Purchase <i>(Month/Day/Year)</i>	Number of Contracts	Expiration Month and Year / Strike Price of Options <i>(i.e. March 2012/\$40)</i>	Purchase Price Per Contract	Amount Paid*	Exercised "E" or Expired "X" <i>(leave blank if neither)</i>	Exercise Date <i>(Month/Day/Year)</i>
/ /		/	\$	\$		/ /
/ /		/	\$	\$		/ /
/ /		/	\$	\$		/ /
/ /		/	\$	\$		/ /

3. SALES – I made the following sales of the above call options on Nu Skin Common Stock that were purchased between **May 4, 2011** and **January 17, 2014**. (Include all such sales no matter when they occurred, must be documented.)

Date of Sale <i>(Month/Day/Year)</i>	Number of Contracts	Expiration Month and Year / Strike Price of Options <i>(i.e. March 2012/\$40)</i>	Sale Price Per Contract	Amount Received*
/ /		/	\$	\$
/ /		/	\$	\$
/ /		/	\$	\$
/ /		/	\$	\$

4. ENDING HOLDINGS – State the total number of Nu Skin call option contracts open after the close of trading on **January 17, 2014**. If none, write "0" or "Zero." If you wrote any call options, thereby having a short position in the options, please state the total short position(s) as a negative number. (Must be documented.)

Price of Nu Skin Call Option Contract	Number of Call Option Contracts Held	Expiration Date of Call Option Contract <i>(MM/YY)</i>
\$		/
\$		/

* Excluding taxes, fees, and commissions.

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST PHOTOCOPY THIS PAGE AND CHECK THIS BOX

PART IV—TRANSACTIONS IN PUBLICLY TRADED NU SKIN PUT OPTIONS

1. BEGINNING HOLDINGS - At the opening of trading on **May 4, 2011**, I was obligated on the following put option contracts on Nu Skin Common Stock. (Must be documented.)

Number of Contracts	Expiration Month and Year / Strike Price of Options (i.e. March 2012/\$40)	Sale Price Per Contract	Amount Received*	Assigned "A" or Expired "X" (leave blank if neither)	Assign Date (Month/Day/Year)
	/ /	\$	\$		/ /
	/ /	\$	\$		/ /

2. SALES (WRITING) OF PUT OPTIONS – I wrote (sold) put option contracts on Nu Skin Common Stock between **May 4, 2011** and **January 17, 2014**, inclusive, as follows. (Must be documented.)

Date of Writing (Sale) (Month/Day/Year)	Number of Contracts	Expiration Month and Year / Strike Price of Options (i.e. March 2012/\$40)	Sale Price Per Contract	Amount Received*	Assigned "A" or Expired "X" (leave blank if neither)	Assign Date (Month/Day/Year)
/ /		/	\$	\$		/ /
/ /		/	\$	\$		/ /
/ /		/	\$	\$		/ /
/ /		/	\$	\$		/ /

3. COVERING TRANSACTIONS (REPURCHASES) – I made the following repurchases of the above put option contracts on Nu Skin Common Stock that were written (sold) on or before **January 17, 2014**. (Include all repurchases no matter when they occurred, must be documented.)

Date of Purchase (Month/Day/Year)	Number of Contracts	Expiration Month and Year / Strike Price of Options (i.e. March 2012/\$40)	Price Paid Per Contract	Aggregate Cost*
/ /		/	\$	\$
/ /		/	\$	\$
/ /		/	\$	\$
/ /		/	\$	\$

4. ENDING HOLDINGS – State the total number of Nu Skin put option contracts open after the close of trading on **January 17, 2014**. If none, write "0" or "Zero." If you wrote any put options, thereby having a short position in the options, please state the total short position(s) as a negative number. (Must be documented.)

Price of Nu Skin Put Option Contract	Number of Put Option Contracts Held	Expiration Date of Put Option Contract (MM/YY)
\$		//
\$	/	//

* Excluding taxes, fees, and commissions.

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST PHOTOCOPY THIS PAGE AND CHECK THIS BOX

I. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGEMENTS

By signing and submitting this Proof of Claim and Release form, the claimant(s) or the person(s) acting on behalf of the claimant(s) certify(ies) that: I (We) submit this Claim Form under the terms of the Plan of Allocation described in the accompanying Notice. I (We) also submit to the jurisdiction of the United States District Court for the District of Utah with respect to my (our) claim as a Settlement Class Member(s) and for purposes of enforcing the releases set forth in the Settlement. I (We) further acknowledge that I (we) will be bound by the terms of any judgment entered in connection with the Settlement in the Action, including the releases set forth therein. I (We) agree to furnish additional information to the Claims Administrator to support this claim, such as additional documentation for transactions in Nu Skin securities, if required to do so. I (We) have not submitted any other claim covering the same transactions in Nu Skin Common Stock or Nu Skin Options during the Class Period and know of no other person having done so on my (our) behalf.

II. RELEASES, WARRANTIES, AND CERTIFICATION

1. I (We) hereby warrant and represent that I am (we are) a Settlement Class Member as defined in the Notice, that I am (we are) not excluded from the Settlement Class, that I am (we are) not one of the excluded Persons, as defined in the accompanying Notice, and that I (we) believe I am (we are) eligible to receive a distribution from the Net Settlement Fund under the terms and conditions of the Plan of Allocation, as set forth in the Notice.
2. I (We) hereby warrant and represent that I (we) have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any matter released pursuant to this release or any other part or portion thereof.
3. I (We) hereby warrant and represent that I (we) have included information about all of my (our) purchases, acquisitions and sales and other transactions in publicly traded Nu Skin Common Stock and Nu Skin Options that occurred during the Class Period and the number of Nu Skin securities held by me (us), to the extent requested.
4. I (We) certify that I am (we are) NOT subject to backup tax withholding. (If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike out the prior sentence.)

I (We) declare that all of the foregoing information supplied by the undersigned is true and correct.

Executed this _____ day of _____, 2016

Signature of Claimant

Type or print name of Claimant

Signature of Joint Claimant, if any

Type or print name of Joint Claimant, if any

Signature of person signing on behalf of Claimant, if any

Type or print name of person signing on behalf of Claimant, if any

Capacity of person signing on behalf of Claimant, if other than an individual (e.g., Administrator, Executor, Trustee, President, Custodian, Power of Attorney, etc.)

REMINDER CHECKLIST:

1. Please sign this Claim Form on Page 7.
2. Remember to attach supporting documentation, if available. DO NOT HIGHLIGHT ANY PORTION OF THE CLAIM FORM OR YOUR SUPPORTING DOCUMENTATION.
3. Do NOT send original stock certificates or original brokerage statements. These items cannot be returned to you by the Claims Administrator.
4. Keep a copy of your Claim Form and all documents submitted for your records.
5. The Claims Administrator will acknowledge receipt of your Claim Form by mail, within 60 days. **Your claim is not deemed submitted until you receive an acknowledgment postcard.** If you do not receive an acknowledgment postcard within 60 days, please call the Claims Administrator toll free at 866-963-9975.
6. If you move after submitting this Claim Form, please notify the Claims Administrator of the change in your address. If you change your name, please notify the Claims Administrator
7. If you have any questions or concerns regarding your Claim Form, please contact the Claims Administrator at the address below or toll free at 866-963-9975, or visit www.NuSkinSecuritiesSettlement.com

THIS CLAIM FORM MUST BE POSTMARKED OR RECEIVED ON OR BEFORE OCTOBER 6, 2016, ADDRESSED AS FOLLOWS:

In re Nu Skin Enterprises, Inc., Securities Litigation
c/o A.B. Data, Ltd.
PO Box 173022
Milwaukee, WI 53217