## Edgar Filing: NUTRA PHARMA CORP - Form 4

NUTRA P	PHARMA CORP										
Form 4											
March 25,	МЛ Л								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								MMISSION	OMB Number:	3235-0287	
	this box			U					Expires:	January 31,	
Section 16. Form 4 or				F CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES					Extimated average burden hours per response 0.		
-	Theu p	7(a) of the l	Public	Utility H		pany	Act of 1	Act of 1934, 935 or Section			
(Print or Typ	pe Responses)										
1. Name and Address of Reporting Person <u>*</u> POTTRUCK GARRY			2. Issuer Name <b>and</b> Ticker or Trading Symbol NUTRA PHARMA CORP [NPHC]				۲.	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (C					(Check	ck all applicable)		
10768 NW 18TH COURT			(Month/Day/Year) 02/10/2012				-	_X_Director10% Owner Officer (give titleOther (specify below)below)			
CORALS	(Street) SPRINGS, FL 330	071		mendment, Month/Day/Y	Date Original (ear)		A 	. Individual or Joi pplicable Line) X_ Form filed by Or Form filed by Mo erson	ne Reporting Per	son	
(City)	(State)	(Zip)	Т	able I - No	n-Derivative S	ecurit		red, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day,	l Pate, if	Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Nutra Pharma Corp	02/10/2012			А	2,875,000	А	\$ 0.0165	5,425,000	D		
Nutra Pharma Corp	10/18/2012			A	5,500,000	А	\$ 0.022	10,925,000	D		
Nutra Pharma Corp	11/25/2013			А	6,890,000	А	\$ 0.014	17,815,000	D		

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

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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 control number.

 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)	4. Transact Code (Instr. 8)	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S	Date	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	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				
POTTRUCK GARRY 10768 NW 18TH COURT CORAL SPRINGS, FL 33071	Х							
Signatures								
/s/ Garry Pottruck	3/25/2014							

<u>\*\*</u>Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

\*\* 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.