SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL

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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 of Reporting Person <sup>*</sup> Manovich Dave	2. Date of Event Requiring Statem (Month/Day/Year) 01/10/2012	ient 1	3. Issuer Name <b>and</b> Ticker or Trading Symbol Lifevantage Corp [ LFVN ]					
(Last) (First) (Middle) 9815 S. MONROE STREET		(	4. Relationship of Reporting Perso (Check all applicable) X Director Officer (give title	10% Owne Other (spe	er (M	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) SANDY UT 84070 (City) (State) (Zip)	_		below)	below)		X Form filed b	ay One Reporting Person ay More than One Person	
	Table I - Non	-Derivati	ve Securities Beneficiall	ly Owned				
1. Title of Security (Instr. 4)			Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
			e Securities Beneficially nts, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration Da (Month/Day/Y	te	3. Title and Amount of Securi Underlying Derivative Securi		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Explanation of Responses:	Date Exercisable	Expiration Date	Amount or Number		Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

No securities are beneficially owned.

/s/ Dave Manovich

01/17/2012

Date

\*\* Signature of Reporting Person

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 5 (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.