FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | | |
| l | Estimated average burden | | | | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 ai | | 2. Issuer Name and Ticker or Trading Symbol MANNATECH INC [MTEX] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | | |
| GILDE | | | | | | | | | | | X Directo | or | | 10% Ov | vner | | | | | |
| (Last) | ` | rst) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2005 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | | | |
| 600 S. R | OYAL LAN | NE, SUITE 200 | | | | | | | | | | | | | | | | | | |
| - | | | . 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | |
| (Street) | | | | | | | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | |
| COPPEI | L T | ζ . | 75019 | | | | | | | | | | | | | • | | n One Repo | | |
| - | | | | | | | | | | | | | | | Perso | | ie tilai | TOTIC INCPO | Turing | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non | -Deriv | ative | e Se | curitie | s Ac | quired, D | isp | osed c | of, or E | ene | ficial | ly Owned | d | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ar) I | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | | Benefici Owned I | es ally Following | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | / | Amount | (A (D | or | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) | |
| | | Т | | | | | | | uired, Dis s, options | | | • | | - | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | 4. Transactior Code (Instr. 8) | | 5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr.: and 5) | tive ties red sed | 6. Date Exer Expiration D (Month/Day) | ate | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | rative derivative | e s ally | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | piration te | Title | or Nu of | ımber | | | | | | |
| Right to buy common stock, par value \$0.0001 per share | \$20.64 | 04/07/2005 | 04/07/20 | 005 | A | | 2,000 | | 04/07/2005 | 04 | /06/2015 | Commo stock, par valu \$0.000 per shar | e 2 | ,000 | \$20.64 | 35,333 | 3 | D | | |

Explanation of Responses:

/s/ Gerald E. Gilbert

05/18/2005

** 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 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.