FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * JOHNSON MICHAEL				2. Issuer Nam HERBALIF	1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner										
1800 CE) NTURY P	(First) ARK EA		iddle)	3. Date of Earli 07/22/2008	iest Transa	ction	(Month/D	ay/Ye	ar)	X_Office	er (give title belo Ch		& CEO	(specify bel	ow)
		(Street)			4. If Amendme	nt, Date O	rigina	ıl Filed(Mo	nth/Day/	Year)	_X_ Form fil	ual or Joint/C led by One Reported by More than	rting Perso	on		Line)
LOS AN	GELES, C	(State)	((Zip)												
		(State)					Non-				quired, Dispo					
1.Title of S (Instr. 3)	ecurity		2. Transact Date (Month/Da	ny/Year) E	A. Deemed execution Date, if ny Month/Day/Year)	Code	on	4. Securi (A) or D (Instr. 3,	isposed	d of (D)	Beneficially	of Securities y Owned Fol ransaction(s) d 4)	lowing	Form: Direct (ship Indir Bene	ficial ership
						Code	V	Amount	(A) or (D)	Price				(I) (Instr. 4	Ì	4)
Common	Stock		07/22/20	008		F		3,235	D	\$ 38.655	253,045			D		
Common Stock (1)		09/10/20	800		A		875	A	\$ 0	253,920	920		D			
Common Stock										56,561		I	own thro Mic John	Beneficially owned through Michael O. Johnson IRA		
Reminder:	Report on a s	separate line			nrities beneficially Derivative Secu		P c tr	ersons v ontained ne form o	vho re in thi	is form a	o the collector not requirently valid	uired to res OMB cont	pond ι	unless	SEC 1	474 (9-02)
ı	ı				(e.g., puts, calls,	warrants.	opti	ons, conv	ertible	securitie	es)			-		
Security	2. Conversion or Exercise Price of Derivative Security		ay/Year) Ex	ıy	4. Transactic Code (Year) (Instr. 8)	5. Number of Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	ive es ed ed	i. Date Ex and Expira Month/Da	tion D	ate A T) U So	Title and mount of nderlying ecurities nstr. 3 and	(Instr. 5)	Derivat Securiti Benefic Owned Followi Reporte	tive ies cially ing ed ction(s)	Form of Derivative Security: Direct (D) or Indirec	(Instr. 4)
					Code	V (A) (F	Date Exercisable		iration Ti	Amount or Number of Shares					

Reporting Owners

		Re	lationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
JOHNSON MICHAEL 1800 CENTURY PARK EAST LOS ANGELES, CA 90067	X		Chairman & CEO	

Signatures

icki Tuchman by Power of Attorney	,	09/12/2008
**Signature of Reporting Person		Date
		l

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).
- (1) Consists of dividend equivalents accrued with respect to previous awards of restricted stock units granted under the Herbalife Ltd. 2005 Stock Incentive Plan.

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.