## FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
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hours por rosponso	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 Type Re	sponses)																	
Name and Address of Reporting Person *  Dunn Jeff				2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
800 W. OLYMPIC BLVD., SUITE 406				3. Date of Earliest Transaction (Month/Day/Year) 08/19/2016									Officer (give title below) Other (specify below)					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								_X_ For	6. Individual or Joint/Group Filing(Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
LOS ANGELES, CA 90015 (City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqui							uired, D	ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye			Exect any	2A. Deemed Execution Date any (Month/Day/Y	Date	, if				4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)						6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(IVIOII	Bu	y, 10	ar)	Code	V	Amoun	(A) or (D)	Price					or Indirect (I) (Instr. 4)	
Common Sto	ck		08/19/2016					M		4,170	A	\$ 20.9	21,25	21,255			D	
Common Sto	ck		08/19/2016					D		1,377 (1)	D	\$ 63.31	1 19,87	78			D	
Reminder, Repor	it on a separa	te fine for each ci	ass of securities be	- Deriv	ative S	Secu	ritie	es Acquir	Perso in thi a cur	ons who s form a rently v	are not r alid OM f, or Ben	equire B cont eficially	ed to re trol nur	spond u nber.		on containe form displa		1474 (9-02)
Derivative Conversion Date Execution D Security or Exercise (Month/Day/Year) any			te, if Transaction of Code De Code (A Di Off (Instr. 8)			5. N of Der Sect Acq (A) Disp of (I	ivative urities puired or posed D) tr. 3, 4,	6. Date Expirat	piration Date of onth/Day/Year) of Sec			Title and Amount Underlying scurities astr. 3 and 4)		Derivative I Security S (Instr. 5) E G F R	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat Security Direct ( or Indir	Beneficia Ownershi (Instr. 4)	
				C	Code	V	(A)		Date Exercis		piration ate	Titl	le	Amount or Number of Shares				
Stock Appreciation RIghts	\$ 20.9 (2)	08/19/2016			М			4,170	<u>(3</u>	11	/11/201	6	ommon Stock	4,170 (4)	\$ 0	0	D	

#### **Reporting Owners**

D ( O N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Dunn Jeff 800 W. OLYMPIC BLVD. SUITE 406 LOS ANGELES, CA 90015	X						

## **Signatures**

/s/ Mark J. Friedman, Attorney-in-Fact for Jeff Dunn	08/23/2016
***Signature of Reporting Person	Date

#### **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) The reporting person received 2,793 shares of common stock upon the net exercise of the reporting person's 4,170 stock appreciation rights ("SARS"). The reporting person forfeited 1,377 shares of common stock underlying the SARS in payment of the exercise price resulting from the exercise, using the closing stock price on August 19, 2016 of \$63.31.
- (2) This exercise price reflects the stock split that occurred on May 18, 2011.
- (3) The SARS vested in four equal installments on each of November 27, 2009, February, 27, 2010, May, 27, 2010 and August 27, 2010.
- (4) This amount reflects the stock split that occurred on May 18, 2011.

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.