FORM 4

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

OMB APPROVAL
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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) | | | | | | | | | | | | | | |
|---|---|--|---|---|----------------------------------|-----|--|--|--------------------|---|--|--|---------------|---|--|-------------|
| 1. Name and Address of Reporting Person* Irani Jehangir D | | | | 2. Issuer Name and Ticker or Trading Symbol HERBALIFE NUTRITION LTD. [HLF] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) SVP, PAO | | | | | |
| (Last) (First) (Middle) 800 WEST OLYMPIC BLVD. SUITE 406 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/26/2020 | | | | | | | | | | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 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 AN | GELES, C | A 90015 | | | | | | | | | | 1 01111 1110 | a by wore man | One Reporting | 1 013011 | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | Owned | | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transac Code (Instr. 8) | | 4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) | Beneficia | nt of Securities ally Owned Following I Transaction(s) | | Ownership o | 7. Nature of Indirect Beneficial | | |
| | | | | | | ode | V | (A) or | | (Instr. 3 a | 3 and 4) | | \ / | Ownership (Instr. 4) | | |
| Common | Stock | | 02/26/2020 | | | | F | | 228 (1 | | \$ 33.2 | 12 247 | | | D | |
| | | | | | | | equire | cont the f | ained i form di | n this fo splays a | orm a a curr enefici | re not requently valid | OMB conf | spond unle trol numbe | ss | 1474 (9-02) |
| 1. Title of | 2 | 3. Transactio | | (e.g., puts, o | | 5. | ts, op | | | | | Title and | 8 Price of | 9. Number | of 10. | 11. Natur |
| Derivative Security | Conversion or Exercise Price of Derivative Security | | Year) Execution Da | tte, if Transaction Code Year) (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | An Un Se | nount of aderlying curities astr. 3 and | Derivative Security (Instr. 5) | | Owners Form of Derivati Security Direct (1 or Indire | hip of Indirect Beneficia Ownershi (Instr. 4) | |
| | | | | Cod | le V | (A) | (D) | Date Exer | e rcisable | Expirati Date | ion Tit | Amount or Number of Shares | | | | |

Reporting Owners

| | | Relationships | | | | | |
|---|----------|---------------|----------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Irani Jehangir D 800 WEST OLYMPIC BLVD. SUITE 406 LOS ANGELES, CA 90015 | | | SVP, PAO | | | | |

Signatures

| Lisa Kwon, as Attorney-In-Fact for Jehangir Irani | 02/28/2020 | |
|---|------------|--|
| 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).
- Units withheld to satisfy the withholding tax obligations due in connection with the vesting of restricted stock units previously granted to the Reporting Person on February 26, 2018.

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.