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

OMB APPROVAL							
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longer subject to Section 16. Form 4 or Instruction 1(b).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may 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)																			
1. Name and Address of Reporting Person * JOHNSON MICHAEL				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								
(Last) (First) (Middle) 1800 CENTURY PARK EAST					3. Date of Earliest Transaction (Month/Day/Year) 05/29/2007									X_Officer (give title below) Other (specify below)  CEO						
(Street) LOS ANGELES, CA 90067				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 PersonForm filed by More than One Reporting Person								
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							quired, E	nired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year				te, if C	(Instr. 8)		(A	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)			Owned I Transact	× /		6. Owners Form:	ship Indirect Benefi	7. Nature of ndirect Beneficial				
				(Month/Day/Year)		(ear)	Code	,	V A	Amount	(A) or (D)	Price	(Instr. 3 and 4)				Oirect or India (I) (Instr. 4	rect (Instr.	Ownership (Instr. 4)	
Common Stoo	ck		05/29/2007				A		20 (1	0,700	A	\$ 0	81,049	31,049			D			
Common Stock												56,561			I	owne throu	gh ael O.			
Reminder: Repor	rt on a separa	ate line for each c	lass of securities be				<u> </u>	ti c	Person his fo curren	orm are ntly vali	not required	uired contr	to respo	ond unles er.	nformation s the form			SEC 147	74 (9-02)	
			Table II								, or Bene ble secur		ly Owned							
Derivative Security (Instr. 3)	2. 3. Transaction Date Or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)			if Transaction Code S (Instr. 8)		n Deriv Secur Acqu or Di (D)	decurities Acquired (A) or Disposed of D) Instr. 3, 4,		Expiration Date (Month/Day/Year)			of Se	Underlying curities	, ,		9. Num Derivat Securiti Benefic Owned Followi Reporte Transac	ive ies cially ing ed ction(s)	Form of Derivative Security: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	e V	v (A	A) (I		ate exercis	e Expiration Date		Ti	tle	Amount or Number of Shares		(Instr. 4	) (In	(Instr. 4)		
Stock Appreciation Rights (2)	\$ 40.25	05/29/2007		A		145,	,000		<u>(3</u> )	05	5/29/201	17	ommon Stock	145,000	\$ 0	145,	000	D		

# **Reporting Owners**

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

# **Signatures**

Vicki Tuchman by Power of Attorney	05/31/2007
**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) Consists of grant of restricted stock units under the Herbalife Ltd. 2005 Stock Incentive Plan. Each restricted stock unit represents a contingent right to receive one share of Common Stock and vests with respect to 1/3 of the stock units awarded on June 29, 2008, May 29, 2009 and May 29, 2010.
- (2) Stock Appreciation Rights granted pursuant to the Herbalife Ltd. 2005 Stock Incentive Plan.
- (3) Stock Appreciation Rights vest in 20% increments on May 29, 2008 and on May 29, 2009 with the remaining 60% increment vesting on May 29, 2010.

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.