FORM	4
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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).

(Print or Type Perponses)

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

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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 Responses)											
1. Name and Address of Reporting Per Zimmer Thomas	2. Issuer Name ar HERBALIFE L			ding Sym	bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) 1800 CENTURY PARK EAST	3. Date of Earliest 7 05/15/2007	Transactior	n (Mo	onth/Day/	Year)	XOfficer (give title below) Other (specify below) SVP, North America					
(Street) LOS ANGELES, CA 90067	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				
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	(Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Ben	Beneficial	
			Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	× /	Ownership (Instr. 4)	
Common Stock (1)	05/15/2007		А		6	А	\$0	9,402	D		
Common Stock (1)	09/14/2007		А		18	А	\$0	9,420	D		
Common Stock (1)	12/14/2007		А		18	А	\$0	9,438	D		
Common Stock (1)	03/15/2008		А		37	А	\$0	9,475	D		
Common Stock (1)	06/13/2008		А		43	А	\$0	9,518	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Num	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Deriv	Derivative		Securities (Instr. 5)		Beneficially	Derivative	Ownership		
	Derivative					Secu	Securities		(Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security					Acqu				4)			0	Direct (D)	
						(A) o							1	or Indirect	
						Dispo							Transaction(s)	< / .	
						· · ·	of (D)					(Instr. 4)	(Instr. 4)		
						· ·	(Instr. 3,								
						4, and	4, and 5)			ī.					
											Amount				
								Date	Expiration		or				
							Exercisable Date		Title Number						
									Dute		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Zimmer Thomas 1800 CENTURY PARK EAST LOS ANGELES, CA 90067			SVP, North America					

Signatures

Vicki Tuchman by Power of Attorney

06/17/2008

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 dividend equivalents accrued with respect to previous awards of unvested 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.