FORM 5

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

OMB APPROVAL						
OMB Number:	3235-0362					
Estimated average burden						
hours per response	e 1.0					

subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3 Holdings Reported

Form 4 Transactions

Reported

ANNUAL 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

1. Name and Address of Reporting Pe LEVY ROBERT	2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) 800 W. OLYMPIC BOULEV	(Middle) ARD, #406	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008					X Officer (give title below) Other (specify below) SVP/Worldwide Dist. Sales			
(Street) LOS ANGELES, CA 90015	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line) _X_ Form Filed by One Reporting Person				
(City) (State)	Tabla I - Nan-Dariyatiya Sacuritias Acque					Form Filed by More than One Reporting Person sired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transaction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		uired of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form:	Beneficial Ownership	
Common Stock	12/02/2008		G(1)	1,000	D	\$ 0	54,938	D		
Common Stock	12/02/2008		G	1,000	A	\$ 0	55,938	I	By children	

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 2270 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., 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	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	er	and Expirati	on Date	Amou	int of	Derivative	of	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Derivative	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	ities	(Instr. 5)	Securities	Derivative	Ownership	
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)	
	Security				Acqui	red			4)			Owned at	Direct (D)		
					(A) or	•						End of	or Indirect		
					Dispo	sed						Issuer's	(I)		
					of (D))						Fiscal Year	(Instr. 4)		
					(Instr.	3,						(Instr. 4)			
					4, and	5)									
										Amount					
							Dete	E!4!		or					
								Expiration	Title	Number					
							Exercisable	Date		of					
					(A)	(D)				Shares					

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LEVY ROBERT 800 W. OLYMPIC BOULEVARD, #406			SVP/Worldwide Dist. Sales				
LOS ANGELES, CA 90015							

Signatures

Richard Strulson by Power of Attorney	02/17/2009
**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).
- This transaction involved a gift of securities by the reporting person to his children, who share the reporting person's household. The reporting person disclaims beneficial (1) ownership of the shares held by his children, and this report should not be deemed an admission that the reporting person is the beneficial owner of his children's shares for purposes of section 16 or for any other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.