## 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 *- Walsh Des					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					
800 W. OLYMPIC BOULEVARD, #406					3. Date of Earliest Transaction (Month/Day/Year) 07/30/2009						X Officer (give title below) Other (specify below)  EVP/Worldwide Ops. & Sales					
(Street) LOS ANGELES, CA 90015				4.	4. If Amendment, Date Original Filed(Month/Day/Year)						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 Acqu							ired, Disposed of, or Beneficially Owned				
(Instr. 3)			2. Transaction Date (Month/Day	Year) E	A. Deemed execution Date, if ny Month/Day/Year	Code (Instr. 8)		1 4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D)	Beneficia	ally Owned Following Transaction(s)		Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Commor	Stock		07/30/200	9		Code	V	Amoun 686		Price \$ 0	59,098			(Instr. 4)		
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Y	3A. De Execut Year) any	(e.g., emed on Date, if	4. if Transaction Code ar) (Instr. 8)		(Month/Day/Year)		7. Ti Amo Unde Secu	Y. Title and Amount of Underlying Securities Instr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersl Form of Derivati Security Direct (I or Indire	(Instr. 4)		
						of (D) (Instr. 3, 4, and 5)	Date Exer	cisable	Expiration Date	Title	Amount or tle Number of		(Instr. 4)	(Instr. 4)		
Repor	ting O	wners			Code V	(A) (D)					Shares					
Reporting Owner Name / Address					Relationships											
				Director	tor 10% Officer					0	ther					

EVP/Worldwide Ops. & Sales

### **Signatures**

Walsh Des

Desmond J. Walsh by Richard Strulson, Attorney in Fact	08/03/2009		
**Signature of Reporting Person	Date		

## **Explanation of Responses:**

800 W. OLYMPIC BOULEVARD, #406

LOS ANGELES, CA 90015

\* 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).

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.