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

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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

	3 C																
1. Name and Address of Reporting Person* Henig Yair Steve				2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]								5	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) 12/18/2009									X Officer (give title below) Other (specify below) Chief Scientific Officer				
(Street) LOS ANGELES, CA 90015				4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City		(State)	(Zip)			Т	able I	- Non	ı-Deriv	ative S	Securitie	s Acquir	ed. Disposed	l of, or Bene	eficially Own	ed	
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		e, if	3. Transaction Code (Instr. 8)		on 4.	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		uired 5	5. Amount of	Securities Beneficially ring Reported		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
							Cod	le	V A	mount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		12/18/2009				M		5,	,000	A	\$ 23.4	23,809			D	
Common	Stock		12/18/2009				S <u>(1</u>	Ĵ	7,	,349	D	\$ 41.5	5 16,460			D	
			Table II -					di uired,	splays	s a cui	rrently v	valid ON	to respond MB control		e ioiiii		
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative		3A. Deemed Execution Date, is	(e.g., puts, calls, w 4. 5. N Transaction of Code Deri r) (Instr. 8) Sect Acq (A) O Disp of (I		s, want of Derive Securi Acqui (A) or Dispo	arrants, options, umber 6. Date I Expiratio (Month/l urities urities or oosed D)		ons, con te Exer ration I	expressed of, or Beness, convertible secur Exercisable and ion Date ion Date //Day/Year)		ities)	and Amount rlying		Securities Beneficially Owned Following Reported Transaction(s	Owners Form of Derivat Security Direct (or Indirect)	Ownershi (Instr. 4)
				Code	8	and 5))	Date Exerc	cisable	Expira Date	ation	Title	Amount or Number of Shares			(msn	,
Non- Qualified Stock Option (Right to Buy)	\$ 23.4	12/18/2009		М			5,000	ļ	(2)	07/18	8/2015	Comm Stocl	ion 5,000	\$ 0	15,000	D	
Non-Qualified Stock Option (Right to	or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution Date, is	4. f Transac Code (Instr. 8	etion (Derive Securing Acquired (A) or Disposition of (D)	mber rative rities ired rosed) . 3, 4,)	Date Exerc	nte Exercite Exercite Exercite Internation Inth/Day	ecisable Date VYear) Expira Date	e and	7. Title of Unde Securitie (Instr. 3	Amount or Number of Shares	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivar Securit Direct or India s) (I) (Instr. 4	ti ()

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Henig Yair Steve 800 W. OLYMPIC BOULEVARD, #406 LOS ANGELES, CA 90015			Chief Scientific Officer				

Signatures

Yair Steve Henig by Brett R. Chapman, attorney-in-fact	12/22/2009	
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).
- (1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 19, 2009.
- (2) Consists of Non-Qualified Stock Options granted under the Herbalife Ltd. 2004 Stock Incentive Plan. The options vest quarterly in 5% increments commencing 09/30/2005 through 06/30/2010.

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.