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

	pe Response	8)													
Name and Address of Reporting Person * Cuesta Patricio				2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) SVP/Managing Director SAM				
(Last) (First) (Middle) 800 W. OLYMPIC BLVD., SUITE 406			3. Date of Earliest Transaction (Month/Day/Year) 04/06/2010												
(Street) LOS ANGELES, CA 90015				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)		Tahla	I - Nor	Dori	ivativa S	Socurition	Acqui	rad Dien	nsed of or l	Ranaficially	Owned	
1.Title of S (Instr. 3)	1.Title of Security 2. Transaction Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any	if Co	3. Transac Code (Instr. 8)					Beneficially Owned Following Ownership of Reported Transaction(s) Form: Be		Beneficial		
				(Month/Day/Yea		Code	V	Amount	(A) or t (D)	Price	(I)		or Indirect	Ownership (Instr. 4)	
Common	Stock		04/06/2010]	F(1)		382		\$ 44.62	4,568			D	
Reminder:	Report on a s	separate line for	each class of secur	rities beneficially	owned		Perso	ons wh	o respo			ction of inf			1474 (9-02)
Reminder:	Report on a s	separate line fo	Table II -	Derivative Secui	rities A	Acquire	Perso conta the fo	ons wh ained ir orm dis	o respo n this fo splays a	rm are curren neficiall	not requ tly valid	uired to res	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security		3. Transaction Date (Month/Day/Y	Table II - 3A. Deemed Execution Da any	·	5. Nun of Deri Secu Acq (A)	acquire nts, open nber ivative uired or posed D) tr. 3,	Perso conta the fo ed, Dis tions, 6. Da and E	ons wh ained ir orm dis	orespon this for splays a of, or Bertible secucisable on Date	rm are curren neficially rities) 7. Tit Amore Unde Secure	not required to the and count of erlying	OMB con 8. Price of	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natur of Indire Beneficia Ownersh : (Instr. 4)

Reporting Owners

Ī		Relationships					
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
	Cuesta Patricio 800 W. OLYMPIC BLVD., SUITE 406 LOS ANGELES, CA 90015			SVP/Managing Director SAM			

Signatures

Patricio Cuesta by Brett R. Chapman, Attorney-in-Fact	04/08/2010
**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).
 - Pursuant to the Issuer's 2005 Stock Incentive Plan and the terms of the related award agreement, shares of the Issuer's common stock are issued to the Reporting Person as his restricted stock units vest, with a portion of the newly issued shares automatically withheld by the Issuer to satisfy the resulting withholding tax obligation. This Statement of
- (1) Changes of Beneficial Ownership has been filed to reflect that withholding of shares due to a recent vesting of restricted stock units held by the Reporting Person. The withholding of the newly issued shares occurred automatically upon the vesting of the restricted stock units, and as such, no investment decision was made by the Reporting Person in connection with this transfer.

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.