## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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* Cuesta Patricio					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) (Middle) 800 W. OLYMPIC BLVD., SUITE 406					3. Date of Earliest Transaction (Month/Day/Year) 05/28/2010							X Officer (give title below) Other (specify below)  SVP/Managing Director SAM					
(Street) LOS ANGELES, CA 90015				4. If Amer	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)		T	able I -	Non	-Der	ivative S	Securitie	s Acqui	ired, Disp	osed of, or l	Beneficially	Owned		
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year		Date, if	(Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)			of (D)	Beneficia Reported	nt of Securities Illy Owned Following Transaction(s)		6. Ownership Form:	ship of B	Beneficial
				(Month/Da	ny/Year	Coe	de	V	Amoun	(A) or (D)	Price	(Instr. 3 a	and 4)		or India (I) (Instr. 4	rect (I	wnership nstr. 4)
Common	Stock		05/28/2010			A <sup>(</sup>	1)		11	A	\$ 0	4,579		D			
Common Stock 05/29/2		05/29/2010			FC	<u>2)</u>		28	11)	\$ 45.15	4,551	4,551		D			
			Table II	- Derivative			quire	cont the f ed, Di	ained in form dis	n this fo splays a of, or Be	orm are currei	not requesting noting valid	OMB con	spond unle	ess	SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)			n 3A. Deemed Execution Day Year) any	4. Transaction Code Year) (Instr. 8)		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ti Amo Und Secu	itle and ount of erlying urities r. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ow For Der Sec Dire or I	nership m of ivative urity: ect (D) ndirect tr. 4)	Beneficia Ownershi (Instr. 4)	
				Cod	le V	(A)	(D)	Date Exer		Expiration Date	Title	or Number of Shares					
Repor	ting O	wners															

	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**

Pa	atricio Cuesta by Brett R. Chapman, Attorney-In-Fact	06/02/2010		
	**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).
- (1) Consists of dividend equivalents accrued with respect to previous awards of restricted stock units granted under the Herbalife Ltd. 2005 Stock Incentive Plan.

  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
- (2) 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.