FORM 4

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

OIVID AFFRON	AL
OMB Number:	3235-028
Estimated average bur	den
hours per response	0.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

mstruction	1(0).			111 V	Cotin	iciit C	ompan	y rice v	01 17							
(Print or Type Re	esponses)															
Name and Address of Reporting Person* Fernandez Calero Miguel Angel				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. OLY		3. Date of Earliest Transaction (Month/Day/Year) 05/31/2012								X_Officer (give title below) Other (specify below) SVP/Managing Director Mexico						
(Street)				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				
LOS ANGEL	LES, CA 9												ore man one re	eporting reison		
(City)		(State)	(Zip)			T	able I -	Non-De	rivativ	ve Securities	Acquire	d, Disposed o	f, or Benefi	cially Owned	l	
(Instr. 3) Date		2. Transaction Date Month/Day/Year	2A. Deemed Execution Date, ar) any (Month/Day/Yea		ite, if (3. Transa Code Instr. 8)	(A) or Disp		Disposed of 3, 4 and 5)	f (D) Ov	(D) Owned Following Reported Transaction(s) (Instr. 3 and 4)		Or Fo Di or (I)	Ownership Form:	7. Nature of Indirect Beneficial Ownership	
					,	Code	V	V Amount (A) or		Price					(Instr. 4)	
Common Sto	ck	(05/31/2012				A ⁽¹⁾		33	A	\$ 0 5,	320			D	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date,	(e.g., puts, calls, w. 4. 5.1 re, if Code Sec Year) (Instr. 8) Accord of (Instr. 8) (Instr. 8) Accord		5. Nur of Der Securi Acqui or Dis of (D)	ities Acquired, warrants, option Number 6. Derivative excurities equired (A) Disposed (D) nstr. 3, 4,		a currently valid OMB c ed, Disposed of, or Benefic bitions, convertible securitie 6. Date Exercisable and Expiration Date (Month/Day/Year)		cially Owned		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form of Derivati Security Direct (I or Indirects)	Ownersh: (Instr. 4)
				Code	e V	(A)	(D)	Date Exercis		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Appreciation Rights	\$ 44.79	05/31/2012		A		24,59		<u>(2</u>) (05/31/2022	Comn	non 24 590	\$ 0	24,590	D	
Reportin	ıg Owr	iers														
					R	elation	ships				1					
Reportin	g Owner Na	me / Address	10%													

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Fernandez Calero Miguel Angel 800 W. OLYMPIC BLVD., SUITE 406 LOS ANGELES, CA 90015			SVP/Managing Director Mexico					

Signatures

Miguel Fernandez Calero by Brett R. Chapman, Attorney-in-Fact	06/04/2012		
**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.
- (2) Consists of stock appreciation rights granted under the Herbalife Ltd. 2005 Stock Incentive Plan, of which 20% will vest May 31, 2013, 20% will vest May 31, 2014, and 60% will vest May 31, 2015.

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.	