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

	pe Response	- /												
1. Name and Address of Reporting Person* Nelson James Larry				2. Issuer Name and Ticker or Trading Symbol HERBALIFE LTD. [HLF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner				
(Last) (First) (Middle) 800 W OLYMPIC BLVD, SUITE 406			3. Date of Earliest Transaction (Month/Day/Year) 05/07/2015					Office	er (give title belo	ow)	Other (specify b	elow)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 05/11/2015					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
LOS ANGELES, CA 90015 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					uired, Disposed of, or Beneficially Owned						
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it	Deemed 3. Transaction Date, if Code (Instr. 8)				uired of			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V Amount (D) Price				(Instr. 4)							
Common	Stock (1)	(05/07/2015		A		2,510 (1)	A	\$ 0	4,510			D	
Reminder:	Report on a s	separate line for	each class of secur	ities beneficially or	wned dir	Pers	ons wh	o respo			ction of inf	ormation		1474 (9-02)
Reminder:	Report on a s	separate line for	Table II - I	Derivative Securit	ies Acqu	Person the	sons wh tained in form dis	no respon n this for splays a	m are curre	e not requently valid	uired to res OMB con		ss	1474 (9-02)
1. Title of		3. Transaction Date (Month/Day/Yo	Table II - 1 (3A. Deemed Execution Date any	Derivative Securit e.g., puts, calls, wa 4. te, if Transaction Code Year) (Instr. 8)	ies Acquarrants,	Person con the ired, Doptions 6. Cand (Move set) d Date	sons wh tained in form dis isposed (i, convert Date Exert Expirationth/Day/	no responding this for responding this for splays a soft, or Bentible secution bate and the responding the responding to	eficial rities) 7. T Am Und Sect (Ins 4)	e not requently valid	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natu of Indire Benefici: Ownersh (Instr. 4)

Reporting Owners

B # 0 Y /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Nelson James Larry 800 W OLYMPIC BLVD SUITE 406 LOS ANGELES, CA 90015	X					

Signatures

James L. Nelson by Mark J. Friedman, Attorney-in-Fact	06/03/2015
**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 restricted stock units granted under the Herbalife Ltd. 2014 Stock Incentive Plan. This line item is being re-reported solely to gain access to the electronic filing system to correct the vesting schedule of the restricted stock units granted to the reporting person. This award will vest 100% on April 15, 2016.

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.