## 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

(Print or Type I	Responses	s)			_														
1. Name and Address of Reporting Person * JOHNSON MICHAEL					2. Issuer Name <b>and</b> Ticker or Trading Symbol HERBALIFE NUTRITION LTD. [HLF]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
(Last) (First) (Middle) 800 W. OLYMPIC BLVD., SUITE #406					3. Date of Earliest Transaction (Month/Day/Year) 05/07/2018								X_Offic	X_Officer (give title below) Other (specify below)  Executive Chairman					
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							ar)	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 ANGELES, CA 90015 (City) (State) (Zip)						Table I. Non Douivative Securities 4 co.							quired Disn	uired, Disposed of, or Beneficially Owned					
(Instr. 3) Date (Month/Day/Year)		Execut any	2A. Deemed Execution Date, if		3. Transactio						d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D)	7. Na Indir Bene D) Own	ficial ership				
Common St	rock		05/07	7/2018				Coc A <sup>C</sup>		V	Amount 1,195	(D)	Price \$ 0	2,064,152	,		(Instr. 4	-)	
Common St			03/07	7/2010				A			1,173	A	<b>\$</b> 0	35,340			I	owr thro	ugh a t for his
Common St	rock													113,122			Ι	owr thro Mic	ugh hael O. nson
Reminder: Rep	port on a s	eparate line	for each							Per cor the	rsons wi ntained i form di	ho resp in this i splays	form a	to the colle are not requ rently valid	uired to res OMB con	spond	unless	SEC 1	474 (9-02)
				1 able 11							is, convei					1			_
(Instr. 3) Pri De	Conversion Date		/Day/Year) any		d 4. Date, if Transaction Code (/Year) (Instr. 8)			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		A U S	,	(Instr. 5)	Deriva Securit Benefic Owned Follow Report	tive cies cially l ing ed ction(s)	Form of Derivative Security: Direct (Door Indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)	
						Code	V	(A)	(D)	Da Ex	te ercisable	Expirate Date	tion	Amount or Number of Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
JOHNSON MICHAEL 800 W. OLYMPIC BLVD., SUITE #406 LOS ANGELES, CA 90015	X		Executive Chairman				

/s/ Eileen Uy, Attorney-in-Fact for Michael O. Johnson	05/09/2018
**Signature of Reporting Person	Date

## **Explanation of Responses:**

**Signatures** 

- \* 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 ("RSU") under the Herbalife Nutrition Ltd. 2014 Stock Incentive Plan. Each RSU represents a contingent right to receive one share of Herbalife Ltd. common stock on vesting. This award will vest 100% on April 15, 2019.

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.