FORM 4	4
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(Print or Type Perponses)

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### 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

1. Name and Address of Reporting Per Amezquita Alexander	2. Issuer Name an HERBALIFE N			0,			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
800 W. OLYMPIC BLVD., SU	(Middle) JITE 406	3. Date of Earliest Transaction (Month/Day/Year) 11/06/2018						X  Officer (give title below)  Other (specify below)    SVP, Finance & Strat. Planning			
(Street) LOS ANGELES, CA 90015	4. If Amendment, 1	Date Origii	nal Fi	led(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)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		Execution Date, if		v	(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership	
Common Stock	11/06/2018		F <mark>(1)</mark>		831	D	\$ 55.19	16,511 <sup>(2)</sup>	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ess

\_\_\_\_\_\_

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.			4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	ion	Numl	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year) U		Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Securities (Ir		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities	s (		(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o							Reported	or Indirect	
						Dispo	sed						Transaction(s)	(I)	
						of (D						(Instr. 4)	(Instr. 4)		
						(Instr	· · ·								
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

		Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Amezquita Alexander 800 W. OLYMPIC BLVD. SUITE 406 LOS ANGELES, CA 90015			SVP, Finance & Strat. Planning							

# Signatures

/s/ Henry Wang, Attorney-in-Fact for Alexander Amezquita	11/08/2018
**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) The reporting person was previously granted restricted stock units on November 6, 2017, a portion of which vested on November 6, 2018. The reporting person forfeited 831 shares of the Issuer's common stock to satisfy the tax withholding obligation resulting from the vest, using the closing stock price on November 6, 2018 of \$55.19.
- (2) On May 14, 2018, the common stock of Herbalife Nutrition Ltd. split 2-for-1, resulting in the reporting person's acquisition of 8,671 additional shares of common stock.

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.