Edgar Filing: HERBALIFE LTD. - Form 4

HERBALIFE	E LTD.											
Form 4												
July 18, 2016	5											
FORM	4		CECUD						r	PPROVAL		
	UNITED	SIAIES					NGE	COMMISSION	OMB Number:	3235-0287		
Check this box if no longer				hington, D.C. 20549					Expires:	January 31,		
subject to		MENT O	F CHAN			NEFICIAL OWNERSHIP OF				2005 average		
Section 16. SECURITIES								burden hours per				
Form 4 or Form 5		rsuant to	Section 16	5(a) of the	Securiti	es Fr	chan	ge Act of 1934,	response	0.5		
obligation	¹⁸ Section 17							of 1935 or Sectio	n			
may conti <i>See</i> Instru	inue.		of the Inv	•	•	- ·						
1(b).												
(Drint or Type D												
(Print or Type R	(esponses)											
1. Name and Address of Reporting Person2. Issuer Name andChiu Shin-Shing BoscoSymbol				Name and	Ticker or Trading 5. Relationship of Reporting Per				son(s) to			
				-				Issuer				
HEI			HERBA	IERBALIFE LTD. [HLF]				(Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earliest Transaction					k an application	.)			
			(Month/Da	•				Director		6 Owner		
	MPIC BOULE	VARD,	07/15/20)16				X Officer (give below)	below)	er (specify		
SUITE 406								Principal	Accounting O	fficer		
(Street) 4. If A			4. If Amer	If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Mon				/Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
LOS ANGE	LES, CA 90015							Form filed by N				
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2/ (Month/Day/Year) E: ar		emed on Date, if	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)				SecuritiesFBeneficially(OwnedI	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial		
		-	(Month/Day/Year)		(Instr. 8) (Instr. 3, 4 and 5)				Indirect (I)	Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	07/15/2016			S (1)	2,000	D	\$ 68	0	D			

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

Stock

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

Edgar Filing: HERBALIFE LTD. - Form 4

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, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Chiu Shin-Shing Bosco 800 W. OLYMPIC BOULEVARD, SUITE 406 LOS ANGELES, CA 90015			Principal Accounting Officer				
Signatures							
/s/ Eileen Uy, Attorney-in-Fact for Shin-Shing Bo Chiu	osco	07/18/	2016				
<u>**</u> Signature of Reporting Person		Date	e				
Evaluation of Responses:							

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) This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 19, 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.